



# Foundations of Oncology Management Oncology Strategic Planning: Positioning Your Program for Change

Charleston, South Carolina

January 27, 2018



Setting the Context: The National Landscape



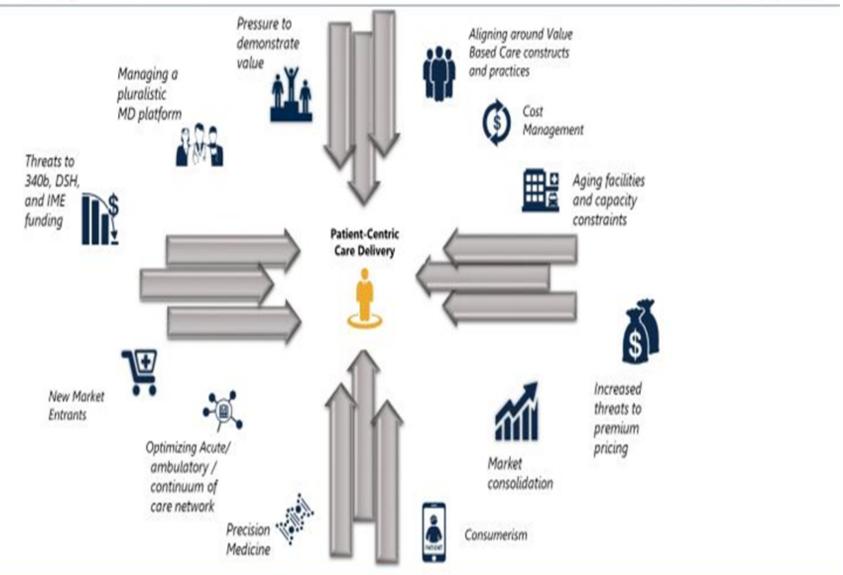
# The State of U.S. Healthcare Today: Seven Key Takeaways

- US healthcare **spending trends are unsustainable**; despite all the spending, our healthcare outcomes are not that great
- The **ACO/ value-based care movement has grow**n significantly but has had minimal impact to date on spending and outcomes
- Patient care activity and revenue continue to shift to outpatient settings; the growth and development of the ambulatory side is "where it's at"
- The **healthcare on-demand era is upon us**; everyone is talking about consumerism, convenience care, digital care and price transparency
- New market entrants and disruptors are arriving daily; they are well funded and view healthcare's challenges as a tremendous opportunity
- Hospitals/ health systems continue to experience pressures to their already thin margins; this has caused some to close their doors
- New provider partnerships are forming as the market continues to consolidate in response to the industry pressures and challenges

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# The Challenges We Know

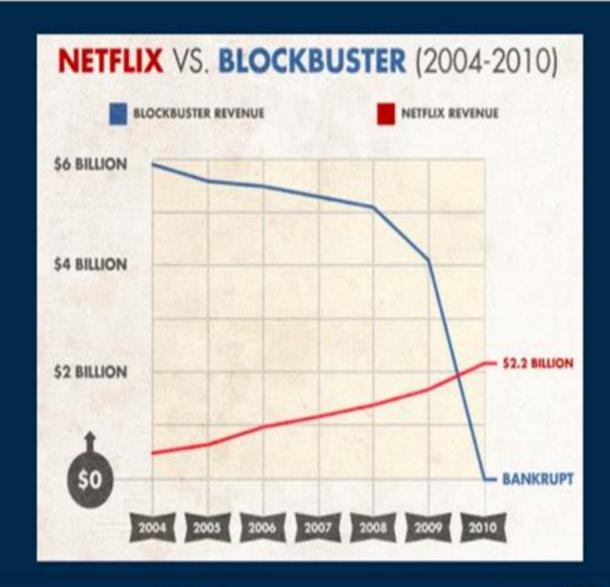




# The Challenges We Don't

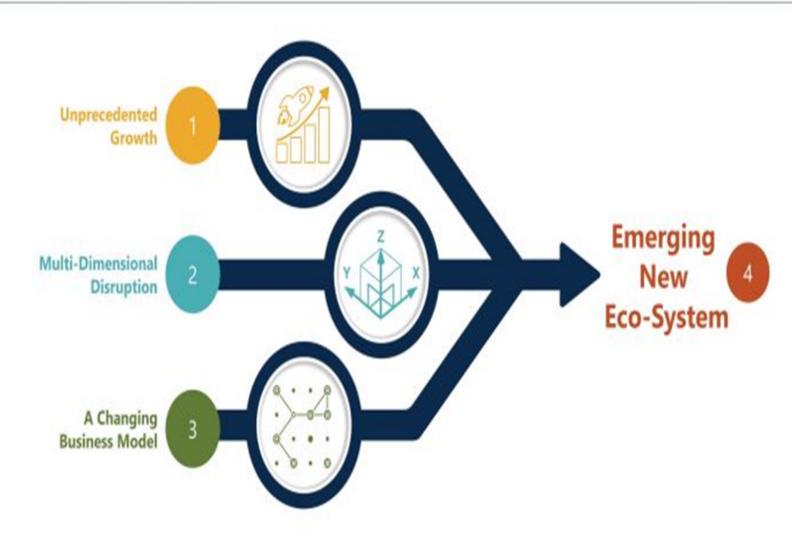
#### Digital Industrialization

- Blockbuster's revenue model was highly dependent upon late fees.
- The company's profits were highly dependent on penalizing its patrons.
- Netflix offered variety and, with a subscription service, lower cost because its operation was lower cost.
- Deemed a "threshold model of collective behavior" people with varying levels of resistance begin to adopt a new concept and more resistant ones become more likely to join in.



# We are Witnessing the Emergence of a New Healthcare Ecosystem

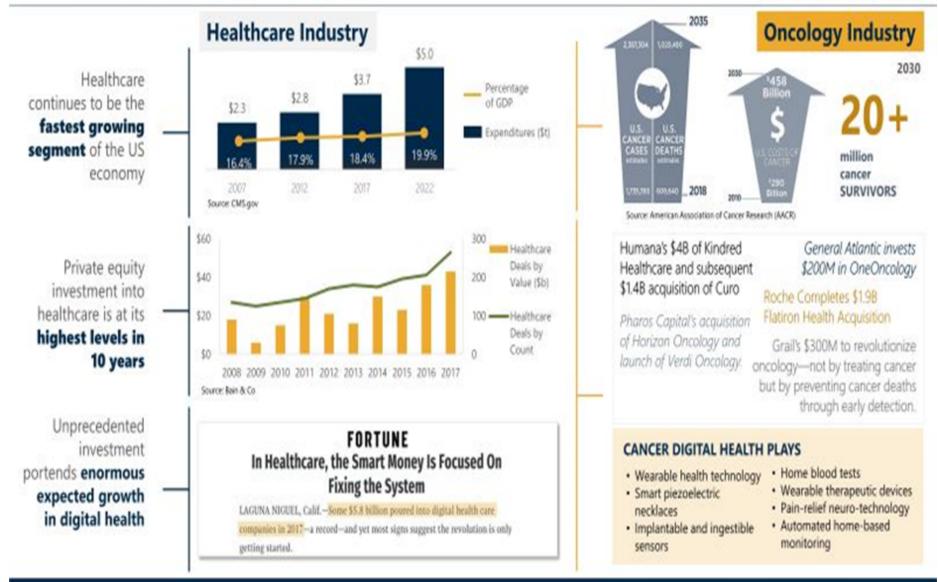






Healthcare continues to be the fastest growing segment of the U.S. economy and will continue to receive unprecedented investment







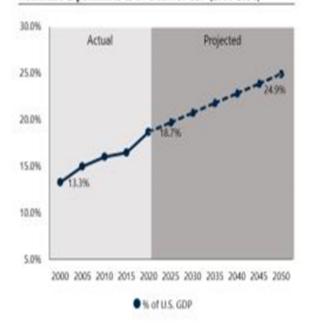


Beyond growth alone, future financing in our current model may be untenable...

#### In terms of financing and the business model of healthcare...

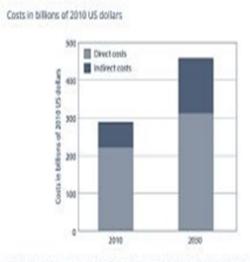
Healthcare expenditures, which today comprise nearly 20% of GDP, if unabated are projected to rise to over 25%

#### Healthcare Expenditures as a Percent of GDP (2000-2050)



Cancer care expenditures expected to reach nearly \$500B by 2030, growing from 5% of healthcare related GDP to 9%

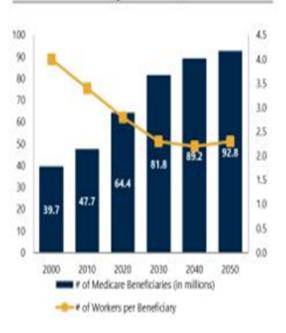
#### U.S. costs for cancer care to skyrocket by 2030



\*Direct costs include the costs of medical procedures and seniors associated with treatment and care, indirect costs include lost productivity recalling from treatment or distability.

#### Financing such a spend is not viable the industry will reach a tipping point

#### Number of Medicare Beneficiaries and Number of Workers Per Beneficiary (2000-2050)

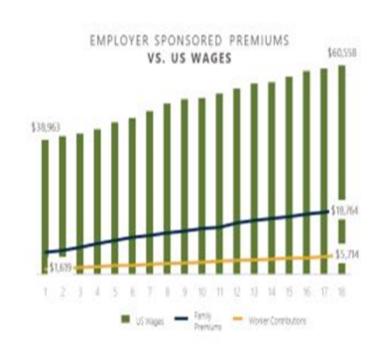


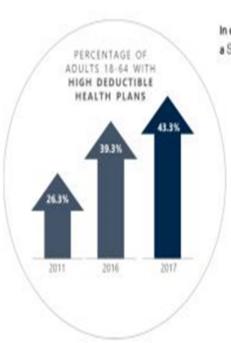
Sources: CMS gov, American Association of Cancer Research (AACR), Kaiser Family Foundation

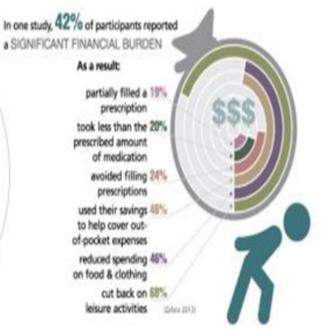




Beyond growth alone, future financing in our current model may be untenable...







Source: Premiums - Kaiser Family Foundation: Wages - OECD:org

Source: Kaiser Family Foundation, 2018.



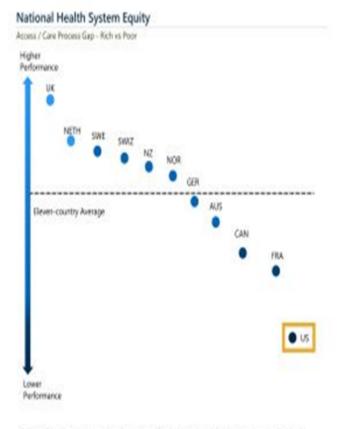
... as may be meeting social and access challenges.



#### ...and in terms of quality and access

### National Health System Performance Compared to Spending Healthcare Syntem Performance Eleven-country Average US LOWER Healthcare System. Performance-Higher Healthcare Lower Healthcare Spending Spending

Note: Spending is defined as healthcare spending as a percentage of GDP



Note: Equity compares performance for higher- and lower-income individuals within each country, using 11 selected survey measures from the Care Process and Access domains.

Source: The Commonwealth Fund

Healthcare system performance evaluated across a variety of measures including care process, access, administrative efficiency, equity and healthcare outcomes

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Beyond growth alone, future financing in our current model may be untenable...

Some potential future scenarios:

#### Status Quo

Patchwork of incremental changes to current employer-sponsored and Medicare/ Medicaid models continues

#### Government-Led Intervention

Fundamental redesign of American financing model – Medicare for All; MA for All, Public Option; Medicaid for All

#### Pluralistic, Consumer-Driven Model

Consumer-driven model of care with various individually-tailored insurance models (e.g., Bind) replaces ESHI

#### CONSIDER...

What do you believe to be true?
What are the implications for healthcare delivery?
For Providers? For Payors?



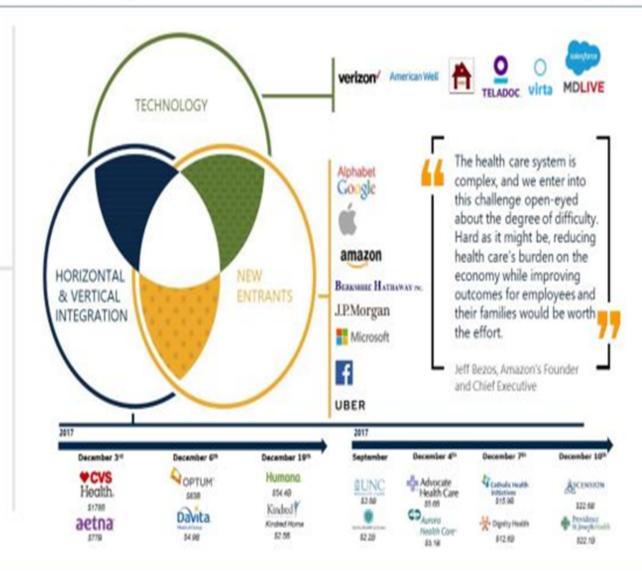
Healthcare delivery is experiencing industry disruption along key dimensions

- technology, new market entrants and integration



Healthcare delivery is experiencing industry disruption along three key

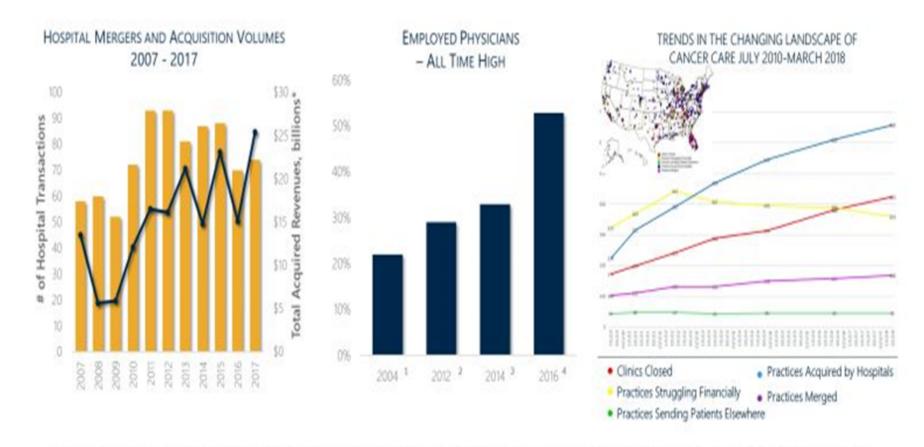
dimensions







Healthcare delivery is experiencing industry disruption along key dimensions - integration



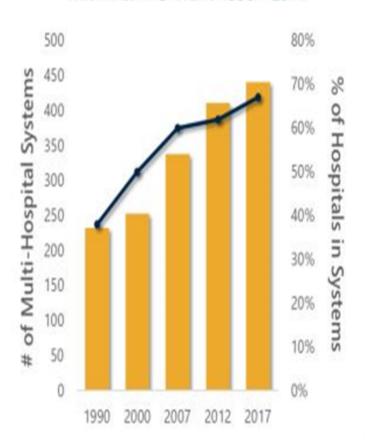
Sources: (L) Inving Levin Associates' Health Care Services Acquisition Reports, 2008-2017. Excludes foreign-based transactions and bankruptcy proceedings. \*Based on data availability: 91% of deals represented for 2007, 72% for 2012, \$ values are likely understated in recent years because transaction details are not publicly available for all deals. (R) \*Medical Group Management Association, Physician Compensation and Production Surveys; cited in Kocher and Sahni, Hospitals' Race to Employ Physicians, NE/M, May 12, 2011. \*\*AMA Policy Research Perspectives: Inching Towards Hospital Ownership, 2013 report (2012 data) and 2015 report (2014 data) — includes physicians directly employed by hospitals and health systems, and those in a practice that is partially or wholly owned by a hospital. \*\*AMA Physician Practice Benchmark Survey, released in 2017 (2016 data). https://www.communityoncology.org/wp-content/uploads/sites/20/2018/06/COA-Practice-Impact-Report-2018-FINAL pdf.





Healthcare delivery is experiencing industry disruption along key dimensions - integration

#### MULTI-HOSPITAL SYSTEMS AND PERCENTAGE OF HOSPITALS IN SYSTEMS 1990 - 2017



#### Growth in Mega-Systems







#### **Growth of Regional Systems**













Despite the attention these mergers have generated, the question of whether scale will drive incremental value remains to be answered





Healthcare delivery is experiencing industry disruption along key dimensions - integration

#### Non-traditional/Vertical Integration





\$83B



\$54.4B



\$77B



\$4.9B



\$2.5B

#### CONSIDER...

What value can be created through national, regional or vertical scale?



Healthcare delivery is experiencing industry disruption along key dimensions – technology and new market entrants











They bring with them elements that traditional healthcare providers and start-ups don't have, including: enormous capital, large customer bases, distribution networks, advanced data tracking and analytic capabilities, artificial intelligence experience, and disruptive technologies







CONSIDER...

What nature and degree of competitive threat or change to the value chain do such entrants represent?

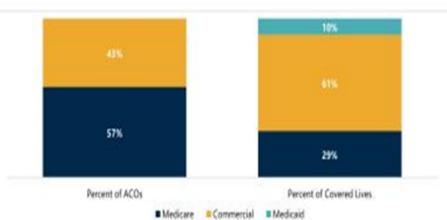


# A Changing Business Model



The ACO model is tremendously growing, currently covering approximately 9% of the population; however, commercial ACOs now account for 61% of covered lives





Sources; Muhistein et al., Recent Progress in the Value Journey: Growth of ACOs and Value-Based Payment Models in 2018, Health Affairs Blog, August 14, 2018; Chartis analysis; CMS data.

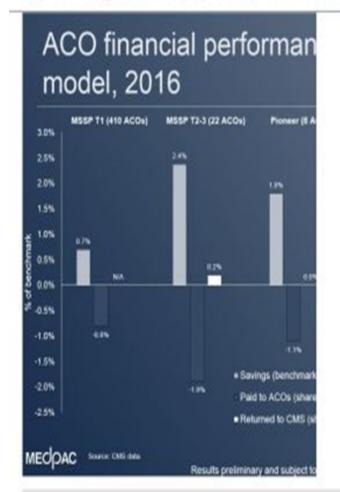
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# A Changing Business Model



The ACO model has seen tremendous growth, currently covering approximately 9% of the population; however, commercial ACOs now account for 61% of covered lives



Business Review We Won't Get Value-Based Health Care Until We Agree on What "Value" Means But Is the Experiment in Value-Based Care Failing? MAN JO MORE ON STRATEGIC PLANNING Seven ACOs drop out of Next Generation program but don't say The at-risk model has grown, but for some accountable or organizations obtaining financial benchmarks repr Medicare Accountable Care Organizations Have Increased Federal Spending Contrary to Projections That They **Would Produce Net** Joen Sentrals, John Purrs, Bald Resember | May 20, 2010. Savings

CONSIDER...

What is the future of Value Based Care vs FFS?



# A Changing Business Model

Several Value-Based Care Models Have Emerged



#### Increasing Degree of Risk/Reward

#### Value-Based Payment Models

# Volume (Services, Episodes and/or Attributed Lives) + Outcomes and Cost Effectiveness

## <u>Volume of</u> <u>Services Provided</u>



Value is being embedded in traditional models – through benefits design, value- based purchasing, and reference based pricing



Portion of reimbursement tied to performance on specific metrics. Typically on top of a FFS base



Bundled Payments



Partial or Full Capitation (ACO Model)

Payment established for a grouping of ta services, for which providers take responsibility for the costs of those services

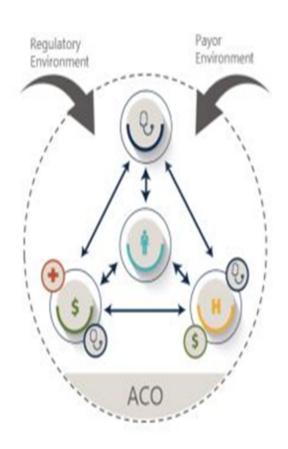
Actual spending compared to target for defined population over a set period. Providers and payors share in any savings (or downside). Typically on top of FFS base. Provider groups receive prospective fixed payment and take responsibility for managing all associated costs.



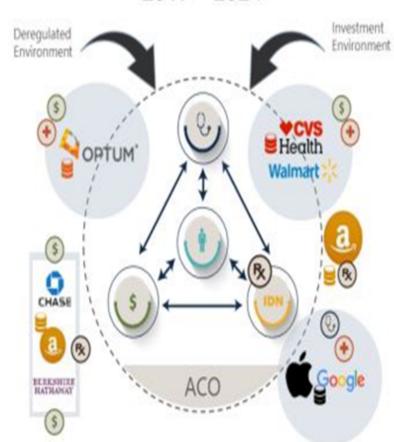


The healthcare delivery landscape has expanded and extended on multiple dimensions

2008 - 2015



2017 - 2024







The healthcare delivery landscape has expanded and extended on multiple dimensions

Healthcare delivery is experiencing digital industrialization.

# An industry shift in the value chain, enabled by connective technology and analytics, from one that is:

- Constructed around producer capital, assets and outputs
- Geographically-based
- Time and space-bound
- Predicated on physical distribution models and a sequentially discrete value chain

#### To one that is:

- Constructed around the End-user activity, accountability, and personalized experience
- Unbounded in its delivery
- Meets on-demand requirements
- A convergence of production, distribution and consumption
- Predicated on technological and data driven access and operating models that connect across digital and physical mediums





The healthcare delivery landscape has expanded and extended on multiple dimensions

Digital Delivery Networks represent a "Copernican" change where the individual and the digital platform are at the center of the universe





#### **KEY CHARACTERISTICS**

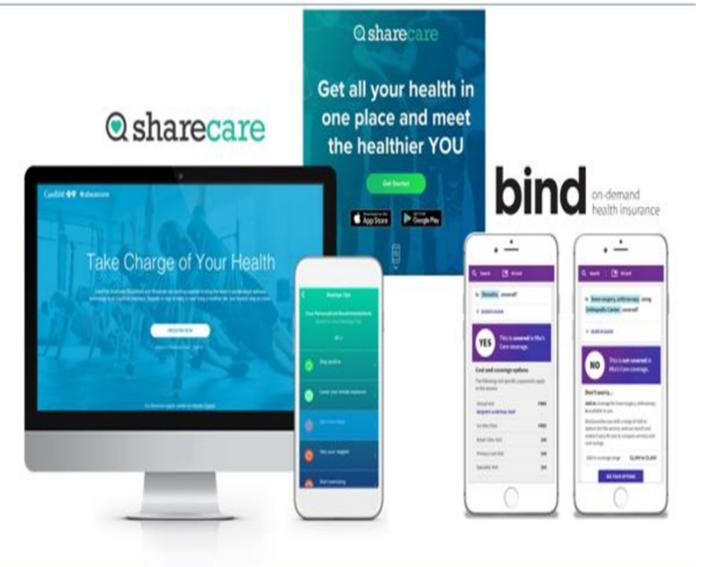
- Business model is predicated on end-user engagement model
- Data interface provides access across the continuum for health management / selfcare capabilities
- · Vast array of care no longer delivered at traditional provider site
- End-user engagement model where the individual has primary role in self-care, selection, financing and activity
- Boundaries of health information, management and treatment become integrated



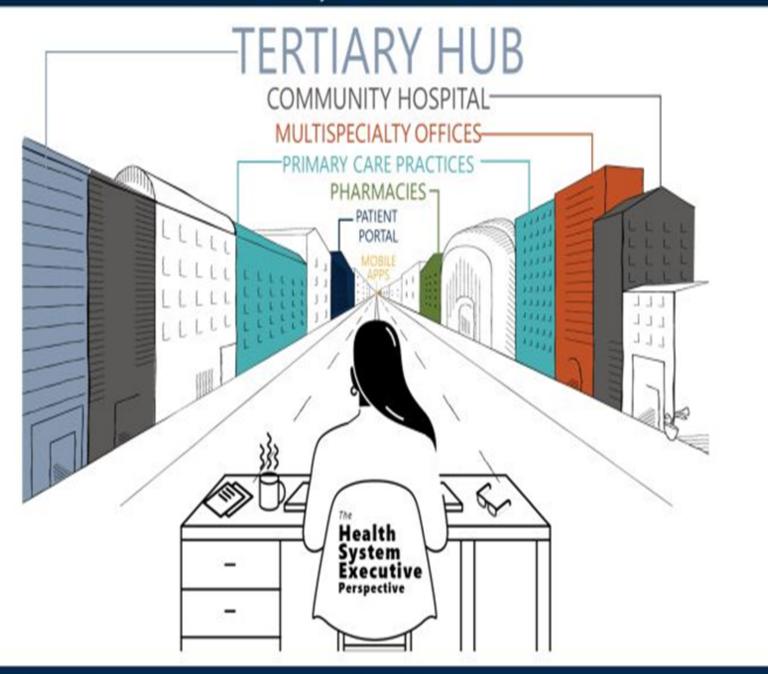


The healthcare delivery landscape has expanded and extended in multiple dimensions





# How Health System CEOs See the World





# Looking Ahead: Providers Face Three Great Challenges



#### #1: New models of delivery



Who is going to own the consumer relationship?

New Business and New Capabilities

#### What Business are Providers in?

Health Management vs. Treatment Information vs. Intervention Curation vs. Provision

#### What is their Business Model?

Episodic, Subscription, Spot Value vs. Fee Ancillary Services

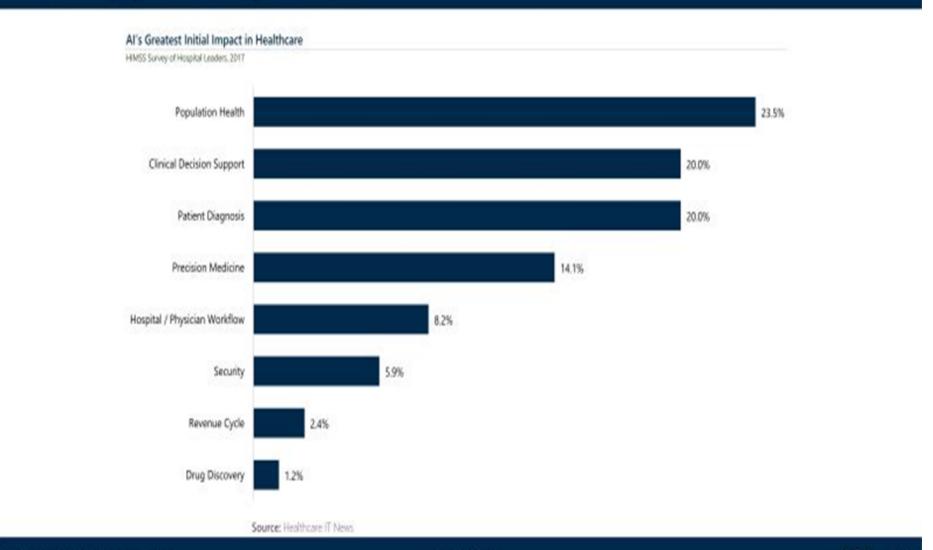
#### How do they Deliver?

Capabilities Competencies Organization

# Looking Ahead: Providers Face Three Great Challenges



#### #2: Harnessing big data and mastering health analytics



# Looking Ahead:

# Providers Face Three Great Challenges

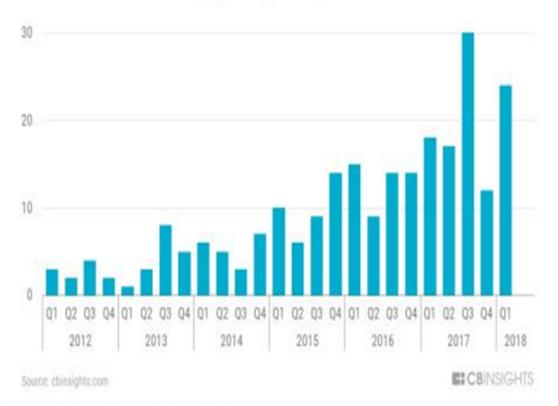


#### #2: Harnessing big data and mastering health analytics

Healthcare AI Startups: First Equity Deals (2012-2018)

# Healthcare AI sees 300+ 1st equity rounds since 2016

Number of disclosed 1st equity rounds, Q1'12 - Q1'18



Source: CB Insights. New Startups Drive Record Healthcare All Investments. May 2018.

# Looking Ahead:

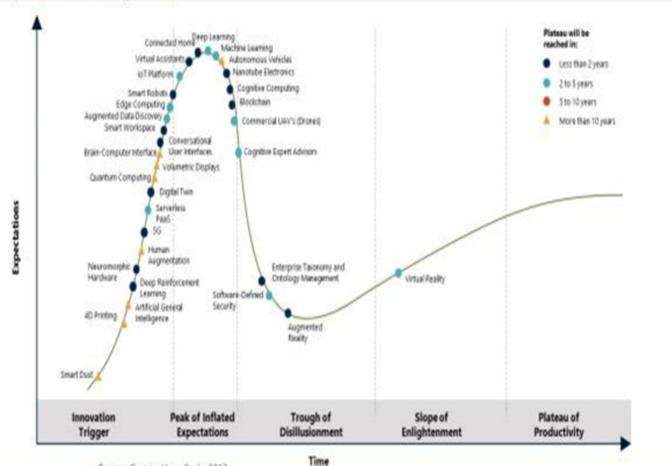
# **Providers Face Three Great Challenges**



#### #3: Embracing technology for the disruption it is

Just because there is over-hype, doesn't mean that the time will not come





Source: Gartner Hype Cycle, 2017.

January 27, 2019



# Are You Blockbuster or Netflix?

You know you're a RECOKBUSTER if you	You know you're a NEIFUX if you
Focus solely on acute, hospital-based, and ambulatory patient services	<ul> <li>Establish a portfolio of convenient access channels, including virtual care platforms</li> </ul>
Focus your strategy largely on managing the <b>supply of services</b> (e.g., practice locations, provider configuration)	Build your strategy around patient and purchaser demand, understanding unique subsegment needs and preferences
Scope your business as medical care delivery only	<ul> <li>Scope your business as health and develop partnerships with insurers, pharmacy, retail sites, and employers to better engage patients beyond medical services</li> </ul>
Design care models and pathways based primarily on the central episode	<ul> <li>Design care models and pathways that encompass determinants, social factors, and health management requirements</li> </ul>
Work to improve patient experience within hospital stays or office visits	Approach patient experience holistically – the patient experience is about the consumer relationship
Limit IT budget to maintaining and stabilizing existing platforms	<ul> <li>Invest in new tech platforms to enable better connectivity, efficiency, communication, and access to care and information</li> </ul>

#### CONSIDER...

What are the most important strategic considerations?



# **CONTRIBUTORS**

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