

NEWS RELEASE

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Commonwealth Fund Announces Commission on a High Performance Health System

New York City, June 1, 2005—The Commonwealth Fund, a private foundation supporting independent research on health and social issues, today announced the creation of a Commission on a High Performance Health System, which aims to move the U.S. toward a health care system that achieves better access, improved quality, and greater efficiency, with particular focus on the most vulnerable due to income, race/ethnicity, health, or age.

The Commission will seek opportunities to change the delivery and financing of health care to improve system performance, and will identify public and private policies and practices that would lead to those improvements. It will explore mechanisms for financing improved health insurance coverage and investment in the nation's capacity for quality improvement, including reinvesting savings from efficiency gains.

The Commission, approved by the Fund's Board of Directors at its April meeting, will have an initial five-year term. It is charged with tracking performance targets, developing policy options, and disseminating innovative practice changes to improve the U.S. health care system.

"The U.S. health care system is the most expensive in the world, yet there is little question that, by any number of measures, we are not getting what we're paying for," said Commonwealth Fund President Karen Davis. "We see the establishment of this commission as one crucial step in determining what needs to be done to ensure that we get the best care—and the best value—for our health care dollars."

The Commission is chaired by James J. Mongan, M.D., President and CEO of Partners HealthCare. The eighteen commissioners represent broad interests in health care and a commitment to each of the elements of a high-performance health system—coverage, quality, and efficiency (see attached). The commission is scheduled to have its first meeting in July 2005.

"Concern with high health care costs, fiscal constraints on employers and governments, and a growing number of uninsured and underinsured is putting a premium on strategies that can simultaneously improve coverage and quality, while generating savings" said Stephen Schoenbaum, M.D., Executive Vice President for Programs at The Commonwealth Fund and Executive Director of the new Commission. "Short-term 'fixes' are adding to fragmentation and complexity in the health care system and shifting costs from one party to another. The United States needs to establish longer-term goals and strategies that will improve performance on multiple fronts. We desperately need a strategic plan for improving health system performance."

The panel will be charged with defining the characteristics of high-performance health systems; identifying the policy changes that would facilitate achieving such a system in the U.S.; setting realistic targets for what the U.S. could achieve in higher system performance; recommending concrete steps, including policies and practices, private and public, that would lead to achievement of these goals; issue an annual "scorecard" documenting progress in achieving the goals; and issue an annual report outlining key policy issues related to achieving a high-performance health system.

Senior Policy Director for the Commission will be Anne Gauthier, who comes to that position after serving as program director for the Robert Wood Johnson Foundation's Changes in Health Care Financing and Organization initiative and as a vice president at AcademyHealth, the Washington, DC-based professional organization for health services researchers, policy analysts, and practitioners. Under grants from The Commonwealth Fund, policy activities for the Commission will be based at AcademyHealth and logistic support for Commission-related activities will be provided by the Alliance for Health Reform.

Cathy Schoen, Vice President of the Commonwealth Fund, will serve as Commission Research Director. She will oversee preparation of the annual health system scorecard, as well as research on public views on values and preferences regarding health care, and modeling of the costs and benefits of policy options for system improvements.