PATIENT, HEAL THYSELF

real world futures breakfast
QUT, Brisbane
Patient, Heal Thyself
We are wearing the tools that help us collect more information than ever about our health and activity. Where is this technology taking us? How will it disrupt the traditional role of the GP? And how will it improve the affordability of the health system?

Join our panel of industry and academic experts for a Real World Conversation on **Wednesday 13 July** where we will consider these issues and more.

**SPEAKERS**

Dr Shaun Larkin, Managing Director, The Hospital Contribution Fund of Australia (HCF). HCF is Australia’s largest not for profit health insurer covering more than 1.5 million Australians.
We are wearing the tools that help us collect more information than ever about our health and activity.
resources, desire
and willingness to
take on risk to
try new things

opinion leaders:
selective about
technologies they
adopt

willing to embrace:
look to understand
how it fits with
their lives

adopts with
skepticism: most of
the uncertainty
must be resolved

last to adopt
with aversion to
change

*diffusion of innovations by Rogers

innovators

early adopters

early majority

late majority

laggards

development

introduction

growth

maturity

decline

Shaun Larkin  |  13 July 2016  |  4
PATIENT, HEAL THYSELF
“ISSUES”

➢ We are wearing the tools that help us collect more information than ever about our health and activity.
PATIENT, HEAL THYSELF
“ISSUES”

- We are wearing the tools that help us collect more information than ever about our health and activity.

- Where is the technology taking us?
Where do we want the technology to take us?

<table>
<thead>
<tr>
<th>Element of Change</th>
<th>Today</th>
<th>Future</th>
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</thead>
<tbody>
<tr>
<td>Health care focus</td>
<td>Sick care</td>
<td>Wellness and prevention</td>
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<tr>
<td>Care management</td>
<td>Manage utilisation and cost (within a care setting)</td>
<td>Managing on-going health (and optimising care episodes)</td>
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<tr>
<td>Delivery models</td>
<td>Fragmented / silos</td>
<td>Care continuum and coordination</td>
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<td>Care setting</td>
<td>In-office / hospital / face-to-face</td>
<td>(Right care; right place; right time)</td>
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<td>Quality measures</td>
<td>Process focussed; Individual</td>
<td>Home / e-health / m-health</td>
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<tr>
<td>Reimbursement</td>
<td>Do more, make more</td>
<td>Outcomes focused; population based</td>
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<tr>
<td>Financial incentives</td>
<td>Margin per service, procedure, etc</td>
<td>Perform better, make more</td>
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<tr>
<td>Financial performance</td>
<td>Fee-for-service</td>
<td>Margin per life</td>
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</tbody>
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Ref: “Opportunities for Health Plan – Provider Collaboration” – Accenture – October, 2011
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“ISSUES”

- We are wearing the tools that help us collect more information than ever about our health and activity.

- Where is the technology taking us?

- How will it disrupt the role of the GP?
The diagram illustrates the priority levels of various aspects of health care consumer experience based on interaction rankings.

- **1st Priority**: Personalization Expected via Providers
- **2nd Priority**: Economically Rational Coverage & Care Choices
- **3rd Priority**: Convenience Driven Use of Care
- **4th Priority**: Digitally Connected to Manage Health Care

**Expected Average Score**: 1.6

**Source**: “2016 Health Care Consumer Experience Survey” (DeloitteNote: Only every third point from Interaction Ranking #22 onwards is shown).
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Where is the technology taking us?

How will it disrupt the role of the GP?

will it improve the affordability of the health system?

Where do we want the technology to take us?
Thank you

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