THE POPULATION HEALTH IMPROVEMENT VISION

David Kindig MD, PhD
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1979 Age Adjusted Mortality Ages 0-75, by U.S. County
2008 Age Adjusted Mortality Ages 0-75, by U.S. County
Purchasing Population Health

Paying for Results

David A. Kindig, MD, PhD
“The fundamental assertion of this book is that population health improvement will not be achieved until appropriate financial incentives are designed for this outcome.”

Kindig 1997
Ratio of social service spending to medical care spending

European OECD  2.0
United States  0.9

Bradley BMJ 2010
Sources of Dependable Financial Support

1. From savings from health care… Community Benefit reform and ACO shared savings…
2. Health in All policies…more health from what we are already spending in other sectors
3. Government and foundations
4. Businesses understanding the “business case”

Kindig and Isham 2011 draft
Solid partnerships and real resources

“What is required is a coordinated effort across determinants between the public and private sectors, as well as financial resources and incentives to make it work.”

Kindig JAMA 2006
A Super-Integrator? 
A Health Outcomes Trust?

- Employers & Community Organizations
- Healthcare Organizations
- Government & Schools
HealthPartners Health Driver Diagram

Key Outcome: Improved Health (as measured by a Summary Measure of Health)

Health Determinant:
- Health Care (20%)
- Health Behaviors (30%)
- Socio-economic factors (40%)
- Environmental Factors (10%)

Primary Drivers:
- Preventive Services
- Acute Care
- Chronic Disease
- End of Life
- Cross Cutting Issues
- Tobacco Non-use Activity
- Diet/Nutrition
- Alcohol Use
- Community Identified Drivers (Advocacy and Participation)
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Mission, Capabilities, Control:
- Central to Mission
- Many Capabilities
- High Control
- Central to Mission
- Shared Capabilities
- Shared Control
- Aligned with Mission
- Limited Capabilities
- Limited Control

Modified from Isham G and Zimmerman D, HealthPartners Board of Directors Retreat, October 2010
IOM 2030 VISION

The Secretary shall establish targets for

• health adjusted life expectancy and
• percapita health care spending

intended to engage all health system stakeholders in actions to achieve parity with comparable nations by 2030
“My question is: Are we making an impact?”