HEALTH AND WEALTH: MEASURING HEALTH SYSTEM PERFORMANCE

Karen Davis
President, The Commonwealth Fund
Senate Commerce Committee Hearing
March 12, 2008
kd@cmwf.org
Figure 1. International Comparison of Spending on Health, 1980–2005

Average spending on health per capita ($US PPP)

- United States
- Germany
- Canada
- France
- Australia
- United Kingdom

Total expenditures on health as percent of GDP

- United States
- Germany
- Canada
- France
- Australia
- United Kingdom

Figure 3. National Health Expenditures as a Percentage of GDP, 2000-2017

Note: Data for 2008-2017 is projected
Figure 4. Medicare Spending Per Enrollee and Mortality Rate by State, 2003

Figure 5. Quality and Costs of Care for Medicare Patients Hospitalized for Heart Attacks, Colon Cancer, and Hip Fracture, by Hospital Referral Regions, 2000–2002

1 year mortality rate

Deaths per 100

<table>
<thead>
<tr>
<th>Percentiles</th>
<th>Mean of highest 90%</th>
<th>10th</th>
<th>25th</th>
<th>Median</th>
<th>75th</th>
<th>90th</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 year mortality rate</td>
<td>30</td>
<td>27</td>
<td>28</td>
<td>30</td>
<td>31</td>
<td>32</td>
</tr>
</tbody>
</table>

Annual relative resource use*

Dollars ($)

<table>
<thead>
<tr>
<th>Percentiles</th>
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<th>Median</th>
<th>75th</th>
<th>90th</th>
</tr>
</thead>
<tbody>
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<td>$26,829</td>
<td>$23,314</td>
<td>$24,623</td>
<td>$25,994</td>
<td>$27,465</td>
<td>$29,047</td>
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</tbody>
</table>

* Risk-adjusted spending on hospital and physician services using standardized national prices.
Data: E. Fisher and D. Staiger, Dartmouth College analysis of data from a 20% national sample of Medicare beneficiaries.
Source: Commonwealth Fund National Scorecard on U.S. Health System Performance, 2006
Figure 6. Fifteen Options that Achieve Savings Cumulative 10-Year Impact

Producing and Using Better Information
- Promoting Health Information Technology: -$88 billion
- Center for Medical Effectiveness & Health Care Decision-Making: -$368 billion
- Patient Shared Decision-Making: -$9 billion

Promoting Health and Disease Prevention
- Public Health: Reducing Tobacco Use: -$191 billion
- Public Health: Reducing Obesity: -$283 billion
- Positive Incentives for Health: -$19 billion

Aligning Incentives with Quality and Efficiency
- Hospital Pay-for-Performance: -$34 billion
- Episode-of-Care Payment: -$229 billion
- Strengthening Primary Care & Care Coordination: -$194 billion
- Limit Federal Tax Exemptions for Premium Contributions: -$131 billion

Correcting Price Signals in the Health Care Market
- Reset Benchmark Rates for Medicare Advantage Plans: -$50 billion
- Competitive Bidding: -$104 billion
- Negotiated Prescription Drug Prices: -$43 billion
- All-Payer Provider Payment Methods & Rates: -$122 billion
- Limit Payment Updates in High-Cost Areas: -$158 billion

Figure 7. Total National Health Expenditures, 2008–2017
Projected and Various Scenarios

Dollars in Trillions

- **Projected under current system**
- **Insurance Connector plus selected individual options***
- **Spending at current proportion (16.2%) of GDP**

*Savings options include: Health Information Technology, Center for Medical Effectiveness, Public Health, Episode-of-Care, Strengthening Primary Care, Benchmark Rates, and Prescription Drug Prices.

Figure 8. Employer-Provided Health Insurance, by Income Quintile, 2000–2006

Percent of population under age 65 with health benefits from employer

Figure 9. Health Consequences of Gaps in Health Insurance Coverage – An Update

Deaths of Adults Ages 25 – 64, 2004

1. Cancer – 164,832
2. Heart disease – 117,257
3. Unintentional injuries – 56,096
4. Suicide – 22,629
5. Uninsured – 20,000
6. Cerebrovascular disease – 19,075
7. Diabetes – 18,972
8. Chronic lower respiratory disease – 15,265
9. Chronic liver disease and cirrhosis – 17,173

Figure 10. Majority of Americans Experience Health Problems, Sick Loss, or Reduced Productivity, All Adults Ages 19–64

- Working with no sick loss or reduced productivity days: 21%
- Working with 1-5 sick loss to reduced productivity days: 27%
- Not working due to disability or other health reasons: 12%
- Working with six or more sick loss or reduced productivity days: 36%

Figure 11. Percentage of Uninsured Children Has Declined Since Implementation of SCHIP, but Gaps Remain

1999–2000
U.S. Average: 12.0%

2005–2006
U.S. Average: 11.3%

Figure 12. Preventive Care Visits for Children, by Top and Bottom States, Race/Ethnicity, Family Income, and Insurance, 2003

Percent of children (ages <18) received BOTH a medical and dental preventive care visit in past year

Figure 13. Five Key Strategies for High Performance

1. Extending affordable health insurance to all
2. Aligning financial incentives to enhance value and achieve savings
3. Organizing the health care system around the patient to ensure that care is accessible and coordinated
4. Meeting and raising benchmarks for high-quality, efficient care
5. Ensuring accountable national leadership and public/private collaboration