Vital Directions for Health and Health Care
An Initiative of the National Academy of Medicine

Mental Health America
February 24, 2017
Context
18%
Healthcare share of federal Budget

Percent of GDP

Fiscal Year

Source: McClellan and Saunders, 2016, based on Congressional Budget Office, 2016 Long-Term Budget Outlook.
Income-related health disparities

- Life expectancy rises with income
- Income-related disparities rising nationally

Hazard ratios by income

Hazard Ratios by Decade for Spline Models

Income ($1000s)

Hazard Ratio

Factors determining health

Adapted from McGinnis et al.
Domain intersections

- Environment
- Genetics
- Social
- Healthcare
- Behavior
Comparable total health and social services spending – significant proportional differences

In OECD, for every $1 spent on health care, about $2 is spent on social services.
In the US, for $1 spent on health care, about 55 cents is spent on social services.
A Critical Inflection Point

- This is a time of unprecedented challenges and extraordinary opportunities for U.S. health care

- Meaningful change is possible: we are capable of being a healthier, more efficient, and equitable nation

- The ideological polarization around health care issues and policy today underscores the importance of nonpartisan, evidence-based analysis to guide and inform decision makers

- The upcoming change in presidential administrations presents an important and timely opportunity to reach health policy leaders and policymakers
Approach
Stages

- Overseen by NAM Council
- Guided by an 18-member Steering Committee
- Products (4):
  - Launch paper (July 2016)
  - Perspectives series (September 2016)
  - Symposium (September 26, 2016)
  - Synthesis paper (March 21, 2017)
Steering Committee

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American Organization of Nurse Executives
American Hospital Association

Elias Zerhouni, M.D.
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Three focus areas

GOAL: identify policy opportunities and actions that could yield timely progress toward three overarching goals for the US:

• Better health and well-being

• High-value health care

• Strong science and technology
Better health & well being

- Systems strategies for better health throughout the life course
- Addressing health disparities and social determinants of health
- Preparing for better health and health care for an aging population
- Improving physical activity, nutrition, and other prevention programs
- Enhancing access and effectiveness of mental health and substance abuse services
- Healthy communities, population health, and public engagement
High-value health care

- Facilitating consumer demand for care that is effective, efficient, and affordable
- Payment reform for better value and medical innovation
- Competencies and tools to shift payments from volume to value and outcomes
- Tailoring complex care management, coordination, and integration
- Precision medicine and advances in genomics, proteomics, and information
- Fostering transparency in outcomes, quality, safety, and costs
- Patients, families, and the democratization of health care
- Workforce for 21st century health and health care
Strong science & technology

- Information technology interoperability and use for better care and evidence
- Data sharing, curation, and use for a continuously learning health system
- Innovation in development, regulatory review, and use of clinical advances
- Targeted research: case example directed to brain disorders
- Training the workforce for 21st century science
1. Implement payment models that support services integration

2. Train a workforce skilled in managing mental health and substance abuse in the context of integrated care

3. Develop incentives to disseminate tested organizational models and create new approaches
State-relevant implications

• Value-based payment focus
• Community-focused innovation
• Democratization of health and health-care
• Connectedness and connectivity
• Focus measures and accountability on important
  21st century health and science workforce
• More reliable insights from interventions
• Continuous learning infrastructure
Thank you