

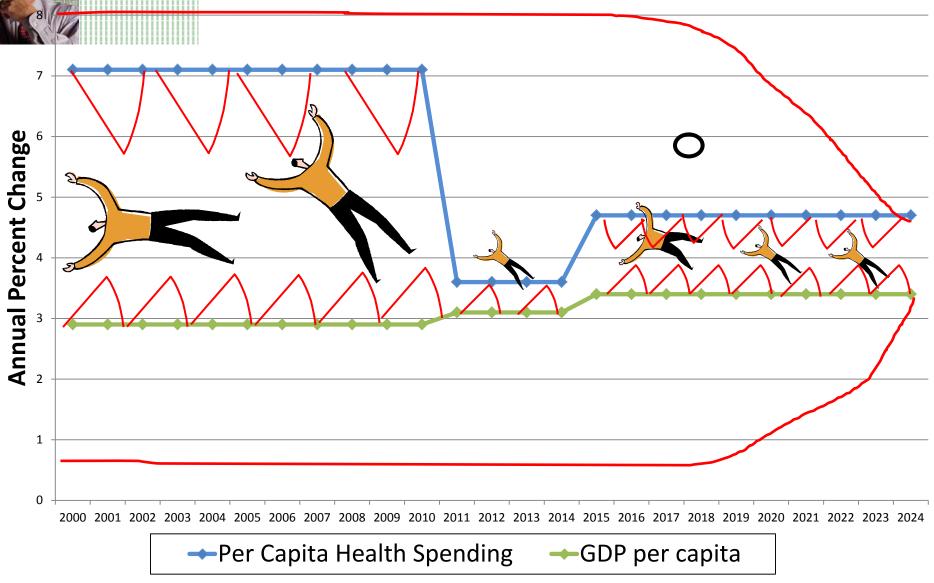
Eradicating an Economic Tapeworm

May 3, 2016



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Annual Percent Changes in U.S. Health Care Expenditures and in GDP (Dental Work by Dr. Milstein)



Data from: Kaiser Family Foundation analysis of Medicare spending data from Boards of Trustees; private health insurance spending data from the CMS National Health Expenditure data; GDP data from BEA (historical) and CBO (projected), and CPI data from the BLS (historical) and CBO (projected).

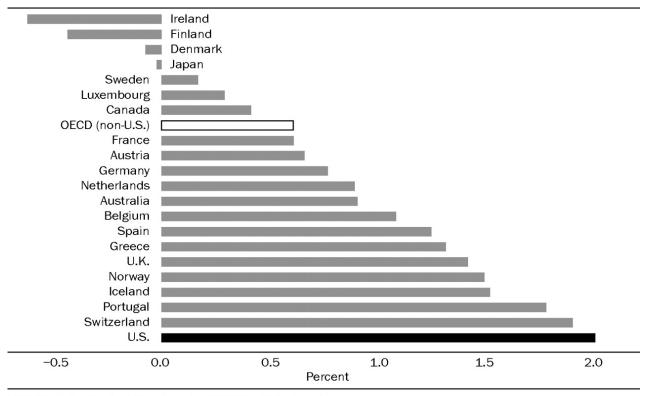


The Tapeworm is a Global Threat

Annual Excess Growth In Health Spending Per Capita, 1985–2002.

EXHIBIT 4

Annual Excess Growth In Health Spending Per Capita, United States And Other Organization For Economic Cooperation And Development (OECD) Countries, 1985–2002



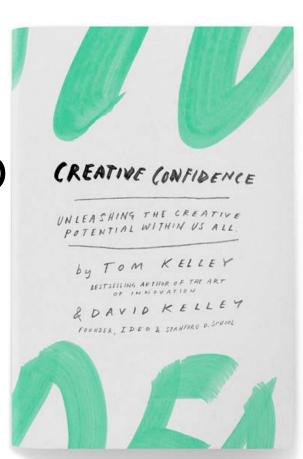
SOURCE: Author's calculations based on OECD Health Data, various years.

NOTE: "OECD (non-U.S.)" excudes the following countries because of missing data: Czech Republic, Hungary, Italy, Korea, Mexico, New Zealand, Poland, Slovak Republic, and Turkey.

Chapin White Health Aff 2007;26:154-161



- Old (Methodical review of evidence)
- New (Automated assessment, decision and workflow support)
- Borrowed (Positive outlier research)
- Blue (Human-centered design)



Use of Old, New, Borrowed & Blue To Improve Value of Stroke Care

Avoid vascular risk by economically maximizing protective Rx use

Convert hospital care of transient ischemic attack and mild stroke to care in safe alternative settings for most patients

Transform tPA use and post-hospital care







~11% estimated net reduction in direct healthcare spending on stroke and heart attack (and large reduction in strokes & disabling strokes)

Kalanithi L, Tai W, Conley J, Platchek T, Zulman D, Milstein A. Better Health, Less Spending: Delivery Innovation for Ischemic Cerebrovascular Disease. *Stroke.* 2014 Oct;45(10):3105-11.

US Strategy to Pursue More Health with Less Public and Private Spending

