

Healthcare Transformation

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Key components enabling transformation to an evidence-centric ecosystem



Healthcare T@aAstoriBatiGnrporation



Outcome based payment incentives lead to improved outcomes and demand for evidence at point of care. This requires large scale evidence generation and comparative effectiveness clouds.





EVIDENCE USE



IBM/AHM Collaborative Care Solution





Evidence Use: Enhancements to IBM/AHM Collaborative Care Solution



- Announced jointly with $\underline{\text{AHM}}$ (development partner) and $\underline{\text{SCMG}}$ (customer) on August 5th, 2010



Evidence-Based Patient-Centered Care (ePC3)

The solution provides evidence-based patient-centered collaborative care to improve the care quality while reducing the cost, with a focus on **chronic disease management** enabled by

§integrated health information

(Longitudinal Health Record for Health Risk Assessment)

§best medical evidences

(Clinical Guideline/Pathway) and

§ better patient interactions

(Mobile-enabled Patient Monitoring and Communication).





Taiwan Collaboratory: A Cloud-Enabled Personalized Wellness Ecosystem





EVIDENCE GENERATION



Evidence Generation: Smart Analytics System for Comparative Effectiveness



10 Key Research assets: AALIM (Almaden), Euresist/Hypergenes (Haifa), CC Analytics (Watson) Corporation



Single View of Disease - Healthcare Information Warehouse for Analytics and Sharing (HIWAS)





EUResist: HAART Therapy Prediction





IBM Research	Login	Select I	Patients	Overview	Longitudinal	Contextual	Logout	
		ARN:	03940-000-	3940-000-07-00001 A fictitious patient			-	
		Name:	KEITH CHAN					
		Gender:	M					
		Age:	89					
	Conditions	based on:	✓ OSCR	🗌 EKG 🔲 TI	EXT 🗌 ECHO			
		Key:	applies to	patient does	not apply to patient			
		Com	mon Conditions			Common	Common Drugs	
	[90%] 401.9 Unspecified (Essential hypertension)						angiotensin	
	[90%] 427.31	31 Atrial fibrillation (Cardiac dysrhythmias:Atrial fibrillation and flutter)			[95%]	converting en: inhibitors	
		80%] 424.0	Mitral valve dis endocardium)	orders (Other disea	ases of	[95%]	cardioselectiv blockers	
		80%] 424.1	Aortic valve dis endocardium)	o <mark>rders (</mark> Other dise	ases of	[90%]	first generatio cephalosporin	
	[70%] 394.0	Mitral stenosis	(Diseases of mitra	il valve)	[85%]	loop diuretics	
		65%] 428.0	Congestive hea failure)	art failure, unspecif	ied (Heart	[85%]	coumarins an indandiones	
		45%] 443.9	Peripheral vaso (Other peripher	cular disease, unsp ral vascular disease	ecified	[80%]	adrenergic bronchodilator	
	[41		Venous (peripheral) insufficiency, unspecified (Other disorders of circulatory system:Other specified disorders of circulatory system)			[80%]	glucocorticoid	
		40%] 459.81				[80%]	H2 antagonist	
						[75%]	macrolides	
	[4		Heart disease.	unspecified (III-def	ined	[75%]	aminopenicilli	
		0%] 429.9	descriptions and complications of heart			[75%]	nasal steroids	
		35%] 424.2	disease) Tricuspid valve nonrheumatic	disorders, specifie (Other diseases of	d as	[70%]	nonsteroidal anti-inflammat agents	
			endocardium)			[70%]	quinolones	
	[35%	35%] 427.9	Cardiac dysrhythmia, unspecified (Cardiac			[65%]	narcotic analg	
	[3	5%] 424.9	dysrhythmias) Endocarditis, valve unspecified, unspecified cause (Other diseases of endocardium:Endocarditis, valve unspecified)			[65%]	inotropic ager	
						[65%]	phenothiazine antiemetics	
						[65%]	Statins	
	[35%] 428.1	Left heart failur	re (Heart <mark>f</mark> ailure)		[60%]	topical steroid	© 2010 IBM Corporation
r		0.00/1 405 0	Unspecified tra	ansient cerebral isc	hemia generation generation and generation and generation and generation and generation and generation and gene	1000(1	miscellaneous	



PAYMENT POLICY AND SIMULATION









Simulation Overview

- **§** A simulation based approach that combines disease modeling with economic and behavioral modeling to predict health outcomes and medical expenses.
- § Flexible framework allows users to 'plug-in' and leverage a library of specialized analytic models.





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oEvidence Generation Team

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oPayment & Simulation Team

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