

Heart Failure Summit 2017

April 12, Bethesda Maryland



Why focus on hospitalizations?

- Quality of life
- Quality of care
- Costs

Heart Failure Summit 2017

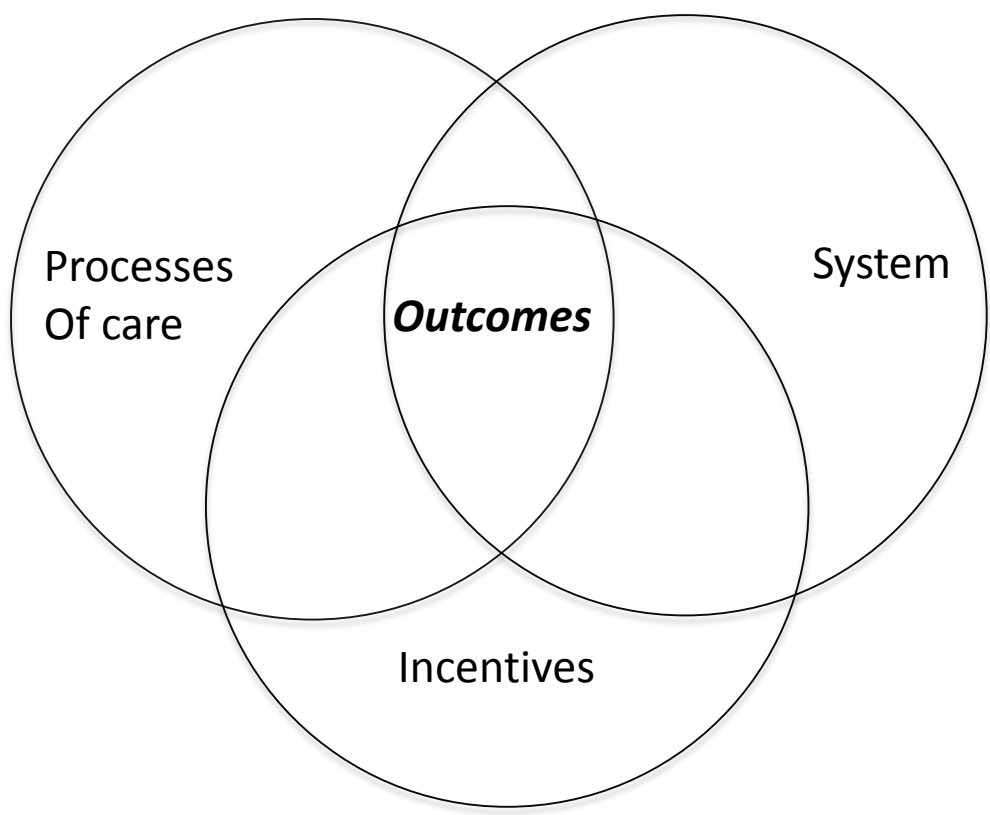
The Ultimate Goal: High Value Care





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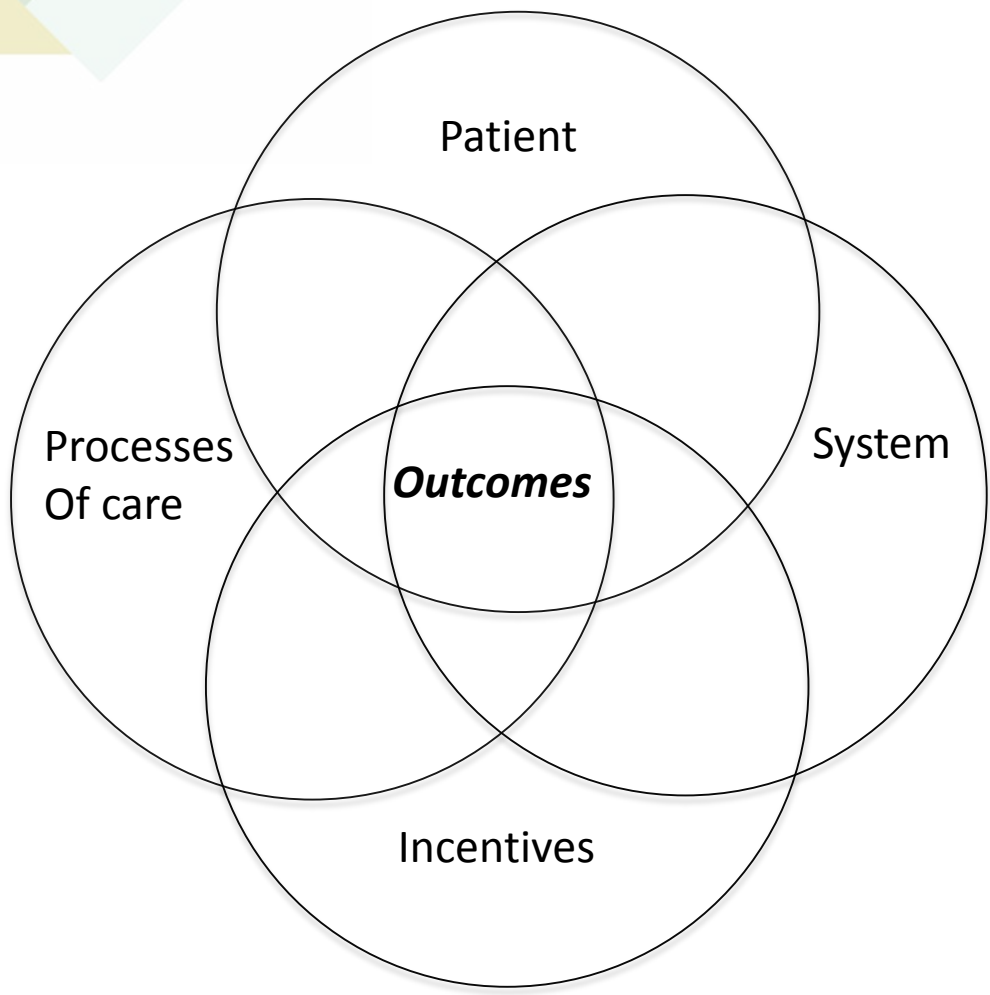
High Value Care for Heart Failure





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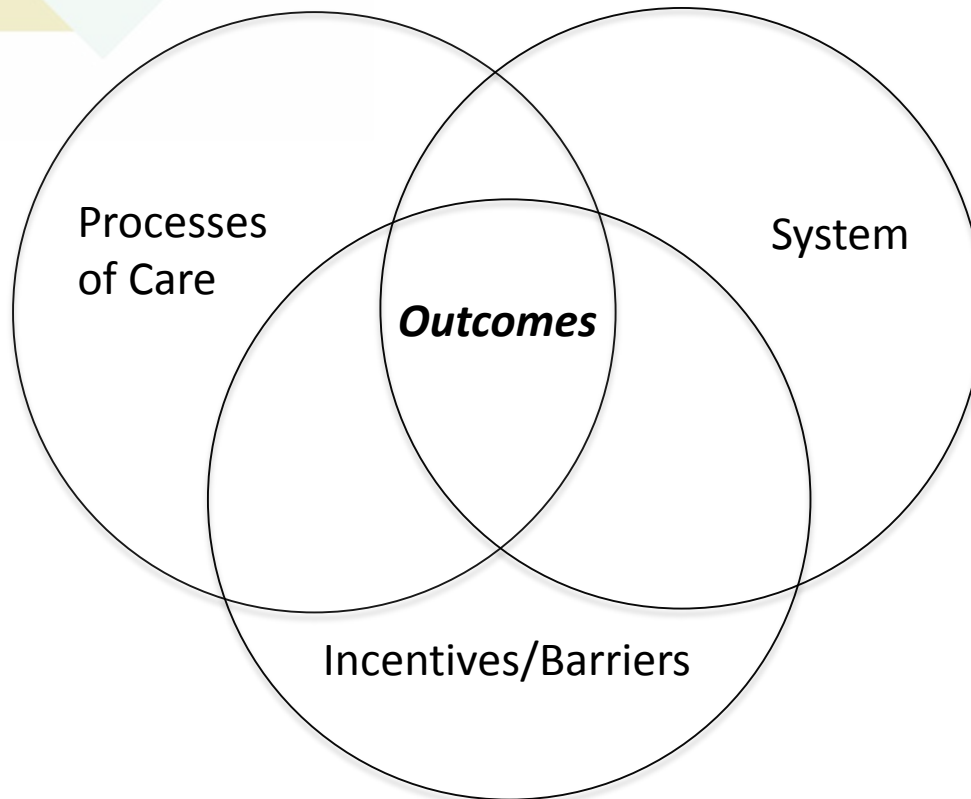
High Value Care for Heart Failure



High Value Care for Heart Failure

What

- appropriate medication
- patient education
- medication reconciliation
- early follow-up post discharge



Where

- in hospital
- out-patient clinic
- ED
- home visits
- remote monitoring
- “infusion” centers

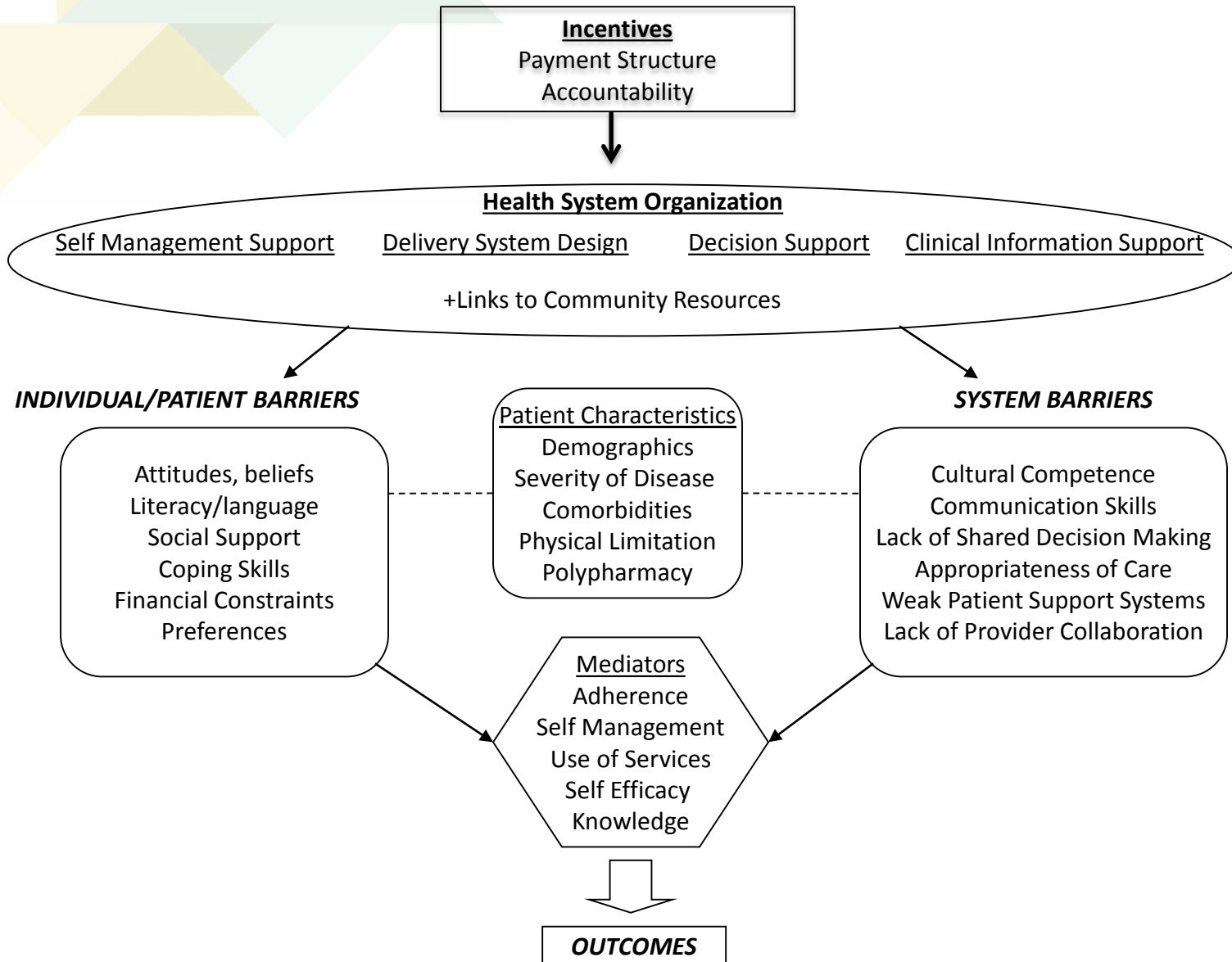
Who

- nurses
- navigators
- pharmacists

External Forces

- Payment models
- Quality/Performance measures

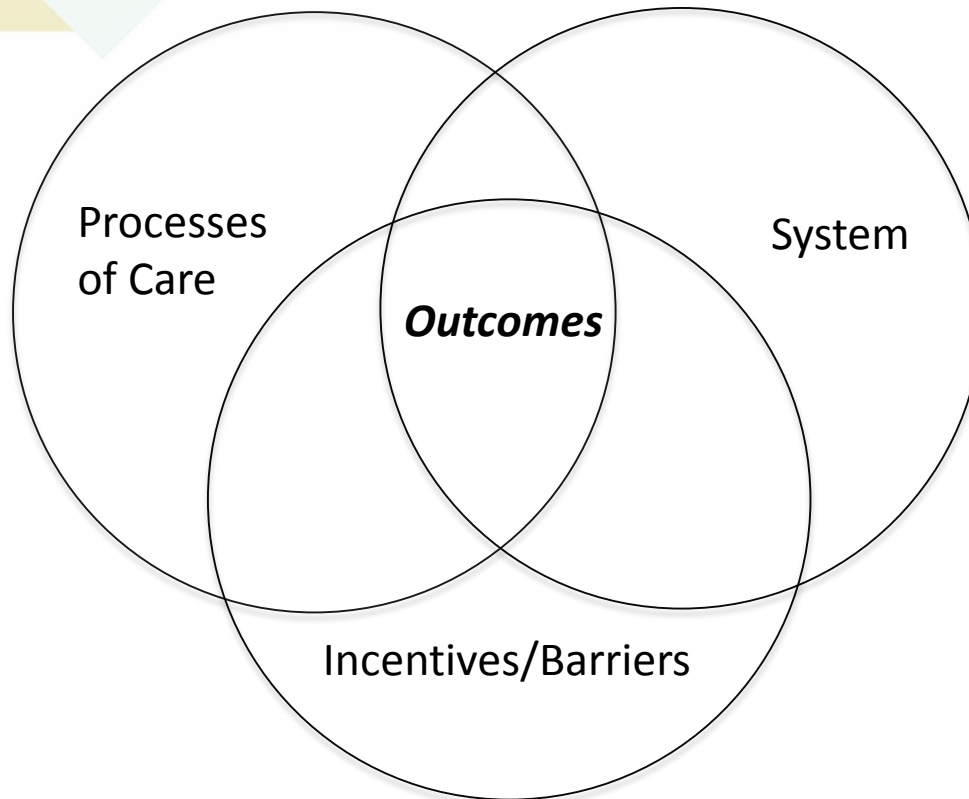
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High Value Care for Heart Failure

What we do

- appropriate medication
- patient education
- medication reconciliation
- early follow-up post discharge



Where/Who

- in hospital
- out-patient clinic
- ED
- home visits
- remote monitoring
- "infusion" centers
- nurses, navigators

External Forces

- Payment models
- Quality/Performance measures

What are the core components of current processes of care?

- What are successful ways of implementing them?
- What are the barriers?

What should the system look like?

- How should the system be designed?
- What are the barriers?
- What data is needed?
- How (if at all) should that differ by
 - Age
 - Sex
 - Race/ethnicity

What should incentives be?

- What metrics? What setting?
- What data is needed?
- How would incentives influence care by:
 - Age
 - Sex
 - Race/ethnicity