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Fostering stakeholder collaboration that is Value-driven, Sustainability-focused and Measurement-based when reforming health care

What sets the U.S. apart in its approach to managing these underlying forces is its predominantly market-based health care system. The ACA refrains from any kind of systemic shift in this system toward more centralization, either for payment (e.g., single payer) or for care delivery (e.g., a national health service). It instead is keeping intact the system's current marketplace structure, wherein multiple providers, suppliers, payers and purchasers compete independently for market share. What also sets the U.S. system apart is a paradox. The U.S. spends more on health care than the next ten developed countries combined yet in just about every measurable way the epidemiologic outcomes that result are not better and often not as good.

This paradox is combining with the ACA's blend of transformative reforms and preserved marketplace competition to accelerate the need for new strategies to achieve sustainable value. All four of the above stakeholder groups are facing this challenge. On one hand, each group's organizational members need to improve - or at least hold steady -- their ratios of stakeholder-specific outcomes achieved to costs incurred (value). On the other, stakeholder value for each such group needs to be pursued in ways that preserve the system for future use (sustainability). Any one group's attainment of value in ways that are unsustainable impairs the roles -- and future participation in health care -- of all stakeholders, including the group itself.

Measures that aptly capture stakeholder perspectives on sustainable value, coupled with dialogue between stakeholder groups anchored by these measures, offer a means for fostering the strategy development and stakeholder collaboration needed to meet these challenges. This session will:

- Introduce the concepts of value and sustainability differentiated by the primary roles that providers, suppliers, payers and purchasers play vis-à-vis the patient/consumers they serve
- Anchor these concepts by proposing measures and hypotheses for each of the four groups
- Present results that document how leading purchasers used stakeholder-focused measures of indirect costs to achieve sharp gains in the sustainable value of their workforce investment
- Probe the interests that providers and purchasers share in promoting the wider use of these measures to manage their respective challenges as a model for stakeholder collaboration

Explore implications for the use of measures of value and sustainability to shape stakeholder strategy development and collaboration in less market-oriented systems.

Biography

After more than 15 years in corporate and consulting positions, Dr. Allen formed this group in 1997 with a multi-disciplinary team of colleagues to provide consulting on health and productivity measurement and management and on health care strategy development. Dr. Allen's work history in performance consulting, research and evaluation has spanned posts in the non-profit and private sectors. He has served at The Rand Corporation, Aetna Life and Casualty, New England Medical Center, Coopers & Lybrand, LLP, the Yale School of Epidemiology & Public Health and Jefferson Medical College. He has directed numerous projects involving the development, implementation, analysis and reporting of surveys and integrated databases. The clients have ranged from employers, employer coalitions, health plans, health plan associations, pharmaceutical and specialty firms to state agencies. His specialty is working with tools that scientifically measure and manage various issues related to productivity, safety, disease management, quality of care, health care outcomes and patient satisfaction, workers compensation and disability, group health, pharmaceutical use, managed care and return on investment. He has published and presented widely on numerous topics in health, productivity and health care.

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