



**International Consortium for
Health Outcomes Measurement**

European Patients' Rights Day

12th May 2015

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Why ICHOM?

What we do

We believe in value based healthcare

$$\text{Value} = \frac{\text{Patient health outcomes achieved}}{\text{Cost of delivering those outcomes}}$$

Variation in outcomes is a worldwide challenge

2x variation in 30-day mortality rate from heart attack in US hospitals



4x variation in bypass surgery mortality in the UK hospitals



5x Variation of major obstetrical complications among US hospitals



9x variation in complication rates from radical prostatectomies in the Dutch hospitals



18x variation in reoperation rates after hip surgery in German hospitals



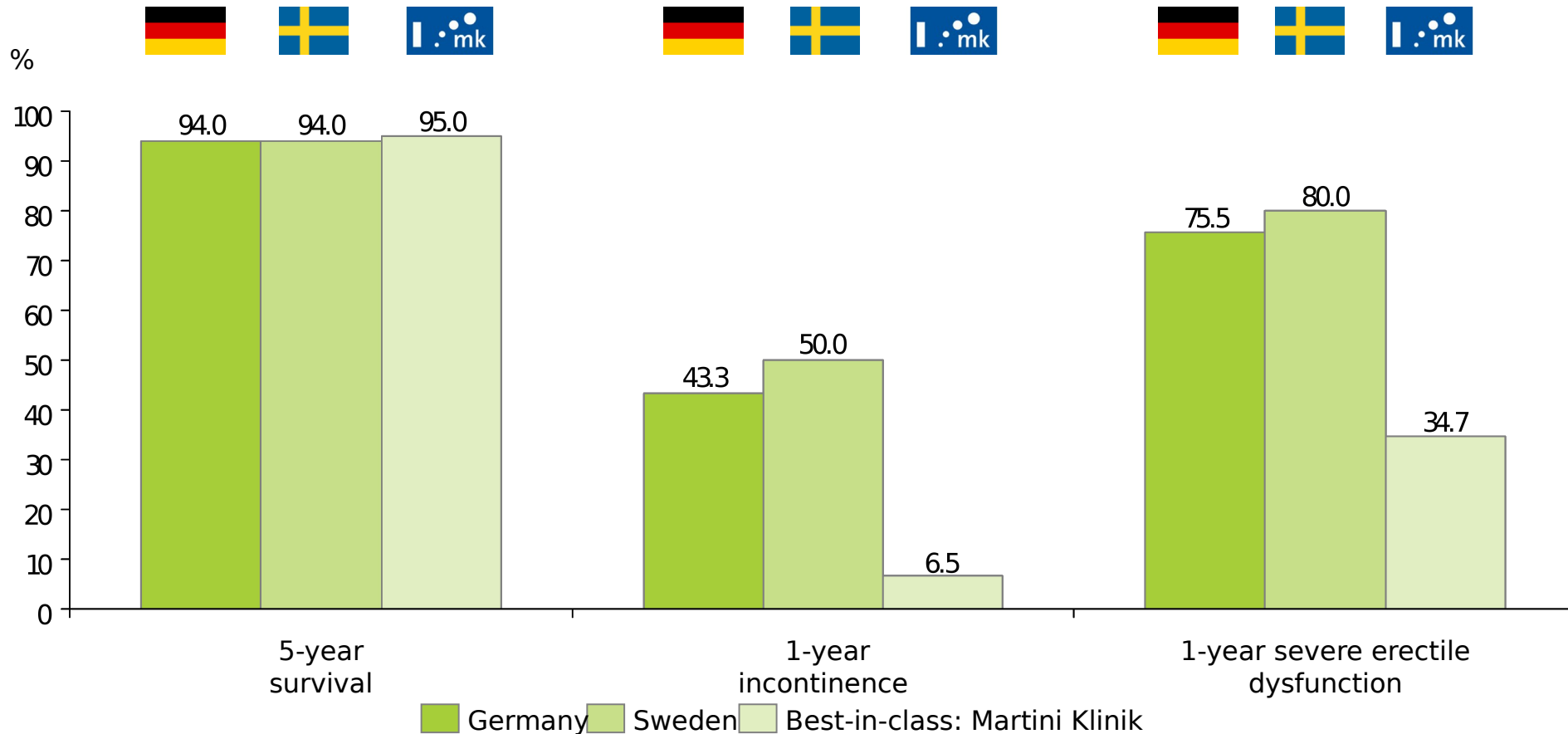
20x variation in mortality after colon cancer surgery in Swedish hospitals



36x variation in capsule complications after cataract surgery in Swedish hospitals

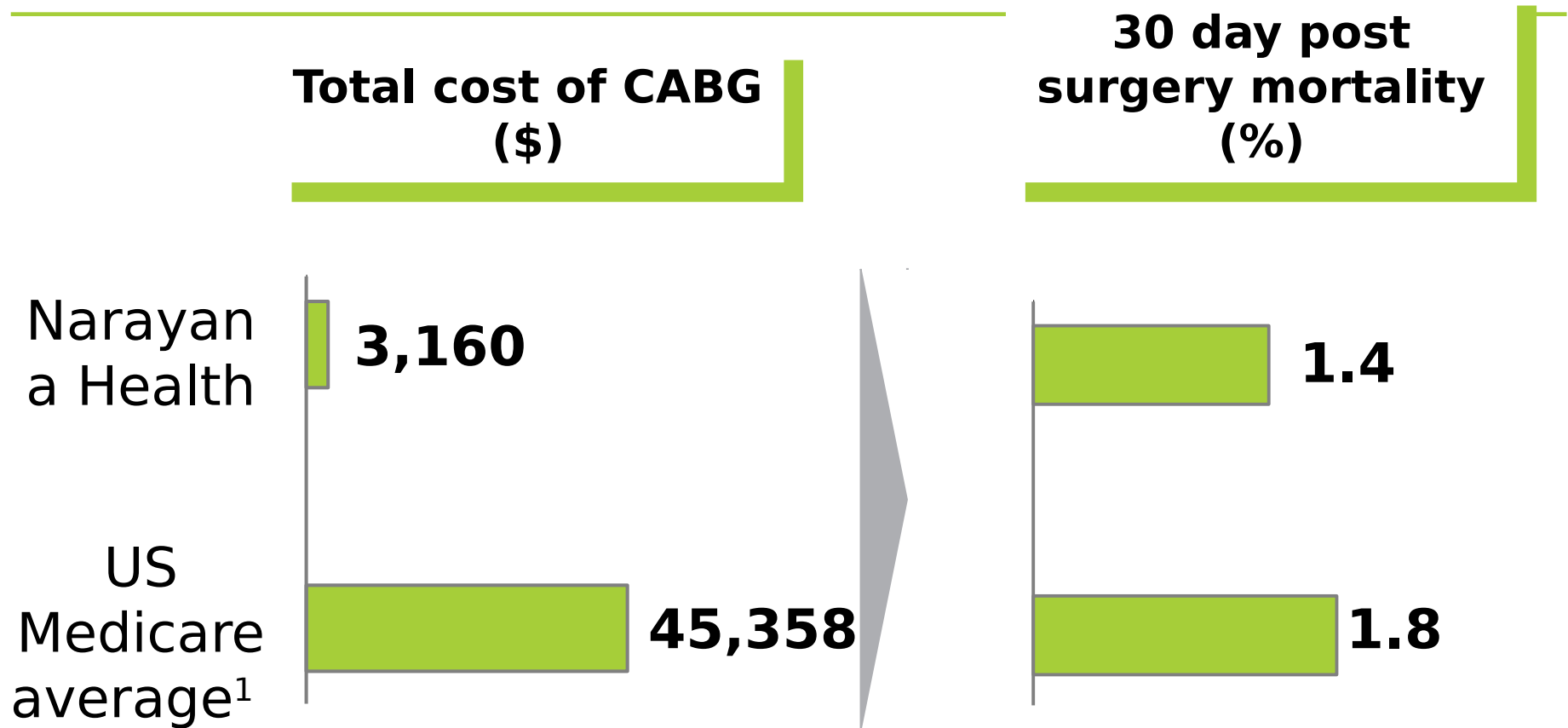


Variation when meaningful outcomes measured



Swedish data rough estimates from graphs; Source: National quality report for the year of diagnosis 2012 from the National Prostate Cancer Register (NPCR) Sweden, Martini Klinik, BARMER GEK Report Krankenhaus 2012, Patient-reported outcomes (EORTC-PSM), 1 year after treatment, 2010

Large variations in the cost of care



1. Average Medicare payment to hospitals 2. Comparisons are not risk-adjusted. Risk-adjustment will likely improve Narayana Health's outcomes due to the large number of advanced patients at Narayana Health 3. Costs based on Medicare average payments and CDC Fast Stats estimates that 395000 CABG procedures are conducted annually in the US. Actual costs are likely greater as private insurers pay higher prices 4. One third of Narayana Health's cost is for salaries. Thus the total Narayana Health cost was adjusted to \$13700 to compare with US prices, assuming that US doctors are paid twice as much as Indian doctors and other US staff earn 20 times as much. Sources: Harvard Business Review 2013, Birkmeyer *et al.* *Health Services Research* 2010

ICHOM

ICHOM's three founders...



...launched ICHOM as a nonprofit

- Independent 501(c)3 organization
- Idealistic and ambitious goals
- Global focus
- Engages diverse stakeholders



Our mission:

*Unlock the potential of Value-Based Health Care by **defining global standard sets of outcome measures that really matter to patients** for the most relevant medical conditions and by **driving adoption and reporting** of these measures worldwide.*

ICHOM sponsors

PLATINUM

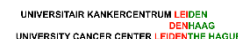


GOLD

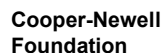
Carl Bennet AB



SILVER



BRONZE



COFOUNDER



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Why ICHOM?

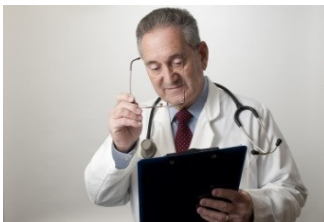
What we do

ICHOM organizes international Working Groups

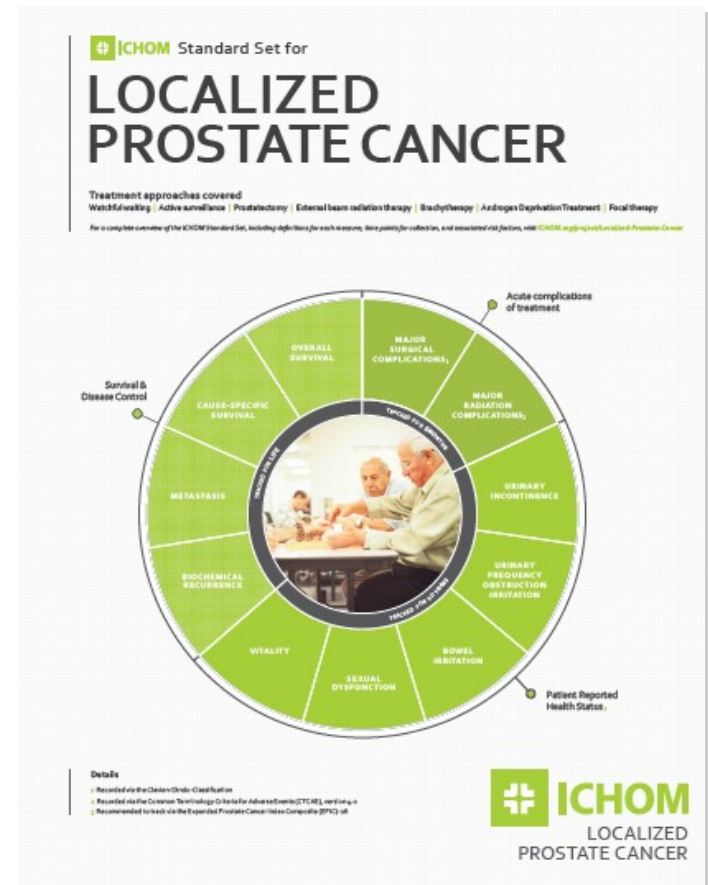
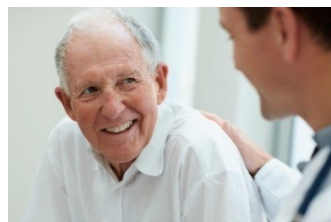


ICHOM facilitates a process with international physician and registry leaders and patient representatives to develop a global Standard Set of outcomes that really matter to patients

Physician and registry leaders



Patient representatives



ICHOM has recently updated its methodology

1

Working Groups

- 20-25% of our Working Groups consist of patient representatives

2

Focus Groups

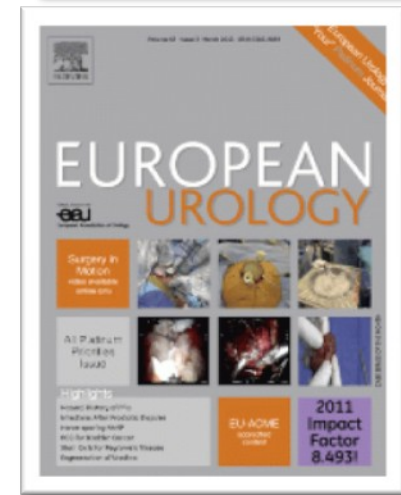
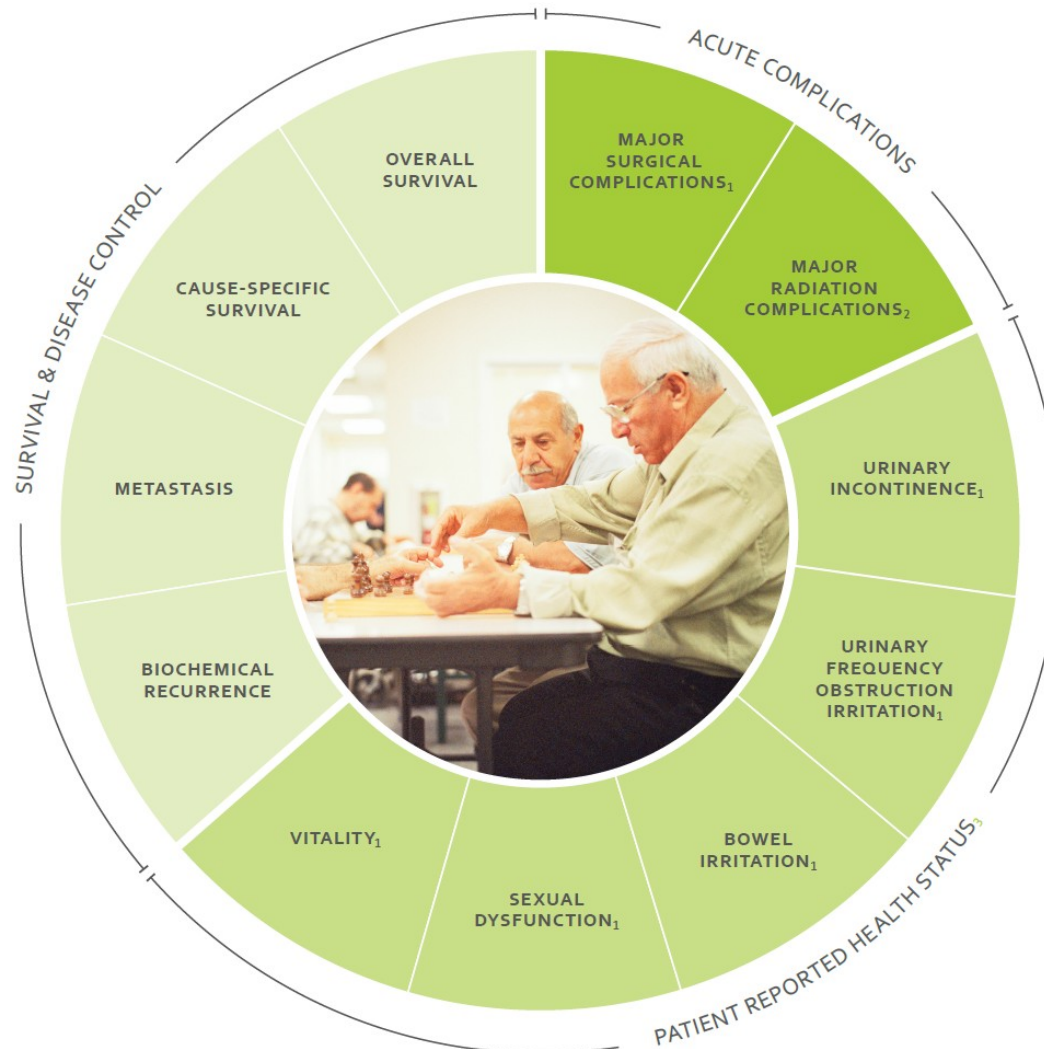
- Larger focus groups of patients feed into the Working Group process

3

Surveys

- Our final list of outcomes is shared with hundreds of patients via patient advocacy groups

Example: Standard Set for Localized Prostate Cancer

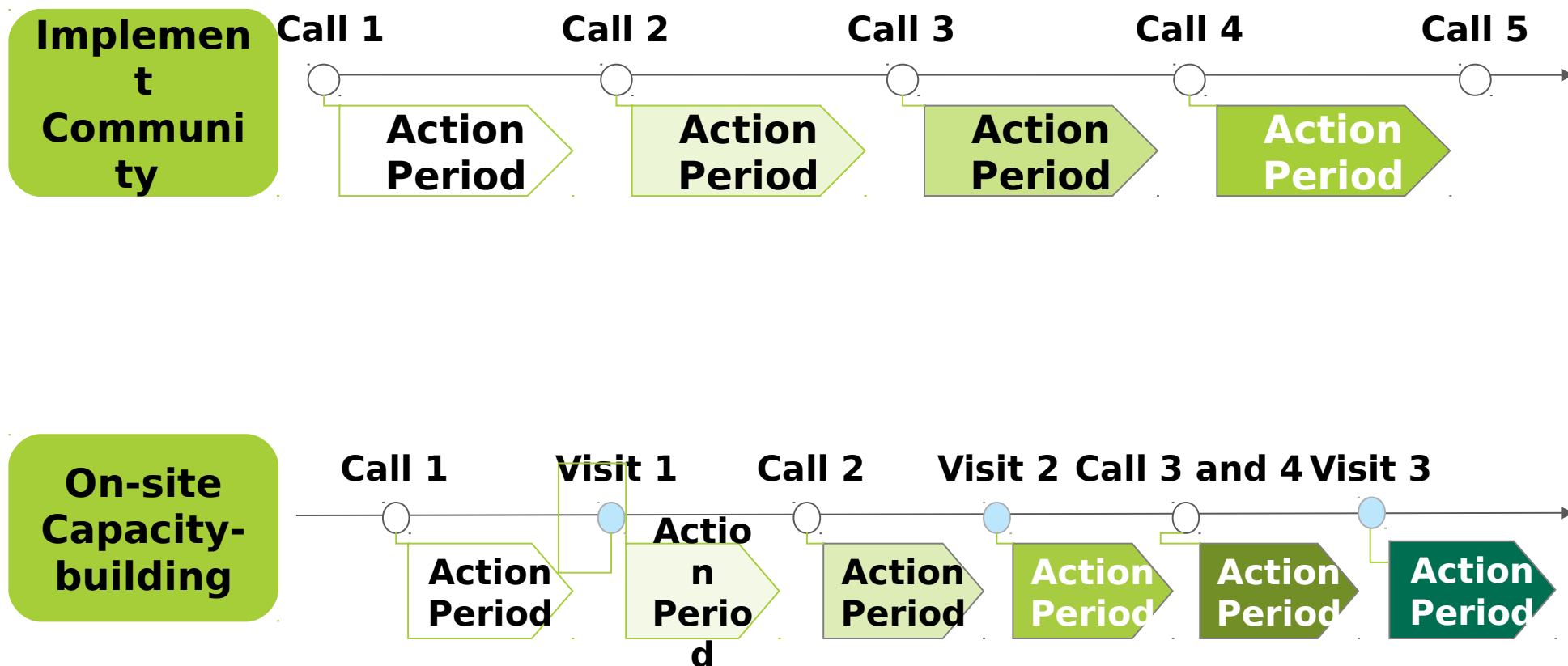


© 2013 ICHOM. All rights reserved. When using this Standard Set of outcomes, or quoting therefrom, in any way, we solely require that you always make a reference to ICHOM as the source so that this organization can continue its work to define Standard Sets.



Another 40+ institutions have expressed interest in measuring Standard Sets and are

ICHOM implementation support



We are engaging health system stakeholders on the long-term goal of outcome transparency



P. Conway

Chief Medical Officer - CMS

“

*Our core principle: transparency drives improvement. **CMS, ICHOM and others need to work together** to develop and implement robust sets of aligned outcomes measures.*

”

“

*Transparency on quality of care is crucial if we want to achieve affordable health care. **We cannot stay behind.** ICHOM can be a major facilitator for this change to transparency.*

*That's why **the National Institute for Health Care Quality** in the Netherlands **actively promotes the implementation of ICHOM metrics.***



E. Schippers

” Health Minister – The Netherlands

Recap

- 1 Develop global consensus sets of outcomes...
- 2 ...to reflect what matters most to patients and then...
- 3 ...support their implementation and ultimately...
- 4 ...relate them to the underlying cost to finally benchmark on value