

## Value-Based Health Care in the Netherlands

Where do we stand &  
How to move forward?

Bruggink Event  
15 June 2017



# Goal of this Bruggink Event

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## **VBHC where do we stand & how to move forward?**

- \ Create a quick overview of VBHC in the Netherlands
- \ Insights in lessons learned of current VBHC initiatives
- \ Better understanding of expected roles of different stakeholders
- \ Understand specific opportunities & expectations for pharma



# Agenda for this afternoon

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14.00 – 14.15 Introduction & Quick overview of VBHC in NL

*Gerard Klop*

14.15 – 15.30 Five short case presentations:

Santeon

*Samyra Keus*

Meetbaar Beter

*Dennis van Veghel*

Erasmus MC

*Linetta Koppert*

Diabeter

*Johan de Waal*

Vereniging Innovatieve Geneesmiddelen

*Ad Antonisse*

15.30 – 15.45 Break

15.45 – 16.00 Presentation & reflection Menzis

*Ward Bijlsma*

16.00 – 16.15 Reflection by VWS

*Wouter van de Sande*

16.15 – 17.00 Facilitated discussion

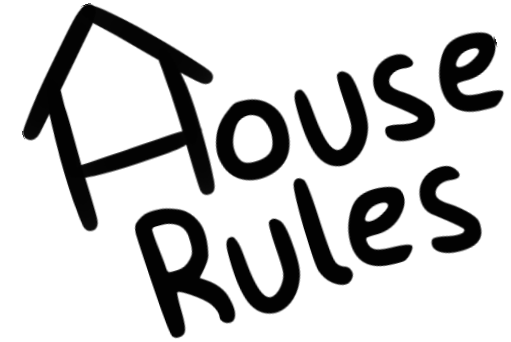
*All*

17.00 – 17.30 Closing and drinks

*All*

# Rules for this afternoon

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Presenters please stick to your 15 minutes!

Audience please hold your questions till plenary discussion

All please engage in an open and constructive dialogue

MEDICAL

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Health Care  
Doctor  
Hospital  
Pharmacist  
Nurse  
Dentist  
First Aid  
Surgeon  
Emergency

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# Value-Based Health Care A Quick Overview



# Our phone

**HIGH**

• Transparency •

**LOW**

**LOW**

• Quality variation •

**HIGH**

**HIGH**

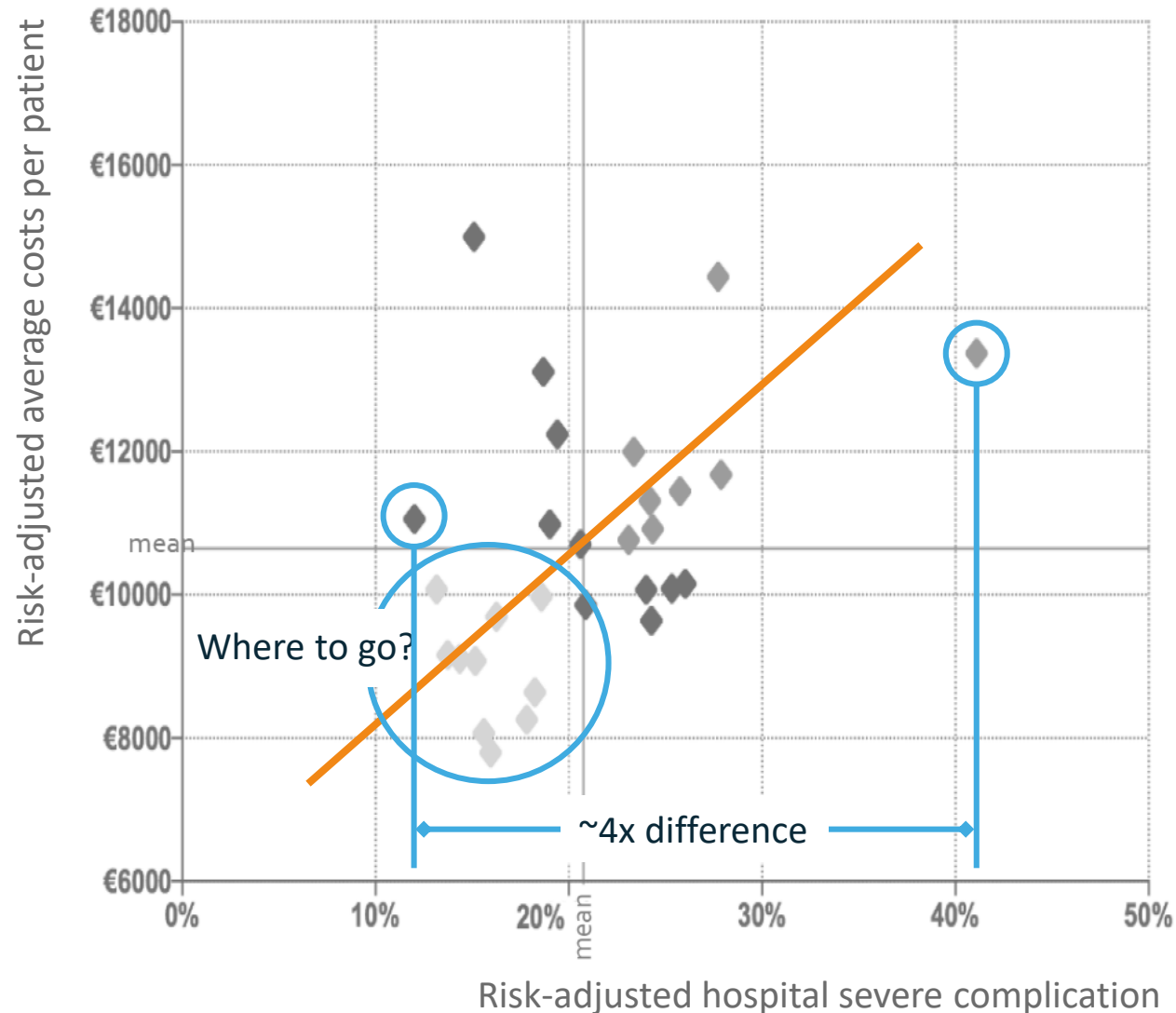
• Customer control •

**LOW**

# Our health

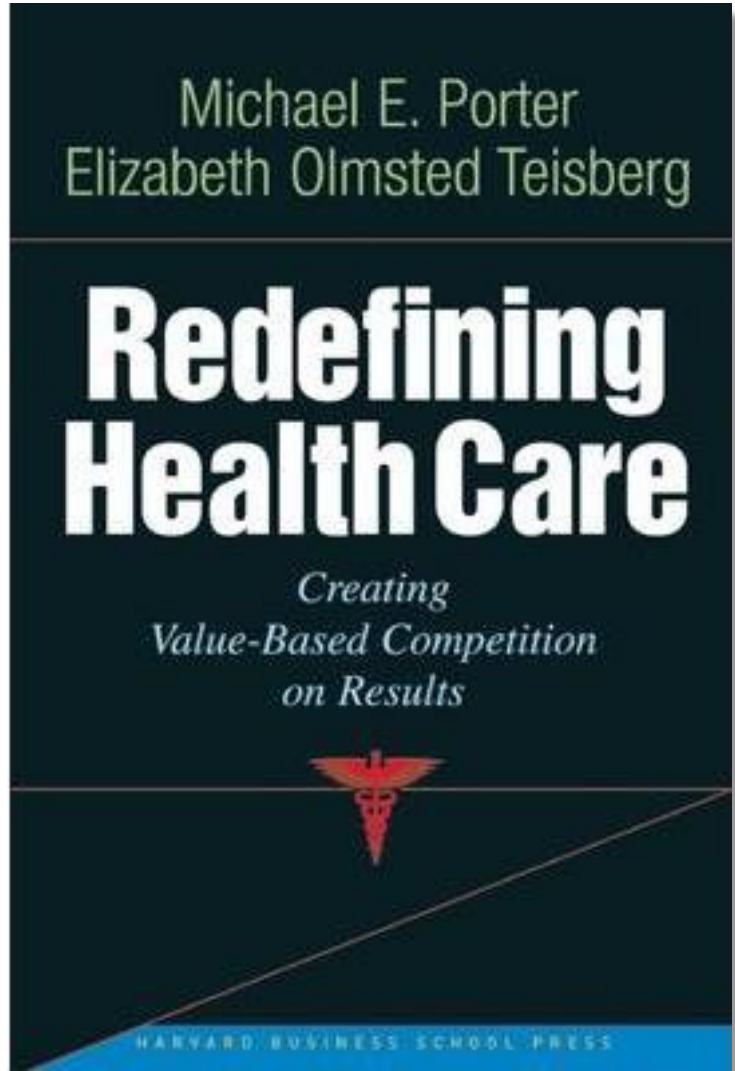
# Do we accept these huge variations in quality and costs in healthcare?

## Colorectal cancer care performance across multiple Dutch hospitals



Source: Nationwide Outcomes Measurement in Colorectal Cancer Surgery: Improving Quality and Reducing Costs - JA Govaert - 2016

VBHC can provide the solution ...



**Transparency in quality and costs**



**Improvement of quality and costs**



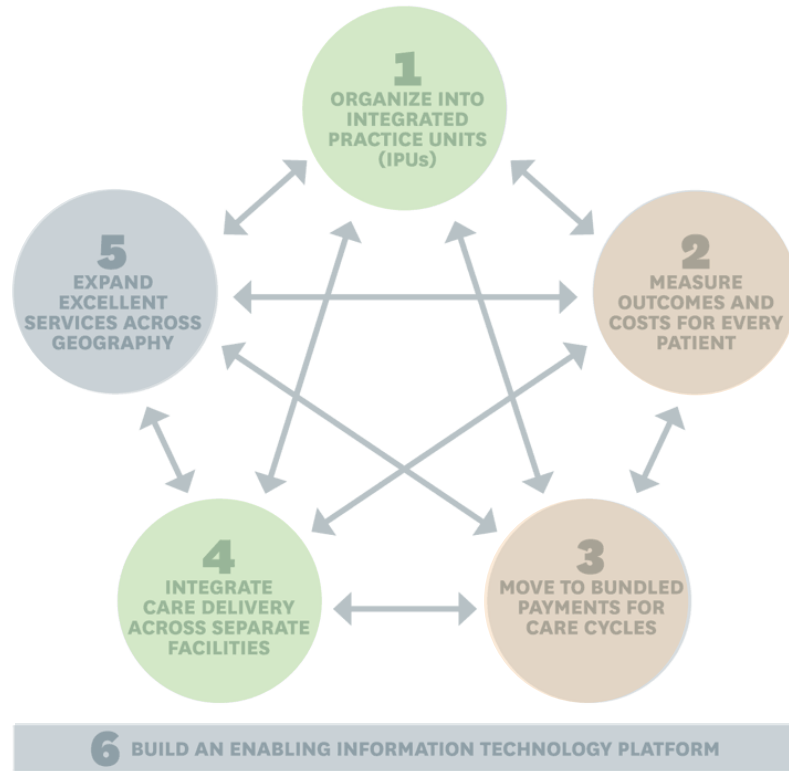
**Improved patient value**

$$\text{Patient Value} = \frac{\text{Health Outcomes}}{\text{Cost}}$$

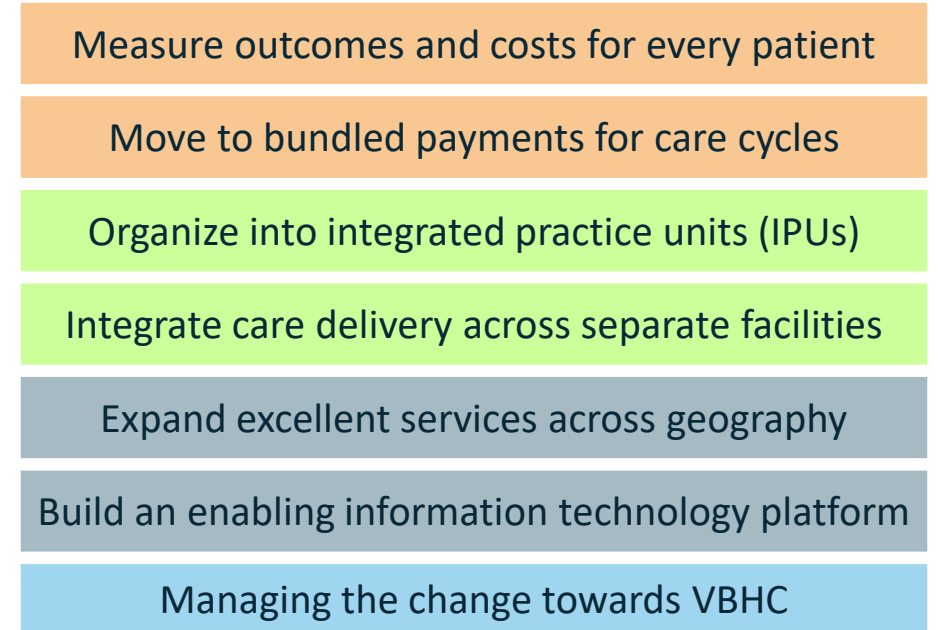


# VBHC is perceived as a big and conceptual goal ...

## So let's break it down



The Value Agenda



= Integration of healthcare

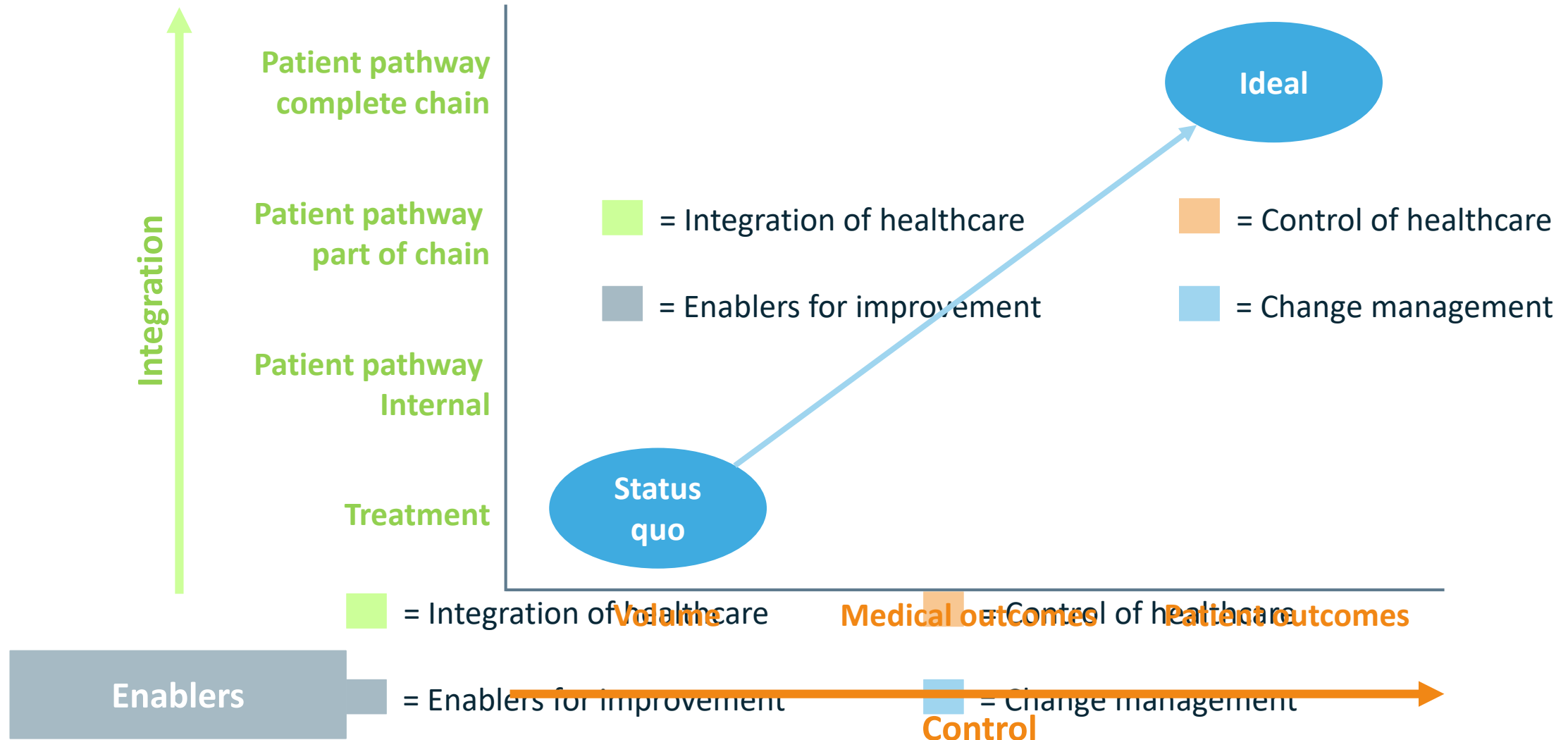
= Control of healthcare

= Enablers for improvement

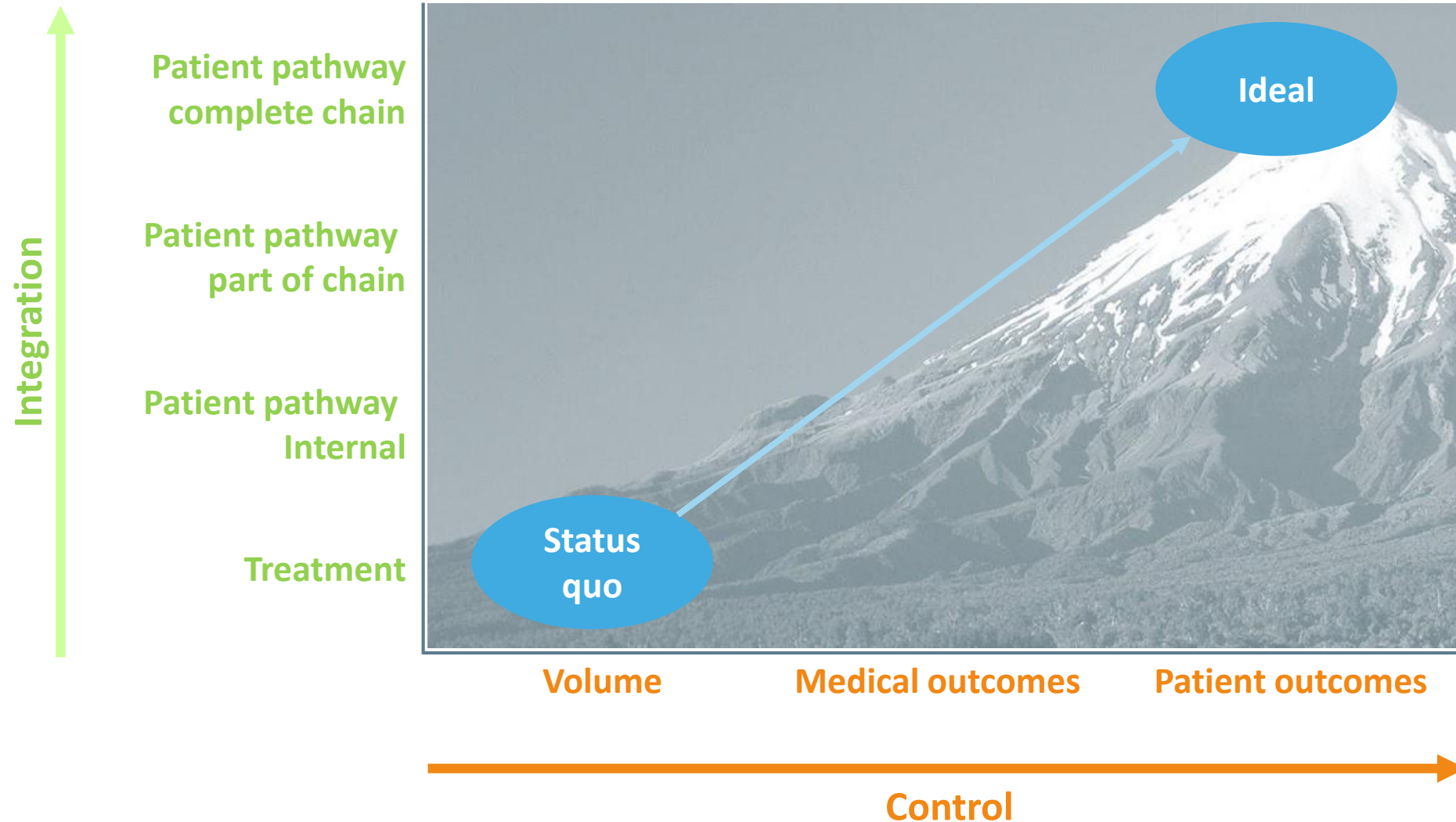
= Change management

# VBHC is perceived as a big and conceptual goal ...

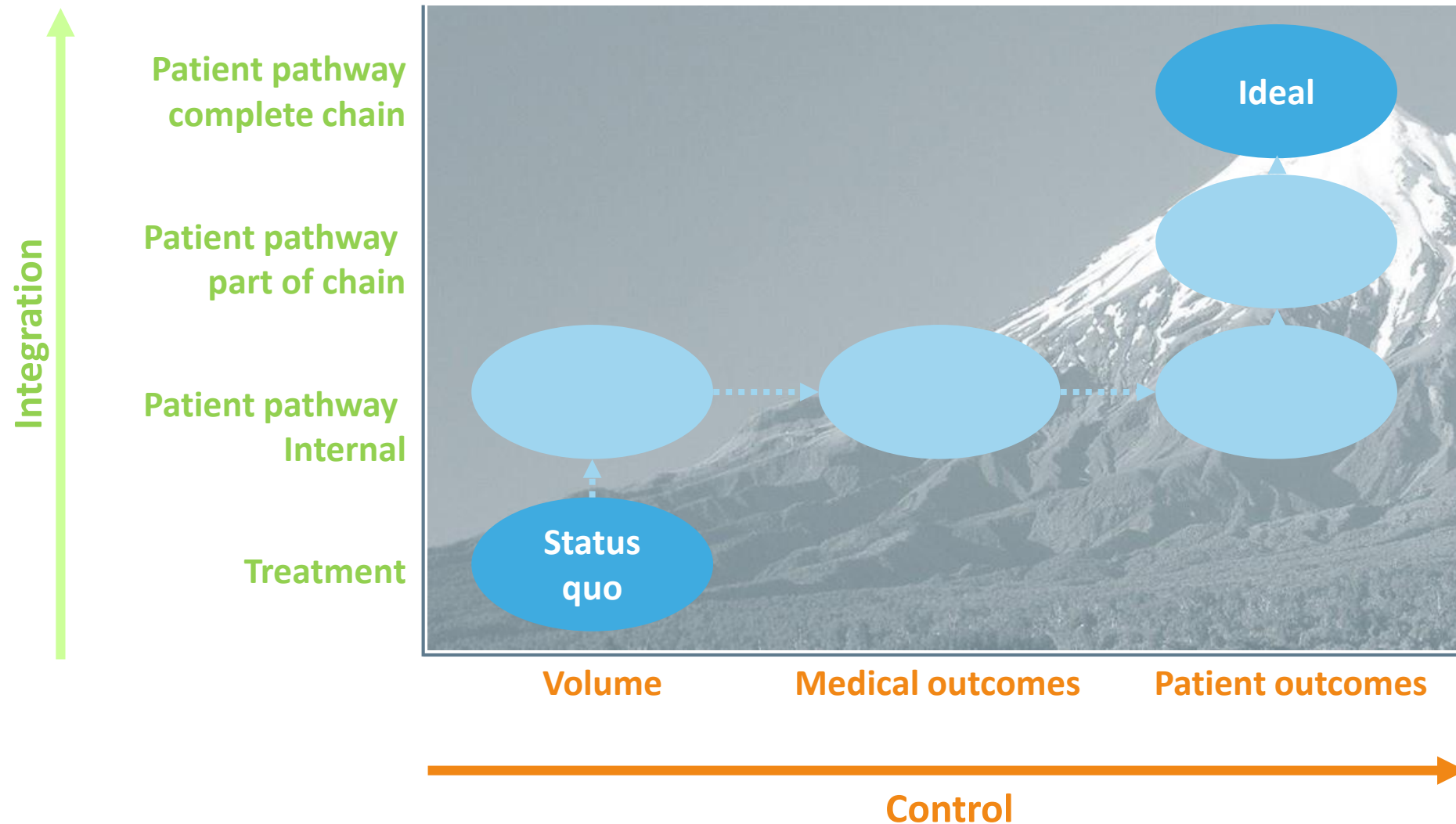
## So let's break it down



Moving from the status quo to the ideal situation is a big step  
You cannot jump to the peak of the mountain ...



Start with taking targeted steps ...  
Improving, learning and getting stronger on the way



# Some healthcare providers already started their journey





# Collaborate, collaborate, collaborate based on clear roles

## Patients: Contributor

- \ Tell which outcomes matter
- \ Test ideas
- \ Suggest improvements



## HCP: Initiator and driver

- \ Measure outcomes & costs
- \ Implement continuous improvement cycles
- \ Share best-practices

## Health insurers: Catalyzer

- \ Install value-based contracting
- \ Co-finance the change
- \ Promote benchmarking



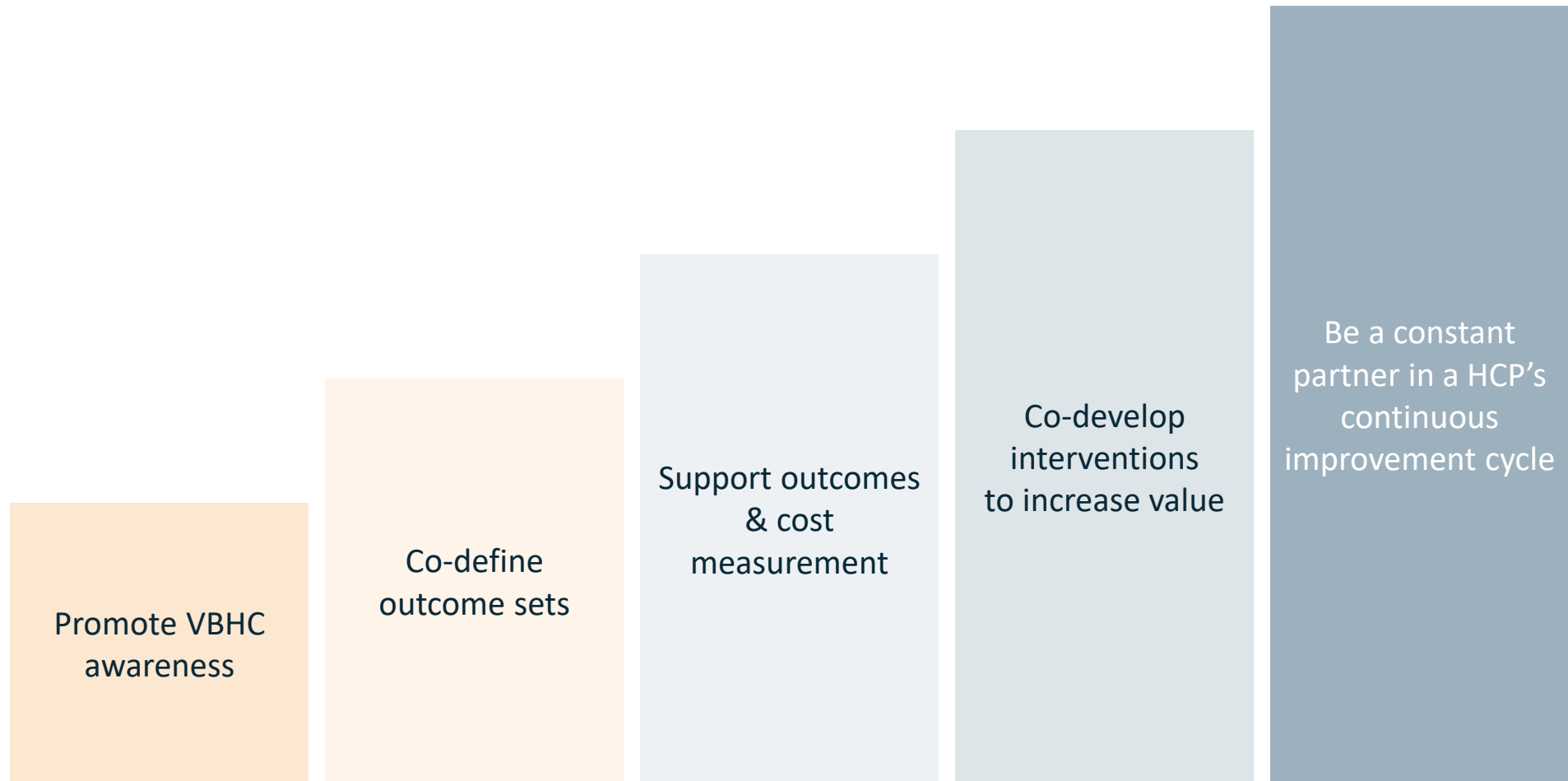
## Industry: Partner

- \ Innovate care pathway
- \ Support RWE measurement
- \ Provide disease expertise

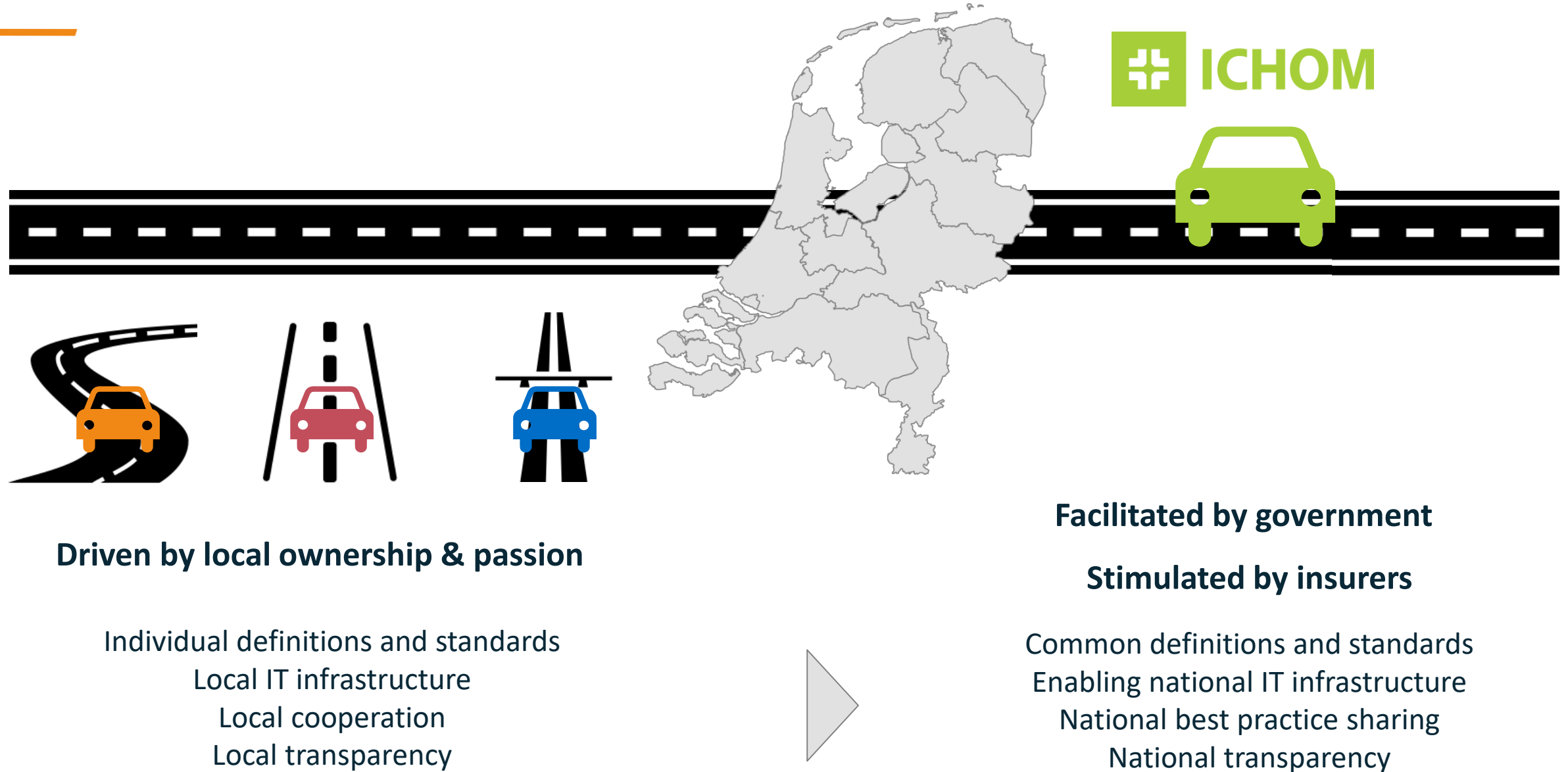


# Which role can pharma play in VBHC?

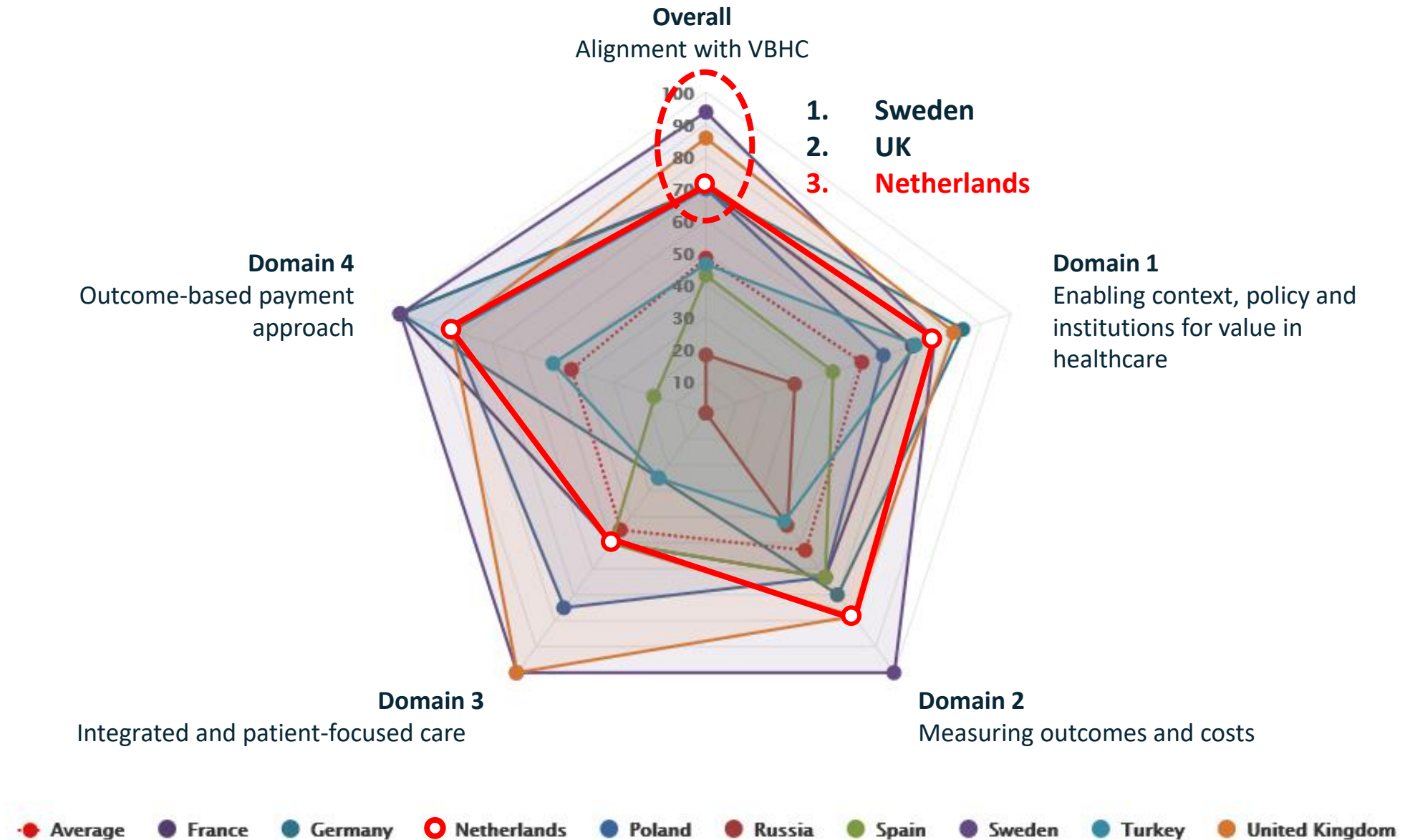
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# Avoid fragmentation, align nationally



# VBHC readiness differs greatly per country: The Netherlands is one of the frontrunners



So, we are in a frontrunner position  
Let's set the example in Europe and beyond!

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# How to get there ... Main take aways from 11th May Porter Congress

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## \ **National level**

Stimulate data exchange & transparency by improved IT infrastructure & privacy rules

## \ **Healthcare insurer**

Move to quality contracts based on bundled payments, disease based not population

## \ **Healthcare provider**

Apply existing outcome standards, don't re-invent the wheel





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