The Healthwise® Ix® Solution
(Canadian Edition)

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**Executive Summary:**

Health care in Canada faces three enormous challenges:

- A Budget Challenge—in which the rising costs of health care undermine the funding of other domestic programs and places Canada at a disadvantage in the global economy.
- A Quality Challenge—in which people receive about half of the recommended care they need.\(^1\)
- A Workforce Challenge—in which baby boomer care demands will far outstrip the expected supply of Canadian health professionals.

To date, these challenges have been relatively immune to increases in funding, government regulation, and even care management. However, a long-overlooked solution is now increasingly possible. It involves a transformation in the role of the average patient—the only health care resource with enough potential to make a real difference. By engaging people and expanding their skills, and by employing the infrastructure of the Internet, we can significantly reduce costs, improve quality, and increase capacity.

The Ix Solution can help save health care from crisis—it may be the only thing that can.

Healthwise has both a clear vision of that transformation and a set of information products and services to make it happen. We call it the Ix Solution.

The health care system as we know it is complex, expensive, and in danger. The transformation brought about by the Healthwise Ix Solution is based on three simple rules that can save the system:

1. The Self-Care Rule: Help people do as much for themselves as they can.
3. The Veto Rule: Help people say “no” to the care they don’t need.

Healthwise stands ready to work with clinicians, health authorities, and government to implement these rules through three levels of the Ix Solution:

- **Foundation Level:** Products and services that allow patients to self-serve for any information or tool that will help them make better health decisions.
- **Prescription Level:** Products and services that health plans and providers prescribe to each person for every new diagnosis, clinic visit, medical test, or prescribed medication.
- **Engagement Level:** Products and services that engage and motivate people to more actively manage their health and their medical decisions.
This paper examines the challenge, the three rules, and the Healthwise products that promise to return sustainability to the health care system.

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**Canada’s Health Care Challenges**

Health care in Canada is plagued by a series of recognized challenges, all of which have dodged solutions. Each sector of the health care system has its own crisis perspective—but each also recognizes that the pain is system-wide. At stake is the ability to continue providing high quality care to all, within budgets, and without waiting lines. The outlook is daunting.

**Budget Challenge**

*From the government and regional health executive’s perspective, the budget crisis dominates.*

Canada’s health care costs soak up just under 10% of the GDP.\(^2\) Accounting for inflation and population growth, it is twice the amount Canada spent 25 years ago and the trend continues. Relentless increases in the percentage of GDP going to health care will at some point reach an unsustainable level. Some think that point is not far off. This is not a problem that can be solved by relying upon Federal fund transfer.

Policy efforts to stem these increasing costs have thus far failed. Budget constraints, without practice reform, only lead to waiting lines; and clinical guidelines in a system of clinician autonomy have been slow to change practice habits. And, as most providers operate within the fee-for-service environment the incentives are clearly stacked against cost reduction. Yet, more intensive care, in general, has shown no positive impact on the quality of care or health outcomes.\(^3\)

**Quality Challenge**

*For health policy analysts, the quality crisis ranks the highest concern.*

While this remains to be quantified within the Canadian context, a recent RAND report reveals that vulnerable elders, in the U.S., receive about half of the recommended care that medical science says they need for chronic illness.\(^4\) The Institute of Medicine’s many reports have highlighted that more than 50,000 people each year die from medical mistakes in U.S. hospitals alone.\(^5\)

In spite of enormous efforts to develop and promote evidence-based guidelines for care, the majority of clinicians still practice without regard to the guidelines and without any significant monitoring of quality. Just like airplane crashes, the majority of health care’s adverse events are the result of human error, particularly failures in communication, leadership, and decision making.\(^6\) In medicine, human errors are currently inevitable because of a deficiency in system-based safeguards.

In most medical settings, the quality of care is further jeopardized by poor communication among the multiple providers caring for a single patient. The duplication of tests, adverse interactions of incompatible drugs, and inconsistent staging of medical conditions all add to the higher costs while diminishing the quality and outcomes of care.

Where self-management plans are in place, tools are also needed to monitor how well the patient is sticking with the plan and to encourage and support behavioral improvements. By avoiding preventable complications, unneeded care, and medical errors, an informed patient can greatly moderate the rising cost of care—perhaps enough to significantly reduce the urgency of the budget crisis.

**What is needed** is a way to inform all patients of the evidence-based guidelines in ways that are easy to understand and with tools that help them discuss the issues with their doctors.
Other features of the quality crisis include:

- High geographical variations in care.
- The 17-year lag time for new findings to become common practice.
- Overuse of medications, due to inappropriate direct-to-consumer marketing.
- Low health literacy.
- Minimal patient involvement in key decisions.

**What is needed** is a way to inform all patients of the evidence-based guidelines in ways that are easy to understand and with tools that help them discuss the issues with their doctors. Particularly, where the evidence isn’t clear, patients also need an easy way to base decisions about treatment options on their own values and preferences.

**Workforce Challenge**

*For most hospitals and health authorities, the workforce crisis is critical.*

Clearly, the ratio of health professionals to patients will continue to drop as Canadian baby boomers age. Already the nursing shortage in some hospitals has reached alarming levels and is threatening quality. The shortage of primary care doctors is also critical, especially in rural and northern areas of Canada. As a consequence, Canada is importing record numbers of foreign-trained doctors and nurses, creating communication concerns in this country and still greater voids in the home countries of those professionals.

For doctors, the staffing shortage is felt both in their pocketbooks and in the workflow within their clinics. There simply is not enough time to practice medicine the way they were taught to practice. No innovation that improves quality without improving workflow has a chance of implementation.

One estimate states that if a primary care physician were to provide her 2,000-patient panel with direct advice to do the recommended preventive services, it would take 7.4 hours of her working day—every day.⁷

Even in the chronic disease management world, the primary care staffing shortage is becoming a crucial concern. There simply are not enough nurses to staff outbound call centres if the entire chronically ill population were to be eligible to use them.

**What is needed** is a way to support people to do as much for themselves as they possibly can do well. People at all education levels have become their own travel agents, their own bankers, their own grocery checkers and, for some, their own stockbrokers. Anyone—with the right tools—can now edit movies and create Web sites. If millions can learn these skills, they can also learn to participate in their own health care and therefore reduce the burden placed on professionals. Enhanced self-care, enabled with better tools and encouraged through realigned incentives, can greatly resolve the staffing crisis.

**Other Challenges**

Of course budget, quality, and staffing are not the only problems reaching crisis levels in health care. The obesity crisis, the diabetes crisis, and the chronic care crisis play big roles in the problems facing the health care system.

The prevalence of diabetes, obesity, high cholesterol, high blood pressure, depression, and other chronic medical problems is increasing at accelerating rates. Millions of people at all ages are moving less and eating more, and they will soon hit our health care system with tsunami force.

Already, for example, almost 7 million Canadians have two or more chronic conditions.⁸ Each additional co-morbidity adds a dimension of complexity to the care management plan. Drug, dietary, and exercise contradictions are commonplace.

This increasing level of demand will further advance the budget, quality, and staffing crises. And of course, from the perspective of many in Canada, the most tangible crisis is the patient wait-time crisis.

These crises of the North American health care systems are real, significant, and becoming more critical every day. The solution to these crises has been elusive, and the future appears daunting to most. Perhaps the only way out of the quagmire is through a patient-centered transformation of health care and the introduction of the Healthwise Ix Solution.
Three Rules for a Consumer-Based Health Care Transformation

The root cause of the three health care crises can largely be pinned on the impossible complexity of the system. In particular, people with chronic illness must negotiate a thorny maze to get and pay for good care. Within an environment of such complexity, a set of simple rules may be the only remedy for giving control to consumers and for returning sustainability to the system.

Rule #1: Help people do as much for themselves as they can. Give them self-care information.

In the face of the staffing and cost crises, it just doesn’t make sense to use a physician-level resource to do a $15/hour job, particularly when informed and supported patients can do the job just as well—or better—themselves.

With the right information and tools, people can:

- Provide their own self-care in their own homes.
- Prepare for each visit so that the doctor can more quickly assess symptoms and concerns and then give guidance on the right care plan.
- Help doctors have the time to cover more of the critical issues across co-morbidities—and help them be appropriately reimbursed for the added value.

If people can be their own travel agents, stockbrokers, bankers, librarians, and grocery clerks, they can do more with their own health care. If they can edit their own movies and create their own Web sites, they can use a new set of information therapy tools. An informed patient empowered by the Ix Solution can make a huge difference.

Caveat: Not all patients are created equal. Some will require substantial help. Overall, however, helping people to help themselves will greatly reduce costs and will engender greater confidence among patients in their own care.

Rule #2: Help people ask for the care they need. Give them tools to understand the evidence-based guidelines.

Every year the base of good, evidence-based guidelines for clinical conditions becomes richer and more in-depth. Yet far too often these guidelines are ignored. If we want the guidelines to have greater influence, we need to give them to patients too. That way, patients and their doctors can at least discuss the guidelines’ relevance. Pick up any article on health care, and you’re likely to read how important it is for health care consumers to make informed decisions. But people can make informed decisions only when they know the guidelines and understand how well a particular treatment has worked for others.

Of course most guidelines are written in medical terms and with a level of complexity that makes them inaccessible for many consumers. That can change. Rewriting guidelines in plain language and prescribing them to patients when they are directly relevant to their medical situation requires only the will to see it done. Interactive tools and support systems that help each person apply the guidelines to his or her own situation can make a big difference. Once patients know what the guidelines suggest, they can work together with their doctors to decide on the right course of treatment.

There are guidelines, and there are guidelines. In addition to the evidence-based guidelines that apply to professional treatment decisions, people deserve guidelines for self-care and self-management. In fact, self-management guidelines may do more than anything else to beat the health care crises.

Take note: Pay by Objectives, also known as Pay-for-Performance (P4P) initiatives in the U.S. have begun to provide financial incentives for physicians who acknowledge guidelines in their practice. At least one such plan (MedEncentive) goes even further, providing financial incentives to patients to understand the guidelines. It is refreshing and promising to see incentives aligned for both doctors and patients.
Rule #3: Help people say “no” to care they don’t need. Give them a sense of their autonomy.

An enormous amount of unneeded health care spending could be avoided if people were given the confidence and opportunity to decline the tests, drugs, and procedures that add little or no value to their health. Whether or not provincial governments pay for a medical service should depend on the evidence-based information. Whether or not that treatment is provided at all should depend on whether the patient (with the doctor’s advice) decides it is in his or her best interest. Patients have the ultimate autonomy to say “no.”

The Veto Rule promotes doctor-patient collaboration and can make a difference in two important areas:

• Supply-induced demand is a huge factor in driving up the cost of care. Surgeons do a great deal of surgeries because they are very good at doing them, not always because the evidence shows that they will help a particular patient. With good information, people can say “no” to some surgeries when other options are also viable.
• Providers give a great deal of care at the end of life to extend life rather than improve it. With good information, patients and their advocates can regain control of late life health decisions.

For testing, surgery, and end-of-life decision making, value-based decision-support tools can help patients and their families assess the real value of their options.

Implementing Rule #3 with the Healthwise Ix Solution will significantly reduce the budget crisis while improving patient satisfaction.

The Healthwise Ix Solution: Purpose, Vision, and Products

The Healthwise Ix Solution is a comprehensive set of consumer health information products and services that put the three simple rules into action. By implementing these information services and products, payers and providers can begin to transform the health care crises into opportunities for success.

The Purpose

The purpose of the Healthwise Ix Solution is to help people make better health decisions by helping both clinicians and health plans implement the three rules. In doing so, they will help resolve each of today’s health care crises. The goal is to achieve better health, better care, higher satisfaction, and lower health care costs.

The Vision

Once the Ix Solution is mainstream, it will facilitate and integrate active patient involvement into every element of health care. With the Ix Solution, we bring hope to the health care system. We will have accomplished the Ix Solution vision when:

• Every clinic visit is preceded and followed by an Ix—an information prescription.
• Every medical test is preceded and followed by an Ix.
• Every person with a chronic disease is prescribed, encouraged, and supported with a personalized Ix self-management plan.
• Every person is guided through an annual, personalized Ix prevention plan.
• Every surgical decision is made by following decision-quality principles.
• Routine end-of-life care includes value-based decision aids for patients and their loved ones.
• The three simple rules are in place and supported for every patient.

Three Levels of Healthwise Ix Products and Services

Healthwise is implementing its plan for developing the Ix Solution and for bringing it to market. The Healthwise Ix Solution is implemented through three levels of development: Foundation Products and Services, Information Prescription Products and Services, and HealthMastery® Products and Services.
Level I: Foundation Products and Services (Self-Serve)

The Healthwise Ix Solution begins with three foundational products that provide the basic information necessary to support the three rules. With these resources, consumers can look for information to help them provide their own self-care, understand the evidence-based guidelines, and say "no" to care that is not right for them. These Healthwise resources are already deployed and are used nearly 111 million times a year to help people make better health decisions.

- Healthwise Knowledgebase for Canada
- Healthwise Self-Care Guides (Healthwise Handbook for Canada, French/English, Healthwise for Life, La salud en casa)
- Online Spanish Health Guide
- Audio Health Library

One of the Level II goals is to raise expectations. We want people to expect information prescriptions at every stage of the health care process. If people can become more active in their care during routine health care issues, they will be more able and confident when more serious conditions come their way. In other words, as the stakes get higher, the three simple rules gain importance.

Organizations can now deliver specific information prescriptions to help people provide their own self-care, understand the evidence-based guidelines, and say “no” to care that is not right for them. Information prescription products include:

- Ix Patient Instructions (with Knowledgebase links) for every visit.
- Ix Core Prescriptions for every diagnosis, test, and drug.
- Care Support Pages.

Level II: Information Prescription Products and Services (Prescribe)

The second set of products completed within the Healthwise Ix Solution is the start of something big—a higher level of consumer engagement. Whereas the foundation level of the Healthwise Ix Solution supports consumers’ search for information, this second level is the prescription of relevant information at just the right time. With Ix prescriptions, organizations can touch every individual with relevant information at every moment in care.

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Level III: HealthMastery Products and Services (Engage)

While it is important to provide some help for everyone no matter what the health problem, the greatest payoff from the Healthwise Ix Solution will come from helping people better manage serious health conditions and major medical events. Level III engagements can help turn around the crises of cost, quality, and staffing. Level III of the Ix Solution includes Ix HealthMastery Campaigns, Ix Conversations, and a Late-Life Care project for families, among others.
Ix HealthMastery Campaigns—ongoing, online self-management programs for people with complex, high-priority health issues.

Ix Conversations—engaging, interactive online conversations that help people self-manage important health issues.

Late-Life Care Project—online conversations to support families during the most critical points in an elder’s progression from independence to interdependence to dependence (this project is in planning).

**Conclusion: A Transformational Innovation**

The Healthwise Ix Solution can become the transformational innovation needed to rescue health care from crisis. By helping consumers follow the three basic rules around self-care, evidence-based care, and value-based decisions, Healthwise can bring hope to the troubled health care system and the people that it strives to serve.

Once the vision of the Ix Solution is achieved, the resulting transformation in the role of the patient will be great enough to significantly repair our currently irresolvable crises:

- **Budget Crisis**—The combination of prevention plans, facilitated self-care, self-management, value-based decision making, and rational care in late life will slow, or even stop, the rise in health care costs allowing governments to meet evolving needs with no or significantly lower tax increases.

- **Quality Crisis**—When patients and their doctors are given the evidence-based guidelines for quality care and are advised how to watch for medical errors, doctors will rapidly adopt improved systems of care that achieve high-quality goals. Aligned doctor and patient incentives in pay-for-performance will mean better outcomes.

- **Workforce Crisis**—As each person, through the use of Healthwise Ix Solution tools, learns to do more for himself or herself, one more health care provider is added to the manpower pool. With less volume-related stress and increased job satisfaction, health worker retention will be greater and the number of high-quality candidates will rise.

The system is in crisis. A transformation in the role of the patient can save it. Through the Healthwise Ix Solution, every province, health authority, and clinic can help to make that happen.
Notes


