



## We're at a Time of Incredible Advancements While Lacking Fundamentals of Delivering Affordable and Accessible Care

### Amazing advancements



*"We have Star Wars science and Flintstones delivery. Our opportunities are in the space age, but our ability to get people to care they need, it's in the Stone Age."*

— Physician

## Objective and Approach

Identify significant trends and best practices to assist stakeholders who interact with managed care pharmacy to better adjust to and maximize opportunities for cost-effective, affordable, integrated patient care

Trends scan

30 trends/  
areas of impact

Thought leader  
working group

6 key trends + 2 global influencers



Desktop  
research  
>170 sources  
identified



20 multi-  
stakeholder  
1:1 interviews



Payer  
survey  
N=70

3

PB42

## Secondary Research Was Conducted Against a Framework Designed to Capture Specific Elements

Which  
stakeholders  
were affected

Stakeholder  
implications

Improvements  
or efficiencies  
gained

Challenges

Best practices

Policy impact

Impact over  
next 5 years

Impact on  
workforce

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## 34 Health Care Leaders and Experts Were Involved

<b>Alan Balch</b> Patient Advocate	<b>Kathleen Cameron</b> National Council on Aging	<b>Peggy Compton</b> UPenn School of Nursing	<b>Joe Couto</b> Cigna
<b>Sean Dickson</b> Pew Charitable Trusts	<b>Joseph DiPiro</b> VCU School of Pharmacy	<b>Robert Dubois</b> National Pharma. Council	<b>Joseph Dye</b> UCB
<b>Mark Fendrick</b> UMich Medical School	<b>Brian Gifford</b> Integrated Benefits Institute	<b>Chris Goff</b> Employers Health	<b>Sally Greenberg</b> Nat'l Consumers League
<b>Mark Hamelburg</b> AHIP	<b>G. William Hoagland</b> Bipartisan Policy Center	<b>Tom Hubbard</b> Network for Excellence in Health Innovation	<b>Marjorie Jenkins</b> Laura W. Bush Institute for Women's Health
<b>Rebecca Kirch</b> National Patient Advocate Foundation	<b>Larry Kocot</b> KPMG	<b>Esther Krofah</b> FasterCures	<b>Dan Leonard</b> National Pharma. Council
<b>Mary Logan</b> WomenHeart	<b>Ruth Nemire</b> American Assoc of Colleges of Pharmacy	<b>Jeremey Nobel</b> Harvard Medical School	<b>Mary Kay Owens</b> Institute for Healthcare Innovation Strategies
<b>Thomas Parry</b> Integrated Benefits Institute	<b>Eleanor Perfetto</b> National Health Council	<b>John Rother</b> National Coalition on Health Care	<b>Joe Selby</b> PCORI
<b>Lynn Shapiro Snyder</b> Epstein Becker & Green	<b>Kathleen Shoemaker</b> Premier	<b>Kevin Sneed</b> USF College of Pharmacy	<b>Jennifer Stephens</b> Pharmerit International
	<b>Reed Tuckson</b> Tuckson Health Connections	<b>Alan Weil</b> Health Affairs	

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## Thought Leader Working Group Consisted of Stakeholders From a Variety of Perspectives

Full-day workshop with 14 thought leaders to review topics

### Advisory Organization by Stakeholder Focus

#### PATIENT FOCUS

- National Patient Advocate Foundation
- Laura W. Bush Institute for Women's Health
- AMCP Foundation



#### PHARMACIST / PROVIDER FOCUS

- Harvard Medical School
- American Association of Colleges of Pharmacy
- Institute for Healthcare Innovation Strategies



#### POLICY FOCUS

- Bipartisan Policy Center
- National Coalition on Healthcare
- FasterCures
- Pew Charitable Trusts
- Network for Excellence in Health Innovation



#### PAYER / EMPLOYER FOCUS

- AMCP
- Integrated Benefits Institute
- AHIP
- KPMG, Center for Healthcare Regulatory Insight













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## Initial List Included Over 30 Topics

Affordability and value	Government policy	Patient voice in drug development	Optimal health coverage	Aging population
Mobile health	Diagnostics	Biosimilars	Preventive medicine	Disruptive innovators
Adherence	Expedited drug approval	Plan design	Health crises	Industry consolidation
Transparency	Artificial intelligence (AI)	Gene therapy	Population health management	Health information technology (IT)
Big data	Value-based contracting	Opioid abuse	Pandemics	Delivery system
Care coordination	Privacy	Innovative and curative therapies	Social determinants	Consumerism




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## 6 Key Trends Identified As Well As 2 Key Global Influencers

<b>Affordability and value</b> 	Government policy	Patient voice in drug development	<b>Optimal health coverage</b> 	Aging population
Mobile health	Diagnostics	Biosimilars	Preventive medicine	Disruptive innovators
Adherence	<b>Expedited drug approval</b> 	Plan design	Health crisis	<b>Industry consolidation</b> 
Transparency	<b>Artificial intelligence (AI)</b> 	Gene therapy	<b>Population health management</b> 	<b>Health information technology (IT)</b> 
<b>Big data</b> 	Value-based contracting	Opioid abuse	Pandemics	Delivery system
Care coordination	Privacy	<b>Innovative and curative therapies</b> 	<b>Social determinants</b> 	Consumerism




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## Key Topics Were Defined to Capture the Most Impactful Insights

<b>Affordability and Value</b>	<ul style="list-style-type: none"> <li>Cost of health care, including prescription drugs</li> <li>Aggregate spending throughout supply chain</li> </ul>	
<b>Innovative and Curative Therapies</b>	<ul style="list-style-type: none"> <li>Precision medicine</li> <li>Gene therapy</li> <li>Biosimilars</li> </ul>	
<b>Industry Consolidation</b>	<ul style="list-style-type: none"> <li>Consolidation defined is simply bringing together 2 (or more) previously independent entities</li> </ul>	

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## Key Topics Were Defined to Capture the Most Impactful Insights (cont'd)

<b>Optimal Health Coverage</b>	<ul style="list-style-type: none"> <li>Design of health insurance to realize the best value while improving the quality of health care services and employee health</li> </ul>	
<b>Population Health Management</b>	<ul style="list-style-type: none"> <li>Management of specific diseases in certain populations to improve outcomes</li> </ul>	
<b>Expedited Drug Approval</b>	<ul style="list-style-type: none"> <li>When the FDA deems a drug meets a particular unmet clinical need, it has the flexibility to expedite its review. 4 programs offer this flexibility for drugs meeting different qualifying criteria: priority review, accelerated approval, fast track, and breakthrough therapy</li> </ul>	

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## Global Influencers Impact All 6 of the Key Topics

### Health IT, AI, and Big Data

- Examples may include mining pharmacy and insurance data, using large data sets for treatment plans, and wearables that collect patient information



### Social Determinants

- Conditions in the environments in which people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks



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## Further Insights Were Collected Through Interviews and Surveys From a Variety of Organizations and Perspectives

### Interviews



- Patient/Consumers
- Academia
- Health Policy
- Employers
- Pharma Industry
- Health Plans & Systems
- Managed Care Pharmacy

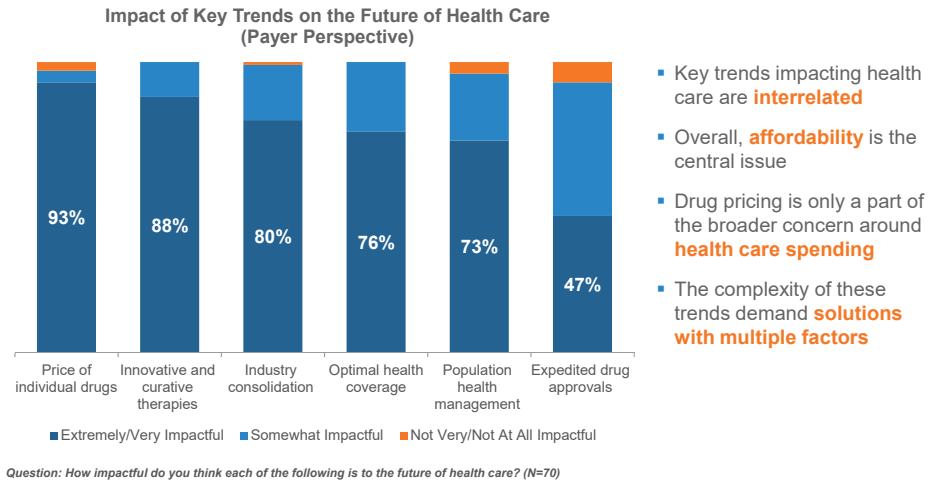
### Survey Respondents



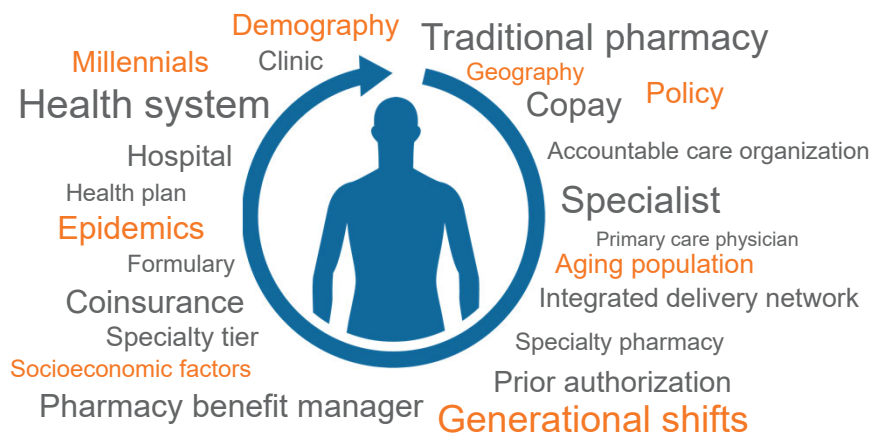
- Health Plan and System
- Pharmacy Benefit Manager (PBM)
- Specialty Pharmacy (SP)
- Integrated Delivery Network (IDN)
- Hospital
- Accountable Care Organization (ACO)
- Patient Centered Medical Home (PCMO)

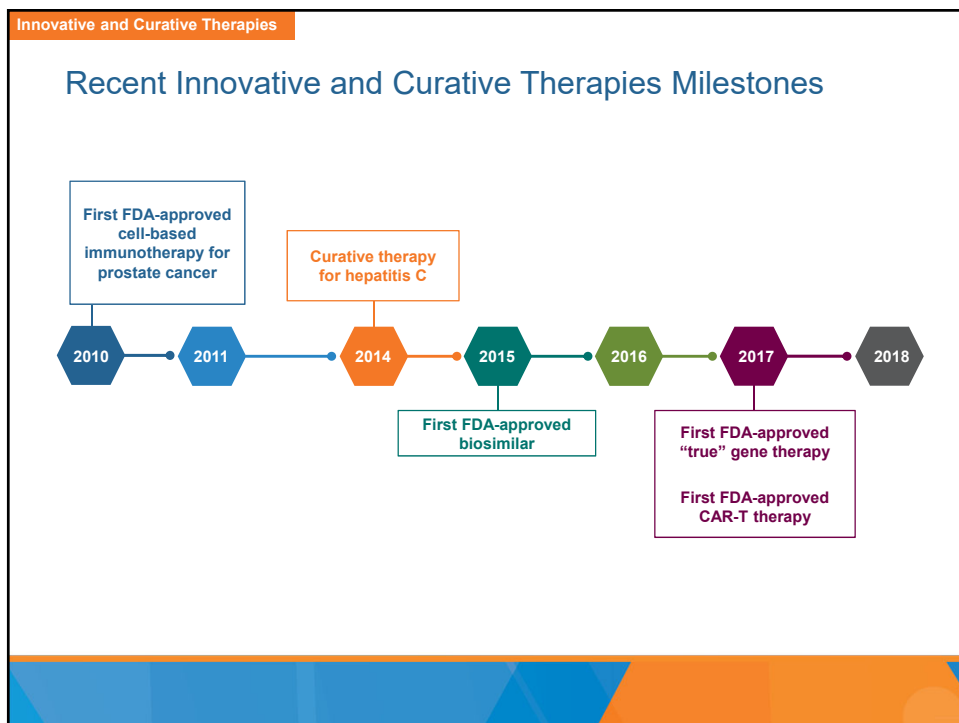
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## While Drug Pricing Took the Lead, All Key Trends Were Identified as Being Impactful on the Future of Health Care



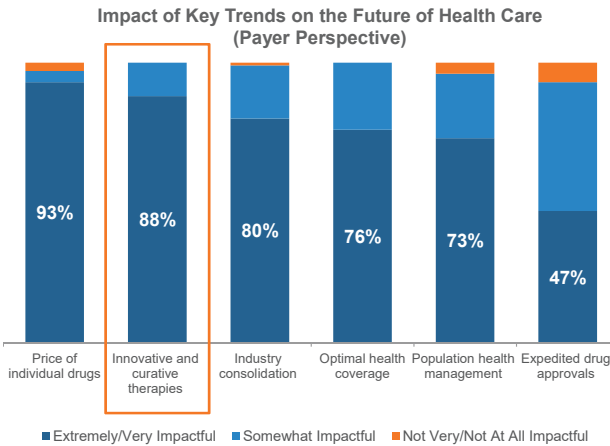
## Health Care Mayhem Ensues: How Can We Minimize the Madness and Align Stakeholders?







## Innovative Therapies Are Changing More Than Just Health Outcomes



*"We are just now entering this fully fledged genomic era, which will bring a whole new level of precision to care delivery but also an awful lot of challenges to be able to use these tools well."*  
– Health care thought leader

Question: How impactful do you think each of the following is to the future of health care? (N=70)

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## Scientific Dreams Come True Are Fueling Financial Nightmares

### Game Changers<sup>a</sup>

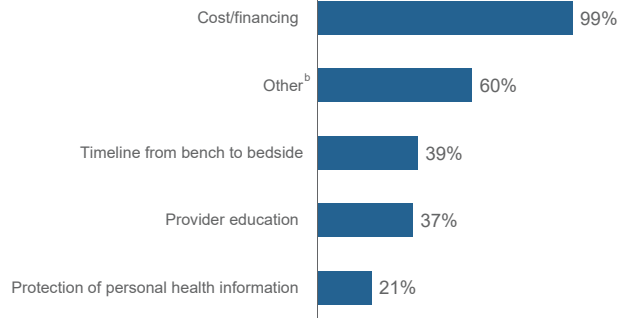
Curative therapies

Gene therapies

Cell therapy

Precision medicine

### Extreme Challenges to Innovative Therapy Access (Percentage of Respondents, Payer Perspective)<sup>a</sup>



<sup>a</sup> Rated as extreme/very much by >50% of survey respondents.

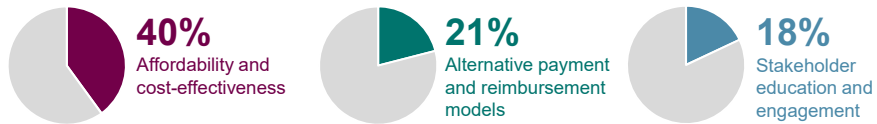
<sup>b</sup> Other category included: reimbursement mechanisms, consumer expectation management, and robustness/believability of data.

Question: How challenging are the following with respect to making innovative therapies accessible? (N=67)

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## Good Problems Still Require Solutions: How Do We Improve Access While Preserving Incentives to Innovate?

#1 Area of Focus to Improve Innovative Therapy Access  
(Percentage of Respondents, Payer Perspective)



*"If the system as we know it changes—to discourage investment so that there is no payback for the risks that companies and individuals take [to bring innovation to market]—then [innovation] will potentially dry up, and that's a huge challenge and a huge concern."*

– Health policy advisor

Question: What suggestions, if any, do you have for minimizing barriers and improving patient access to innovative therapies? (N=67)

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## Additional Thoughts From Key Stakeholders

### Fundamental Changes in Medicine

*"Innovative and curative therapies are fundamentally changing the concept of what medicine is."*

– Pharma industry representative

### Need for Precision

*"If we can really do [more advanced testing to identify the appropriate patients], will it still cost more because of the pricing of these products, or will it cost less in the overall scheme of things?"*

– Pharma industry representative

### Leveraging Technology to Drive Value

*"There is a very important link between big data and successful value-based contracts. You need the ability to track patient outcomes. That's basically the company saying we'll put our money where our mouth is."*

– Health policy advisor

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## Global Influencers and Disruptors



### Social Determinants

- We may eventually get to "personalized social determinants" at the genetic level to better understand underlying factors affecting health

### Health IT, AI, and Big Data

- Technology is advancing to the point where even low-income patients can manage their health with a smartphone and internet access
- Use of claims data to assess feasibility of clinical trial design
- Use of AI to speed discovery of biomarker and therapeutic targets



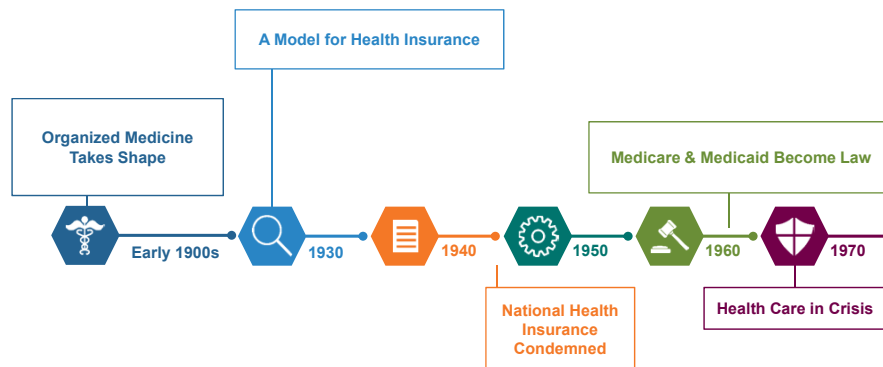
### Disruptor/Innovator

- Innovative therapies are inherently a disruptor to the health care system as they represent a fundamental shift in what medicine is
- Right to try movement



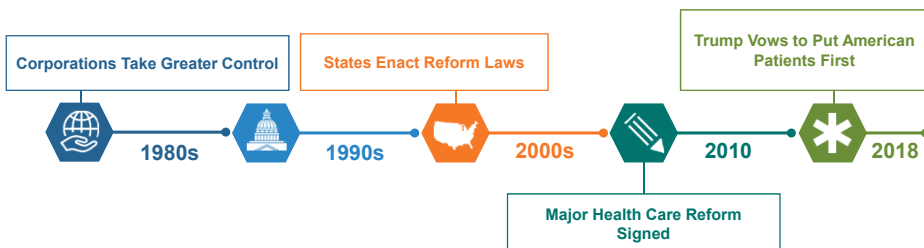
## Optimal Health Coverage

## America's Health Care Landscape Has a Complex History



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## Unsustainable Rise in Health Care Spend Drives Reform



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## While Health Insurance Coverage Is Increasing, Affordability Remains a Challenge



The ACA extended coverage to 20 million Americans, but 12.2% of adults (approximately 27 million) remain uninsured as of the end of 2017<sup>1</sup>



According to CMS MIDAS data, average premiums were **105%** higher in 2017 than in 2013<sup>2</sup>



Average annual premiums were \$6,896 for single and \$19,616 for family coverage in 2018<sup>3</sup>

- Premiums are expected to increase in the individual market by **up to 32%** in 2019<sup>4</sup>

1. Auer Z. U.S. uninsured rate steady at 12.2% in fourth quarter of 2017. Gallup. <https://news.gallup.com/poll/225383/uninsured-rate-steady-fourth-quarter-2017.aspx>. Published January 16, 2018. Accessed October 7, 2018. 2. ASPE Office of Health Policy. Individual market premium changes: 2013–2017. <https://aspe.hhs.gov/pdf-report/individual-market-premium-changes-2013-2017>. Published May 23, 2017. Accessed October 15, 2018. 3. Kaiser Family Foundation. 2018 employer health benefits survey. <https://www.kff.org/report-section/2018-employer-health-benefits-survey-section-1-cost-of-health-insurance/>. Published October 3, 2018. Accessed October 7, 2018. 4. Covered California. Individual markets nationally face high premium increases in coming years absent federal or state action, with wide variation among states. [https://hbex.coveredca.com/data-research/library/CoveredCA\\_High\\_Premium\\_Increases\\_3-8-18.pdf](https://hbex.coveredca.com/data-research/library/CoveredCA_High_Premium_Increases_3-8-18.pdf). Published March 8, 2018. Accessed October 15, 2018.

## Employer-based Insurance Is an Important Employee Benefit, but Premiums Continue to Increase

In 2017, employer-based insurance covered 56% of the population for some or all of the year<sup>1</sup>



**45%** of employees said that health benefits helped sway them to accept the job<sup>2</sup>



Workers' contributions have increased disproportionately to the employer's share<sup>3</sup>

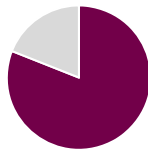
- Since 2012, workers' average contribution for family premiums has increased 32% (from \$4,316 to \$5,714), while the employer's share has increased 14% (\$11,429 to \$13,049)<sup>3</sup>

1. Spencer James Group. Cost shifting: change of heart? <https://www.spencerjamesgroup.com/cost-shifting-change-of-heart/>. Accessed October 15, 2018. 2. Miller S. Workers pay more of rising health costs. Society for Human Resource Management. <https://www.shrm.org/resourcesandtools/hr-topics/benefits/pages/workers-bear-rising-health-costs.aspx>. Published November 3, 2017. Accessed October 15, 2018. 3. Kaiser Family Foundation. Premiums for employer-sponsored family health coverage rise slowly for sixth straight year, up 3% but averaging \$18,764 in 2017. <https://www.kff.org/health-costs/press-release/premiums-for-employer-sponsored-family-health-coverage-rise-slowly-for-sixth-straight-year-up-3-but-averaging-18764-in-2017/>. Published September 19, 2017. Accessed October 17, 2018.

## Optimal Health Coverage

### Challenges Include Lack of Collective Responsibility, Health Care Financing, and Underlying Fee-for-Service

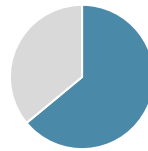
#### Top challenges in providing optimal health coverage<sup>a</sup>



**81%**  
Overarching lack of collective responsibility among stakeholders



**64%**  
Health care financing based on a 12-month cycle



**64%**  
Underlying fee-for-service system

*"At the core of the issue is **misaligned incentives**."*  
– Health policy advisor

*"Families lack savings to meet deductibles. **They cannot access coverage** that they are paying for because **they cannot afford their deductible**."*  
– Health plan advisor

<sup>a</sup> Rated as extremely/very challenging.

Question: How challenging are each of the following with respect to providing optimal health coverage? (N=70)

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## Optimal Health Coverage

### Political Uncertainties May Influence Coverage Availability, but Market Responses Can Create Opportunities

*"We need to avoid temporary **Band-Aids**; we need long-term and sustainable change."*  
– Health plan advisor



**56%**  
Value-based insurance design



**39%**  
Limiting patient choice



**34%**  
Shift to high-deductible plans

#### Top viable potential solutions to address health coverage design issues<sup>a</sup>

*Application of progressive approaches from other industries (eg, Google, Starbucks)*

*Innovative benefit designs*

*Increased member engagement*

*Renewed emphasis on preventive care*

<sup>a</sup> Rated as extremely/very viable.

Question: How viable are the following potential solutions to addressing health coverage design issues? (N=70)

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## Global Influencers and Disruptors



### Social Determinants

- Central challenge of affordability, especially among low-wage workers and those who do not receive benefits through their employer
- Lack of preventive measures leading to potentially catastrophic issues

### Health IT, AI, and Big Data

- Integration of datasets to evaluate trends, assess benefit design, outcomes
- Leverage health technology to drive utilization of high-value products



### Disruptor/Innovator

- Kaiser-like closed systems to assist with coordination of a patient's complete health
- Direct contracting with health systems and providers (Boeing, WalMart, Lowe's, General Motors)<sup>1,2</sup>
- Amazon, Berkshire Hathaway, and JPMorgan health venture
- Physicians practicing concierge care (3%-6% growth/year)<sup>3</sup>

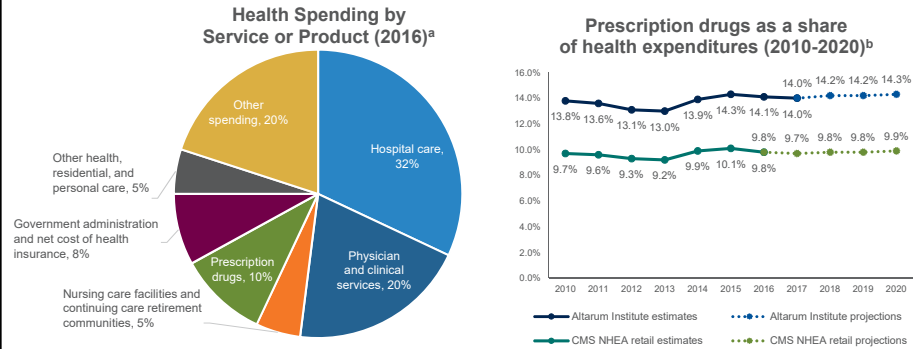
*"Public demand will need to be in place to change the system of care and for payment reform."*  
– Health policy advisor

1. BerniePortal. Three approaches to reference-based pricing. <https://blog.bernardhealth.com/bernieportal/reference-based-pricing-approaches>. Published April 18, 2018. Accessed October 10, 2018. 2. BerniePortal. GM joins other large employers in direct healthcare contracting. <https://blog.bernardhealth.com/bernieportal/gm-joins-other-large-employers-in-direct-healthcare-contracting>. Published August 27, 2018. Accessed October 10, 2018. 3. Concierge Medicine Today. Growth in concierge medicine: national. <https://conciergemedicinetoday.org/stats-faqs/>. Accessed October 10, 2018.



## Affordability & Value

## Drug Spend Remains a Small Component while Providing Significant Value

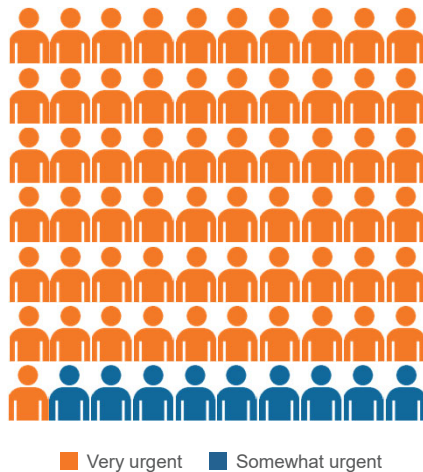


*"Even at a high list price, [hep C drugs] are still a better deal than paying for liver surgery, advanced care, and medications that weren't working. If you're making it harder for patients to get access in the short term, you're robbing Peter to pay Paul. And you're paying Paul a lot more over time as a result."*

— Patient advocate

NOTE: <sup>a</sup>Other spending includes dental services, other professional services, home healthcare, durable medical equipment, other non-durable medical products, government public health activities, and investment. <sup>b</sup>CMS. National healthcare spending in 2016. <https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/NationalHealthExpendData/Downloads/NHE-Presentation-Slides.pdf>. Accessed October 15, 2018. <sup>c</sup>Pew Trusts. A look at drug spending in the U.S. <https://www.pewtrusts.org/en/research-and-analysis/fact-sheets/2018/02/a-look-at-drug-spending-in-the-us>. Published February 27, 2018. Updated August 28, 2018. Accessed October 15, 2018.

## There Is Urgency to Address Drug Pricing



### Forcing factors

- Trump Administration Blueprint and political attention
- Innovative therapy pipeline
- Rising OOP
- Impact on broader health care spending

*"[The conversation around drug pricing] forces America to finally confront the fact that everybody cannot have everything all the time. And once you accept that reality, that's a game changer."*

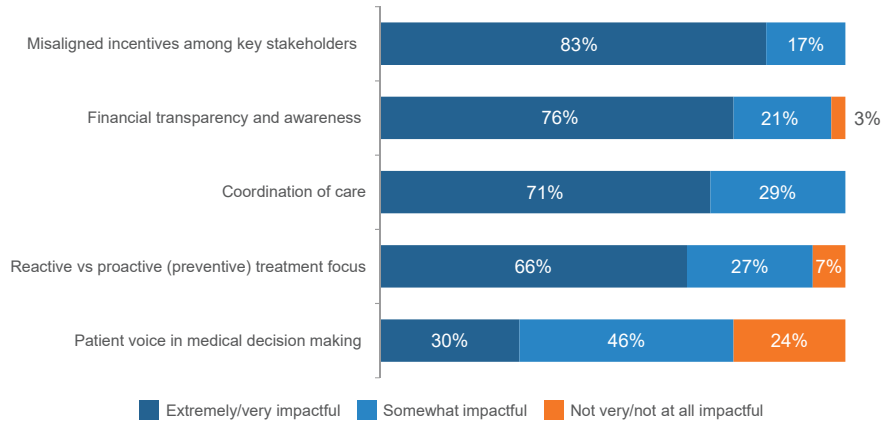
— Healthcare thought leader

Question: How would you rate the level of urgency with regard to addressing drug pricing and spending issues? (N=70)



## We Have Several Things to Solve to Rein in Drug Spend

### Impact Ranking of Key Factors Driving Drug Spend (Payer Perspective)

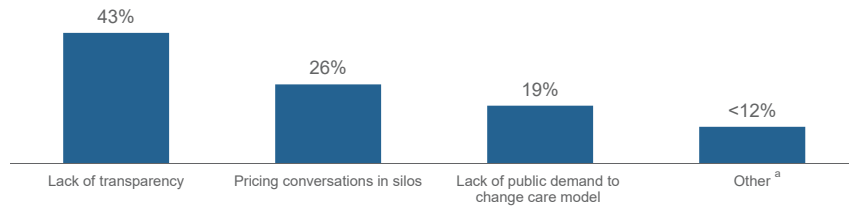


Question: How impactful are each of the following elements of drug spending? (N=70)

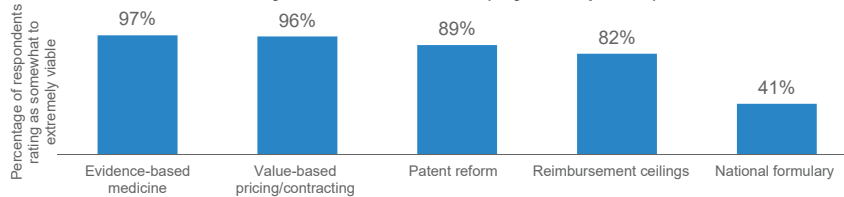
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## How Do We Change the Future?

### #1 Barrier (Payer Perspective)



### Viability of Potential Solutions (Payer Perspective)



<sup>a</sup> Other included market consolidation, biosimilar uptake, need to fund R&D.

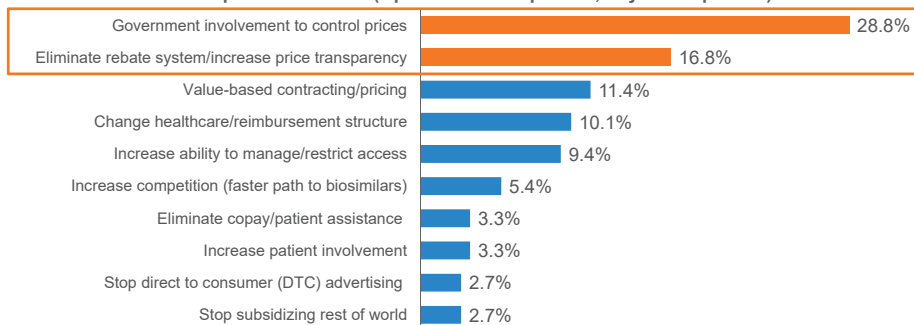
Question 1: Please rank the main barriers to addressing the drug pricing and spending issue. (N=70)

Question 2: How viable are each of the following potential solutions to addressing the drug pricing and spending issue? (N=70)

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## Government Involvement Was Commonly Mentioned as a Proposed Solution to Drug Pricing

### Proposed Solutions (Open-Ended Responses, Payer Perspective)



*"Generate competition more aggressively. My organization has advocated for legislation that allows the federal government to license out a product if they pay off the patent holder."*

– Political advocate

6.1% of responses were categorized as "other" because they didn't have ≥2% of mentions. N=149 responses collated.  
Question: Please list any other possible solutions to addressing drug pricing and spending issues.

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## Additional Thoughts From Stakeholders

### Simple Upfront Pricing

*"Why don't we just agree on a good price on the front end and pass that onto the patient? ... Just get rid of the rebate, reduce the administrative burden [and avoid having everyone] jump through hoops."*

– Pharma industry representative

### Continued Concern about Financial Implications of Innovation

*"Hep C was a bump in the road. But there are others – gene therapies, immunotherapies – in the future, that will be more like a mountain in the road."*

– Health plan advisor

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## Global Influencers and Disruptors

 <p><b>Social Determinants</b></p>	<ul style="list-style-type: none"> <li>• Social economic status greatly affects access and adherence to therapy                             <ul style="list-style-type: none"> <li>• 94% of those with incomes &lt;\$25k cited costs as a reason for not filling a prescription<sup>1</sup></li> </ul> </li> <li>• Few are immune to the rising cost of healthcare                             <ul style="list-style-type: none"> <li>• 61% of all bankruptcies were medical<sup>2</sup></li> </ul> </li> <li>• Addressing cost of therapy won't necessarily fix the issue                             <ul style="list-style-type: none"> <li>• No access to transportation, no child care, poor health literacy</li> </ul> </li> </ul>
<p><b>Health IT, AI and Big Data</b></p>	<ul style="list-style-type: none"> <li>• Managed care has been doing big data before "Big Data" existed</li> <li>• Focus on integrating disparate and varied data sets</li> <li>• Better use of data – predictive analytics, value-based, real-time, transparent</li> </ul>
 <p><b>Disruptor/Innovator</b></p>	<div>    </div>

1. Truven Health Analytics – NPR Poll. 2. Himmelstein 2009.

AMCP  
Academy of  
Managed Care  
Pharmacy  
FOUNDATION

# Industry Consolidation

## Consolidation Continues Across Health Care

### Hospital consolidation

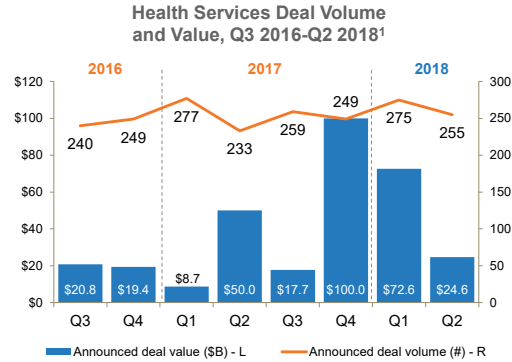
- 78 hospital M&A transactions annually<sup>2</sup>
- 90% of MSA characterized as highly concentrated<sup>3</sup>

### Physician consolidation

- In 2016, only 47% of physicians owned their practice, down from 53% in 2012<sup>4</sup>
- 22% of markets highly concentrated<sup>5</sup>

### Insurers

- In 2014, top 4 insurers made up > 80% of the market



1. PwC Deals: US Health Services Deals Insights Q2 2018. 2. American Hospital Association. 2016 Chart Book. Retrieved from <https://www.aha.org/dataset/2016-01-17-2016-chartbook>. 3. Fulton, B. (2017). Healthcare Market Concentration Trends in the United States: Evidence and Policy Responses. Health Affairs, September 2017, 36:9. 4. American Medical Association. Kane C. Policy Research Perspectives. Physician Benchmarks Survey 2016. 5. Capps C, Dranove D, Ody C. Physician practice consolidation driven by small acquisitions. Health Affairs, September 2017, 36:9.

## Perceived Impact of Consolidation [Payer Perspective]

### Impact of Consolidation

% rating as extremely/very impactful

Competition	84%
Market/buying power	83%
Healthcare pricing	83%
Patient choice	59%
Efficiency of delivery/ care coordination	51%
Access to therapy	46%

### View as Beneficial




% rating as extremely/very beneficial

Competition	19%
Market/buying power	64%
Healthcare pricing	34%
Patient choice	9%
Efficiency of delivery/ care coordination	46%
Access to therapy	24%

Question 1: How impactful is industry consolidation/integration on each of the following? (N=70)

Question 2: Thinking about it another way, how beneficial is industry consolidation/integration on each of the following? (N=70)

## Global Influencers and Disruptors

 <p><b>Social Determinants</b></p>	<ul style="list-style-type: none"> <li>Care is local: Recent nonvertical consolidation and partnerships could improve local care delivery</li> <li>Bring higher quality procedure to underserved/remote areas</li> <li>Impact on lower socioeconomic areas or rural areas                             <ul style="list-style-type: none"> <li>Less services available</li> <li>Higher costs</li> </ul> </li> </ul>
<p><b>Health IT, AI and Big Data</b></p>	<ul style="list-style-type: none"> <li>Larger and more diverse, integrated data sets</li> <li>Predictive analytics for identification of at-risk patients</li> <li>Ability to evolve the patient experience</li> </ul>
 <p><b>Disruptor/Innovator</b></p>	

1. 2017 in Review: The Year M&A Shook the Healthcare Landscape  
 2. The dawning era of decentralization. The healthcare example.

AMCP  
Academy of  
Managed Care  
Pharmacy  
FOUNDATION

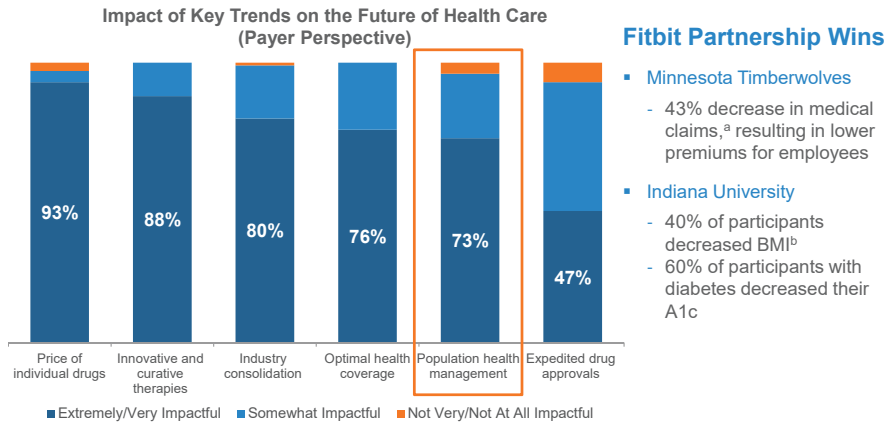


Population Health  
Management





## Thought Leaders Agree There Will Be a Benefit to Population Health Management

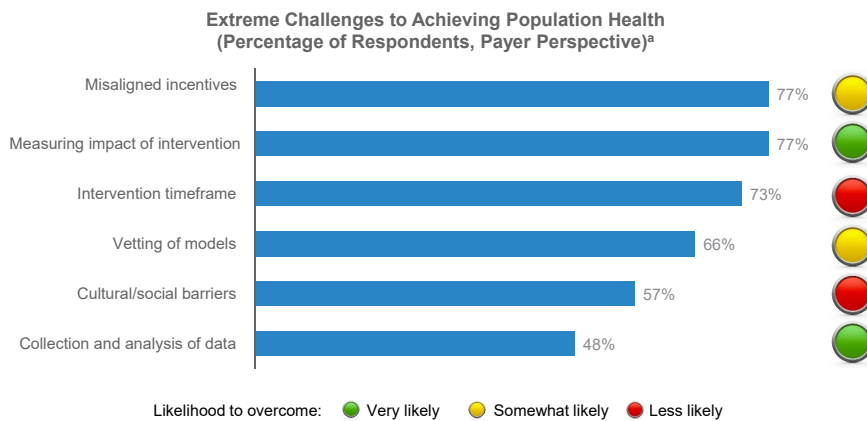


<sup>a</sup> In the first year.  
<sup>b</sup> After 3-month challenge.

Question: How impactful do you think each of the following is to the future of healthcare? (N=70)

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## Misaligned Incentives and Measuring Impact Were Identified as Extreme Challenges, but Possible to Overcome



<sup>a</sup> Respondents ranked as very or extremely challenging with respect to population health.

Question: How likely do you think it is that your organization will address the following population health management challenges within the next 5 years? (N=70)

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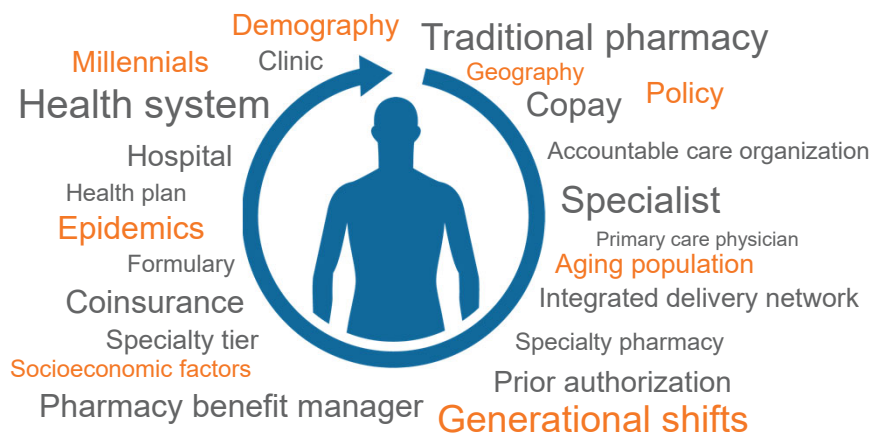
## Keys to Success for Population Health Management

Population health attribute	% of respondents	Details	Disruptors
Integration/data access	28.6%	Data interoperability & aggregation Ability to share/view information	Incorporation of nontraditional data Predictive analytics
Patient engagement	21.7%	Incentives Behavioral science Wearables	Fitbit partnerships Apple Watch from Aetna Health advocates
Change in structure of healthcare system	15.3%	ACO-type model Further consolidation Government/single payer system	CVS/Aetna ESI/Humana ACO model
Multi-stakeholder collaboration/engagement	13.7%	Align incentive Facilitate communication Develop team chemistry	CVS/Aetna merger
Ability to show return on investment	8.6%	Requires longer term follow-up Investment to study models	Big data
Incorporation of social determinants	7.1%	Goals, incentives, and communication vary by social determinants	Personalization of population health
Awareness/education on prevention programs & tools	5.0%	Programs available, but constituents are unaware that they exist	Awareness campaigns to drive utilization Amazon/Google

Question: What do you think is the key to improving population health management? (N=70)

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## Healthcare Mayhem Ensues: How Can We Minimize the Madness and Align Stakeholders?



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Would You Shop Like This? We Are!



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### Key Take Aways

1. Misalignment in incentives is the most common issue across all 6 key trends that must be addressed
2. Drug pricing is the current lightning rod, but focus should be overall healthcare spend
3. Reimbursement must evolve to handle and invest in innovation
  - Growing support for UK/German type evaluation system
4. Concern of continued consolidation with optimism about integration
5. Patients are becoming consumer – we need to be ready for it
  - Prioritize efforts to increase transparency
  - Growth health care advocates
6. Health care stakeholder need to work together to solve these issues, otherwise government intervention will increase

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