



Values & Value in Health Care

Positions & Perspective
of the National Physicians Alliance

2014

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The National Physicians Alliance is a non-partisan, non-profit organization that offers a professional home to physicians across medical specialties. We create research, advocacy, and education programs that promote health and foster active engagement of physicians with their communities. The NPA accepts no funding from pharmaceutical or medical device companies.

Learn more at www.NPAlliance.org



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Project Impetus

The U.S. health care is in transition and paths to its improvement are poorly blazed. The battle over the Affordable Care Act has revealed how intensely politicized health care has become. As individuals, we each have a stake in the future of health care. Our nation's organizations and corporations do as well. The National Physicians Alliance is committed to ensuring that physicians' approach to health care transformation remains grounded in the profession's core values while always working to maximize ultimate value for patients and communities.

Approach

This following document, authored by members of the NPA policy committee, synthesizes the robust input the committee received this year from NPA's membership in response to a detailed survey about perceived obstacles to high value health care. The survey also asked about potential solutions. We view the document as a starting point for our discussion. It is by no means a finished action plan. We hope its broad vision resonates with your own values and aims. The document seeks to remind all of us to look through the lens of our principles when considering new directions.

Project Leads

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Values and the National Physicians Alliance

The NPA is a multispecialty professional home for physicians who share a commitment to professional integrity and health justice. The organization works to improve community health and well-being and to ensure equitable, affordable, high quality evidence-based health care for all. NPA members care for—and about—others.

Solutions to America's health care problems will be found not only through computer analysis of big health care data sets, but through the human experiences of those who need care and those who provide it. Woefully, the nation's health care sector has become overly focused on financial considerations, shifting attention away from vital human considerations and professional values.

From its early days, NPA has been committed to the moral integrity of the physician community. The organization has played an important role in describing and working to eliminate professional conflicts of interest with commercial entities. This has contributed to a significant regulatory and cultural shift. Drug marketing no longer includes "gifts" that were, in fact, subtle forms of bribery. Payments to physicians for consulting and lecturing on behalf of pharmaceutical entities are now disclosed: a clear and illuminating first step.

In related work, NPA initiated its "Good Stewardship Project" to encourage physician organizations to identify common practices in their specialty that are of little to no value for patients. This project, vastly expanded under the leadership of the American Board of Internal Medicine Foundation and Consumers Union, is now known as "Choosing Wisely[®]." New attention is being paid to the excessive cost of health care in the U.S. and blunt questions are being asked about rampant waste, overtreatment, and the relative value of taxpayer investments in health care services as compared with alternative investments in education, housing, parks, and other budget lines that contribute to population health.

In past centuries, physicians had a dominant role in making decisions about health care and medical practices. Physician voices are now, appropriately, one set of many; however, they are too frequently represented by unrepresentative voices of profound self-interest. As a public charity and not a trade association, the NPA aims to amplify a knowledgeable, moral voice on behalf of physicians about the directions American health care needs to take—and to do so in harmony with the voices of patients who also seek to secure a more just, caring, and effective health care system.

Improving the Value of Health Care

Health care in America costs twice as much as it does in other advanced nations, many of which have better health outcomes and higher patient satisfaction. Improving the value of health care in America—achieving the triple aim of better population health, better patient experience and lower cost—will require a commitment to these goals across the entire health sector.

The value received per dollar spent is low. Why? Studies demonstrate that up to one-third of health care spending is simply wasted. It could be eliminated without hurting health care. There is no single scapegoat to blame for this waste—not physicians, not drug companies, not insurance companies, not patients. Current structures incentivize this wasteful spending by everyone involved. Patient-focused redesign is needed at every level of the system: in the locations where care occurs, in the transitions across these settings, and in support infrastructures, among others. Such re-engineering is necessary, but not sufficient.

We must move beyond small scale experimentation and re-engineering to bold transformation of how care is organized, financed, and focused. To do so, we need to understand and articulate the core underlying social and economic values, or principles, most likely to lead us to a system that provides the care our patients and communities deserve and that supports the teams committed to providing that care. This conversation—this articulation of the guiding principles of redesign—has been nearly lost in the politicized cacophony of the health care debate. NPA seeks to reshape the discussion.

NPA's Principled Proposals

The NPA board of directors has endorsed the following perspectives and principles, informed by our policy committee and by surveys of NPA's membership.

System Transformations

Problem Statement

The systems that deliver health care to Americans are broken. Prices for health care products and services are too high and often hidden from patients and providers. Delivery is fragmented, especially for people with multiple chronic conditions. Primary care is underdeveloped. Overtreatment is widespread. The dominant fee-for-service payment system rewards intervention at the expense of comprehensive longitudinal care.

Proposals

- ***Lower prices.*** Promote competitive bidding for pharmaceuticals and devices where possible; regulate prices in the public interest when not.
- ***Care coordination.*** Improve care coordination and integration, especially between medical services and social services/mental health.
- ***Complexity.*** Reduce administrative costs and insurance complexity.
- ***Physician income.*** Reduce income disparities between cognitive and procedure-based specialties.

Cultural Transformations

Problem Statement

The culture of health care needs fundamental changes. Physicians have practiced for decades paying little to no attention to the costs of care. The pressure to maximize reimbursement has become more prominent. Production is the mantra. Too often, clinicians have too little time or motivation to adequately understand their patients and to adequately explain proposed treatments. Patients often seek a quick fix regardless of cost.

Proposals

- **Culture of stewardship.** Physicians and other providers need to develop a culture of stewardship of finite resources and these principles need to be built into curricula and board certification.
- **Healing relationships.** Clinicians need more time to understand patients better and to create and maintain healing relationships.
- **Conflicts of interest.** Conflicts of interest must always be disclosed and eliminated where possible. For many physicians, even fee-for-service threatens to be a conflict of interest.
- **Teams.** Providers should practice in health care teams, with each member functioning at the top of his or her license.

Political Components

Problem Statement

American partisan politics has become particularly divisive and nasty over the past few decades. The lack of cooperation across parties will make passage of vitally needed legislation at the national level very difficult in the next few years.

Proposals

- **State innovation.** Encourage states to innovate in delivery reforms and further coverage expansions.
- **Reallocation of scarce resources.** Reallocate funding that becomes available from controlling health care inflation to other sectors of the economy that impact the social determinants of health.
- **Triple aim reporting.** Support adoption of regional, state and national population health goals and per capita cost goals with regular reporting.
- **Penalize corruption.** Enact greater civil and criminal penalties for those in health who defraud the government.

Conclusion

NPA leadership views these twelve proposals as starting points. We expect and will promote ongoing exploration of the values and principles necessary to create a just health care system in place of our current inefficient, inequitable, and expensive health care sector. For the health and well-being of our patients and ourselves, for the well-being of our society and economy, we are committed to applying our values to improve the value of American health care.



~MISSION STATEMENT~

The National Physicians Alliance creates research and education programs that promote health and foster active engagement of physicians with their communities to achieve high quality, affordable health care for all.

The NPA offers a professional home to physicians across medical specialties who share a commitment to professional integrity and health justice.

Believing that the best way to win public trust is to earn it, the organization accepts no funding from pharmaceutical or medical device companies.

The NPA is a 501(c)3 non-profit, non-partisan organization.



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