

SUMMARY REPORT

Future gazing:

Healthcare in 2021 and beyond

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Executive Summary

The Economist Events held a roundtable sponsored by InterSystems on Future gazing: healthcare in 2021 and beyond to explore the impact covid-19 has had on the healthcare sector. The pandemic has unleashed an unprecedented wave of digital change, transforming the landscape for patients and practitioners alike.

The roundtable was moderated by Elizabeth Sukkar, managing editor and global healthcare editorial lead, Thought Leadership, The Economist Intelligence Unit. Participants included Don Woodlock, vice-president of healthcare solutions, InterSystems; Mobasher Butt, global vice-president (medical) and managing director (Asia Pacific), Babylon; Kristen Ficery, managing director, consulting and health lead, North America, Accenture; and Prat Vemana, chief digital officer, Kaiser Permanente.

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The home becomes the hospital:

Covid-19 has made healthcare more patient- and physician-centric. Kristen Ficery estimated that today 80% of Americans are afraid to visit the hospital. This has forced a total system reconfiguration that will outlive the pandemic. Virtual is here to stay, with Accenture estimating long-term penetration rates at 35% (up from 10% pre-pandemic). Prat Vemana urged the sector to build on this momentum. So far, he said, remote engagement has predominantly been leveraged for post-visit engagements. There is however enormous—and as yet untapped—potential to flip this workflow and improve patient outcomes in preventative care. A critical mass of data will show exactly which kinds of healthcare remote treatment is most effective for. Data will also be hugely consequential in giving practitioners a holistic understanding of their patients via interactions that fall outside the traditional clinical purview.

Healthcare versus other sectors:

There is a need to design user-friendly end-to-end experiences, as e-health still feels clunky. Healthcare has a lot to learn from other industries when it comes to taking the best elements of an information-driven, seamless consumer experience. What a person enjoys as a digital consumer will be what they come to expect as an online patient. In addition to cross-sector comparisons, the panellists pointed to groundbreaking cross-sector collaborations. Don Woodlock gave a nod to the National Health Service in the United Kingdom and its “Coordinate My Care” initiative. Kristen Ficery pointed to how Geek Squad, a subsidiary of Best Buy, repurposed its 20,000 agents to set up medical equipment.

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Inequity and the digital divide:

Technology has the potential to broaden access to exceptional healthcare experiences to people beyond the wealthiest patients. Mobasher Butt pointed out that artificial intelligence enables this to happen at a fraction of the previous cost. However, it takes purposeful product design to ensure that digital services do not exacerbate pre-existing socioeconomic gaps. Nevertheless, fearmongering rhetoric should not be allowed to slow innovation. Kristin Ficery observed that in the context of a global pandemic, healthcare has become everyone's business. The pandemic has also shone a light on structural inequalities and their impact on healthcare outcomes. Don Woodlock seized on this to emphasise that facts and figures are today being used to direct resources accurately where they are most needed.

Twenty-first century patients:

There was consensus that today's plugged-in society, smart technologies in hand, is more primed than ever for the shift to online health. Mobasher Butt has seen first-hand how Babylon's patient profile has evolved over the years. He pointed to the importance of patient participation groups to get the less tech-savvy up to speed. A study cited by Kristen Ficery shows that the American public thinks the hybrid service provision they've experienced during the pandemic is on a par with, if not better than, what they accessed before. There's clearly no going back: we're witnessing the most profound change in patient behaviour in our lifetimes.

Reimbursement pathways:

In a capitation model telehealth is still not always reimbursed. However, the improved accessibility and affordability resulting from its widespread use during the pandemic have led to impressive downstream savings in secondary care costs. This kind of data speaks for itself and will hopefully pave the way for better reimbursement models. Kristin Ficery highlighted the need to make sure that the temporary removal of barriers that has allowed for the expansion of telehealth survives the end of the pandemic.

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Data—today and tomorrow:

Don Woodlock emphasised that the industry is still in the early days of making data useful at the population level. The ability to connect the dots and have data equip us with real-time intelligence is by far its biggest potential, agreed Prat Vemana. For now, though, interoperability across different health systems remains a huge hurdle that requires urgent investment. There was consensus that scale will help ease the privacy concerns of patients, because they will be able to see first-hand the contribution of data towards a greater cause. The issue then becomes that of data generated 24 hours a day, 365 days a year: which of those data points actually matter? According to Kristen Ficery, Accenture estimates that by 2025, 80% of clients across industries will be on the cloud (today we’re at a quarter of that), and concerns about data security are making this shift a priority for CIOs.

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Workforce 2.0:

Medical records today boast data points that previously never existed. This makes it imperative to update curriculums and general-practitioner skill sets. Attempts to do so in the UK include the Topol Review in 2019. The panel noted that software needs to work for clinicians, and not vice versa. We must also train healthcare professionals to work with technology and data and analytics, rather than to fear being replaced by it. There have long been concerns around the decline of brick-and-mortar GPs driven by economics. But GPs will continue to play an important role, because ultimately the human touch is key. The predominant healthcare model will therefore indisputably be hybrid. Kristin Ficery cited the Mayo Clinic’s work in Florida on vaccine sites as an example.

The panel concluded on an optimistic note. There is palpable excitement around the far-reaching and momentous real-time shifts we’re witnessing. The imperative now is to enshrine e-health as a cornerstone of the post-corona healthcare paradigm, in a way that is friendly to the bottom line and remains patient-centric and inclusive.

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