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The Road Ahead

Value Based Healthcare and HIT



Hans Vandewyngaerde

President EMEA
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It has been more than 10 years since Michael E. Porter and Elizabeth Teisberg published their seminal book *Redefining Health Care*, which laid down the foundation for the revolutionary and evolutionary concept of Value Based Healthcare (VBHC).

Both starting and ending with the patient experience, VBHC has since become a driving force in the economic, clinical, commercial and R&D facets of healthcare. Yet it has manifested in very different ways around the globe.

Health Information Technology (HIT) is critical to the continuing implementation of VBHC. HealthManagement.org spoke to Vice President EMEA Agfa HealthCare, Hans Vandewyngaerde, about the exciting possibilities HIT offers for the development of VBHC. As he explains, no-one would have imagined a decade ago the far-reaching role of HIT in “making the world a safer place”.

What are the top challenges facing IT in VBHC?

While VBHC has been widely accepted around the globe, the way the “value” is measured differs markedly from one country to another. But in all cases, it requires a shift of focus from cost and return on investment (ROI), towards patient outcomes.

There is an enormous opportunity for HIT under the VBHC umbrella. Fundamentally, HIT enables the implementation of VBHC, and governments and hospitals must make significant investments.

By its very nature, VBHC is forcing integration across healthcare, requiring us to look towards a transversal rather than a silo model for information and HIT. Departments must work with other departments; hospitals must work with other hospitals and with GPs; care must be integrated.

VBHC requires integration, and integration requires HIT interoperability. Typically, each specialty or department has its own software, which isn’t integrated into the hospital’s overall system. As healthcare providers consolidate, this situation only gets more striking. For example, we are working with a healthcare group that uses more than 900 different software products. We are aiming to help them reduce this to 20 or 30.

It is important to keep in mind that the interoperability challenge goes beyond its technical aspects: when a physician – or anyone else for that matter – has become comfortable with a certain software, a certain

interface, they will likely initially resist a change, even if it will lead to better integration. So together with our customers, Agfa HealthCare has to demonstrate and communicate to the physician how the new system will benefit patients and staff. At the Human Resources level, therefore, the emphasis will be on change management and collaboration.

On a financial level, some GPs and hospitals worried that they will “lose control” of the patient. It will certainly have a huge impact on reimbursement models! But ultimately it will help all stakeholders, and reimbursement models will follow or should initiate the change. It isn’t all clear yet, though. We have spoken to hospital CEOs who say that the transversal model will not happen, and to others who say it is only a matter of “when”. Big Data presents another very significant challenge for HIT. Hospitals and healthcare groups need usable applications that capture, aggregate and integrate patient data, not only from a clinical perspective, but also for standardizing work processes and enabling hospitals to handle an anticipated workforce shortage.

“THE HIT SYSTEMS OF TOMORROW WILL ENSURE THAT SYSTEMS TALK TO ONE ANOTHER. INTEGRATED CARE AND ARTIFICIAL INTELLIGENCE WILL STRENGTHEN AND SUPPORT ONE ANOTHER UNDER THE VBHC UMBRELLA; THE PATIENT AND THE INDUSTRY WILL BE INVOLVED IN AND BENEFIT FROM THIS PROCESS”

Can you provide examples of how the roll-out of Agfa HealthCare’s HIT has contributed to developing VBHC processes?

We are contributing with platforms that address healthcare needs across three main domains.

Our Enterprise Imaging platform creates a true imaging record for every patient. It brings all of the patient’s images into the Electronic Health Record (EHR), no matter where they were made, or with what device or modality. The images and linked data are instantly accessible anywhere in the hospital, or even the regional network. With this “all images anywhere, anytime” approach, Enterprise Imaging speeds up



diagnosis and enhances patient care.

Then there is our Enterprise Content Management platform (HYDMedia), which captures the patient data, manages it, and makes the patient records available where they need to be, with search, retrieval, access and sharing of all types of information. It also supports the healthcare enterprise to manage business operations workflows.

Thirdly is our Integrated Care platform, which enables healthcare enterprises to harness the power of the data existing in their systems and platforms, to support patient healthcare management and access to patient health information beyond the hospital walls.

Across all of this, we are committed to educating clinicians about HIT's role in patient care, and on offering solutions that enable doctors, patients and even governments to talk to one another in a way that ultimately leads to improving healthcare.

How will Artificial Intelligence (AI) impact the future of VBHC?

AI has a huge role to play as we move towards VBHC. It is widely thought that 2030 will mark the year when the singularity point will be reached, that is, the creation of "superhuman" intelligence that surpasses the human brain.

There is no need to be afraid of this. Human and ethical considerations must be part of the AI process and, indeed, we expect the technology to "augment" rather than "replace" in healthcare. Thus, it will never fully replace clinicians but will instead free them to spend more time with patients and complex cases.

AI will enable the capture of and access to data, the input of data into expert systems and the transformation

of this data into knowledge and action. Its role will be clinical, financial and analytical. To give one example, healthcare facilities will be able to analyse where patients come from and build a strategy around this.

Is the definition of VBHC evolving and, if so, how does Agfa HealthCare monitor and keep pace in order to offer the best HIT solutions?

The definition of VBHC will not change; developments are more about how it will be implemented and monitored. It is important to note that this will differ from country to country. In some places, the emphasis will be on hospitals; in others it will be on payers.

To ensure that our solutions continue to meet real needs in this new healthcare model, we educate our R&D staff on VBHC, to keep them from focussing solely on ROI. They learn about Key Performance Indicators (KPIs) for VBHC, so that they can develop software with these in mind.

The HIT systems of tomorrow will ensure that systems talk to one another. Integrated care and Artificial Intelligence will strengthen and support one another under the VBHC umbrella; the patient and the industry will be involved in and benefit from this process.

Agfa HealthCare will continue to focus on developing and offering solutions that support healthcare to face and to leverage the digital realities of our world today and tomorrow, to make the world a safer place, and our lives healthier. ■

DISCLOSURE:

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