

ACT@Scale is funded by the European Union, in the framework of the Health Programme under grant agreement 709770



# **18th International Conference on Integrated Care**

## **24 May 2018**

### **Sustainability and business models of upscaling integrated care programs**

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# Outline

- ACT@scale program
- Methodology
- Results
- Preliminary conclusions
- Work in progress
- Questions



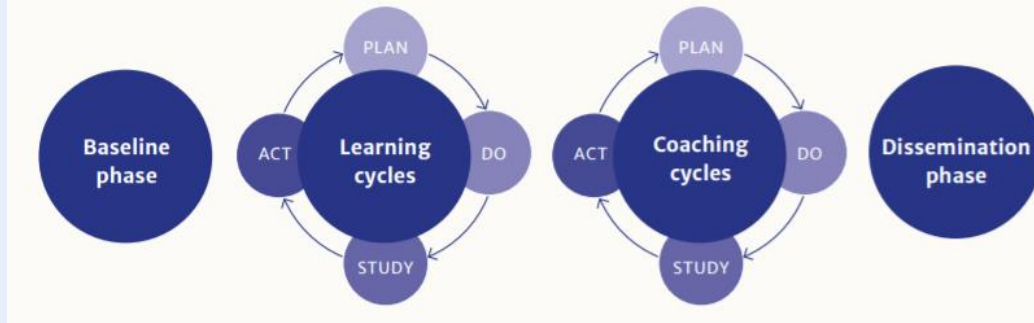
# ACT@Scale

- Coordinated Care & Telehealth deployment at scale
- 14 programs on chronic conditions, independent living and/or physical activity
- From small pilots to routine practice at large scale (32k → 75k people)
- Topics
  - change & stakeholder management
  - service selection
  - citizen engagement
  - sustainability and business models



# Methodology

- Collaborative methodology based on Breakthrough Series (BTS)
- 2 PDSA-cycles for iterative assessment of change



- Structure-process-outcome evaluation framework

# Data collection

**Structure  
indicators**

**Process  
indicators**

&

**Expert  
interviews and  
workshops**

## **Outcome**

General outcomes: total cost per program / average cost per user

Cluster specific: unit costs + utilization

Program specific: to monitor own objectives



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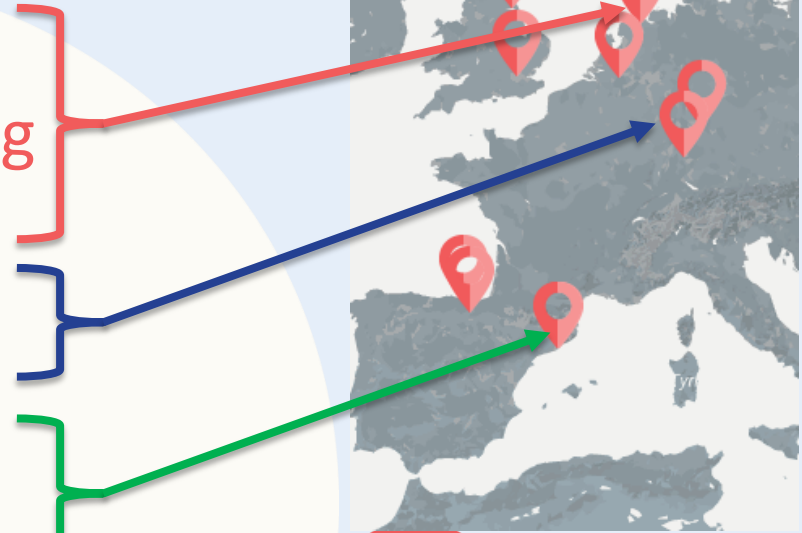
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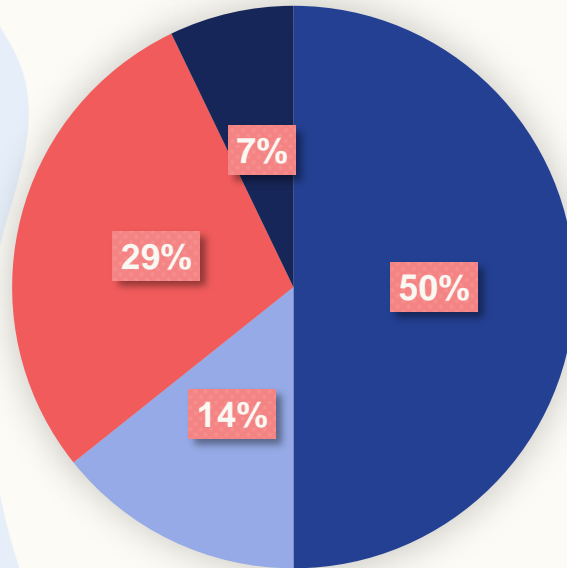
# Data collection

- Astma-COPD telehealth
- Effective Cardio telemonitoring
- Embrace
- World of training
- Complex Case Management
- Promoting Healthy Lives



# Results – structure indicators

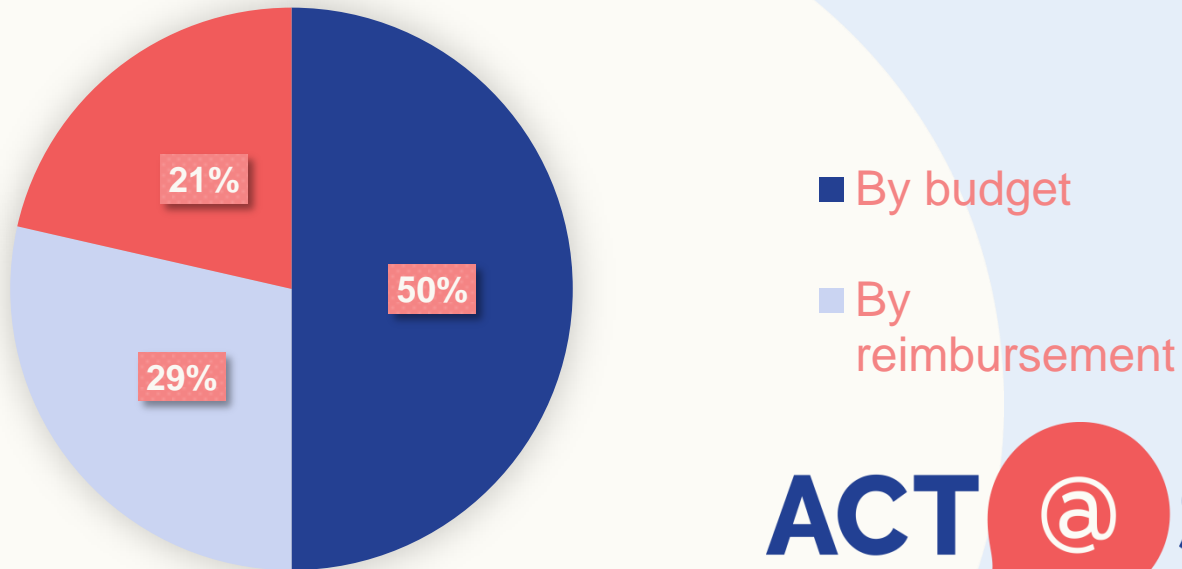
Funding is provided by



- Government
- Health care insurance companies
- Municipalities

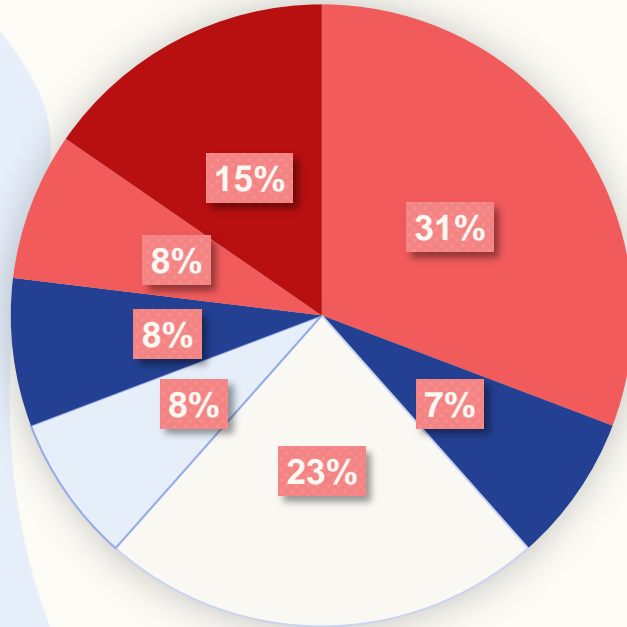
# Results – structure indicators

How is the program financed?



# Results – structure indicators

## Alternatives



■ Shared savings

■ Capitation

□ Veterans Health Administration model

□ population coverage

■ capacity expansion

■ co-payment by social services

■ none

# Results – process indicators

## Funding Stability: Establishing a consistent financial base for your program

	To little or no extent					To a very great extent		Not able to answer
1. The program exists in a supportive state economic climate.	1	2	3	4	5	6	7	NA
2. The program implements policies to help ensure sustained funding.	1	2	3	4	5	6	7	NA
3. The program is funded through a variety of sources.	1	2	3	4	5	6	7	NA
4. The program has a combination of stable and flexible funding.	1	2	3	4	5	6	7	NA
5. The program has sustained funding.	1	2	3	4	5	6	7	NA

# Results - Process indicators

Average Score of Sustain per domain



● CAT Nursing homes    ◆ CAT Chronic care    ■ CAT Complex case management    ▲ CAT Physical activity  
▼ CAT Frail older adults



# Preliminary conclusions

- Health care systems & challenges → business model
- Top-down vs bottom-up scaling up
- Unforeseen changes in at policy level
- Lack of funding stability & non sustainable business models
- No alternative business models agreed on



# On the agenda - 2018

- Repeating Program Sustainability Assessment Tool
- Evaluating second PDSA cycle
- Data analysis on population level
- Lessons learned on (alternative) business models



# Discussion

