AMERICA'S HEALTH CARE LEADERSHIP TALKS

ADMINISTERED BY WYE RIVER GROUP ON HEALTHCARE & FOUNDATION FOR AMERICAN HEALTH CARE LEADERSHIP

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Background

Currently American healthcare policy is frozen in a debate that is unlikely to yield any significant change in our approach to addressing healthcare system challenges in the near term. Yet, it is well recognized that unless we chart and advance a fundamentally new course of action, we are well on a path to health system collapse.

There is broad agreement that maintaining the current course of inaction is unacceptable from a cost, quality, and social responsibility standpoint. Ignoring growing pressures will result in a crisis that may force policy makers, courts or regulators to hastily correct the imbalance which could result in disruption of common business practices and undercut our financial and social interests. In short, it is in the self interest of everyone with a stake in healthcare – from consumers to providers to politicians—to develop contingency documents that set out a viable set of policy options for health and healthcare.

However, there is no well-accepted cross-sector *process* for identifying these options or for supporting productive legislative vetting. Wye River Group on Healthcare and the Foundation for American Health Care Leadership propose a series of steps that will enable creation of such documents for American healthcare policymakers.

This project will build on learning from and relationships developed through WRGH's "Communities Shaping a Vision for America's 21st Century Health and Healthcare" initiative and the FAHCL health policy blueprint, as well as the work of IOM and other credible entities. It will comprise four elements:

- > a baseline health policy scan;
- > a series of meetings designed to examine viable options;
- development of a set of contingency documents where there is potential making of a consensus; and
- > a distribution plan designed to give lawmakers a set of ideas to build upon.

This approach will ensure that thoughtful deliberations have occurred prior to a flash point occurring in the US healthcare system. The outcome of meeting discussions will provide leaders with a set of practical documents, well vetted with key stakeholders and ready for consideration at the appropriate time.

Operational overview

The meetings will be scheduled between now and 2008, such that the documents are completed prior to the next Presidential election. Participants will be chosen based on the topic, ensuring broad representation of interests: physician leaders, hospital and health system executives, insurance executives, allied health professionals, community and public health officials, pharmaceutical representatives, business leaders, academia, consumer advocates and government officials. We will also work to ensure that the interests of important constituencies, e.g., the elderly, the uninsured, minorities and those with chronic disease and mental health and oral health are represented.

Reports will be created following each meeting and ultimately a series of healthcare public policy documents will be developed. The traditional WRGH consensus building process will be employed throughout.

Baseline Environmental Scan

As background for the leadership talks, a baseline scan has been completed which captures a number of healthcare reform concepts which have been developed and tested at the state and local level. The scan includes a brief description of each initiative, its mission, the players involved, strengths and weaknesses, and progress to date. It also highlights common critical success factors among the successful efforts. Examining the results of these efforts clearly has merit and they should be carefully considered as a part of leadership deliberations. We believe a better understanding of experience to date can inform the health policy debate by providing insight into what is likely to be viable and what should be avoided.

In addition, we will review and compile the thinking of trade and professional organizations at the national level which have developed proposals or policy statements articulating their perspectives on sustainable long-term solutions to our nation's challenges.

Leadership Talks

The first set of meetings will examine health system delivery issues. Under the umbrella of the 21st Century Models of Care initiative, representatives of provider organizations will examine and deliberate on issues related to healthcare workforce, education and training, incentives and innovative delivery models.

The leadership talks are intended to draw upon, validate, and enhance the findings from our community leadership, blueprint, reform scan and 21st century models work. We will invite a select group of well-seasoned leaders, "sages" recognized by their peers, from professional healthcare associations, business and government to participate in a session to share the

wisdom gleaned from their long and productive careers relative to what would be most likely to work in reforming this country's healthcare system.

Next WRGH/FAHCL principals will facilitate a cross-discipline session designed to identify the key drivers needed to support the health system long term, while realistically meeting current challenges and growing demands. We will develop a "15,000 foot" comprehensive outline from diverse perspectives, which identifies the most salient opportunities, and organize the ideas into a framework for use in follow-on work sessions.

Issues to be considered will include:

- The 'social contract' for healthcare in this country;
- A vision for our healthcare future;
- How we can work together to avoid a crisis;
- Elements of the current system that must be preserved or changed;
- Major areas of concern relative to health system reform;
- The current versus future role for their sector;
- The appropriate role for government in enabling constructive change;
- Combinations of reforms that can work well together or that create obstacles to change.