

Realizing IT's Promise to Improve Health Care

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Today's Agenda



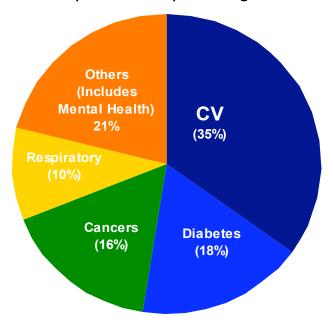
- Problems, Challenges, and Issues
- McKesson's Chronic Disease Management Solution
- CDM Care Challenges
- McKesson's CDM Outcomes

\$80B of Canadian healthcare costs; forecasted to double by 2016

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What are Chronic Diseases?

- Mostly incurable with prolonged clinical course
- Contributing factors include genetics, environment & lifestyle
- Often have long asymptomatic periods where disease is undiagnosed
- Often can be successfully managed with a combination of pharmaceutical therapies & lifestyle changes

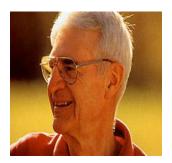


The Cost of Chronic Diseases

- 77% of men and 85% of women
 65 years of age experience at least one chronic condition
- In Canada, Chronic Disease Care accounts for:
 - ▶ 67% of direct health care costs
 - ▶ 60% of indirect costs
 - ▶ 87% of disability
 - ▶ 50% of Emergency Department visits
 - 1 or more inpatient admissions &
 5 or more other health care interventions annually

Overview of McKesson's CDM Solution

Patient Centric Program



- Patient Empowerment
- Self Help/Care Focus
- Easy 24/7 Access
- Co-morbidities approach

Community Involvement



- Support Groups & Services
- Service Advisory Committee
- Stakeholder Outreach
- Easy Access to Website

Health Care Provider Friendly



- Effective & Ongoing Communication
- Comprehensive Reporting
- Patient & Professional Portals

More Efficient Healthcare Spend

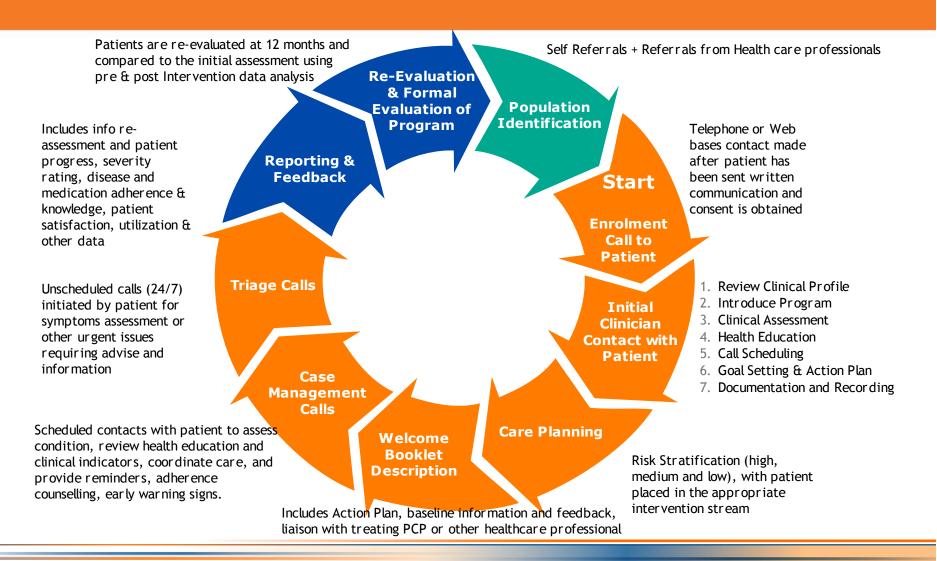


- Proven outcomes, lower cost
- Increased patient throughput
- Future cost avoidance
- Extensive patient & outcomes data

"Planning, counseling & follow up care do not require the expertise & skills of physicians and can be done by others" – OMA, 2009

McKesson Canada's Typical CDM Service

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Fundamental Challenge: Paradigm Shift

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Traditional

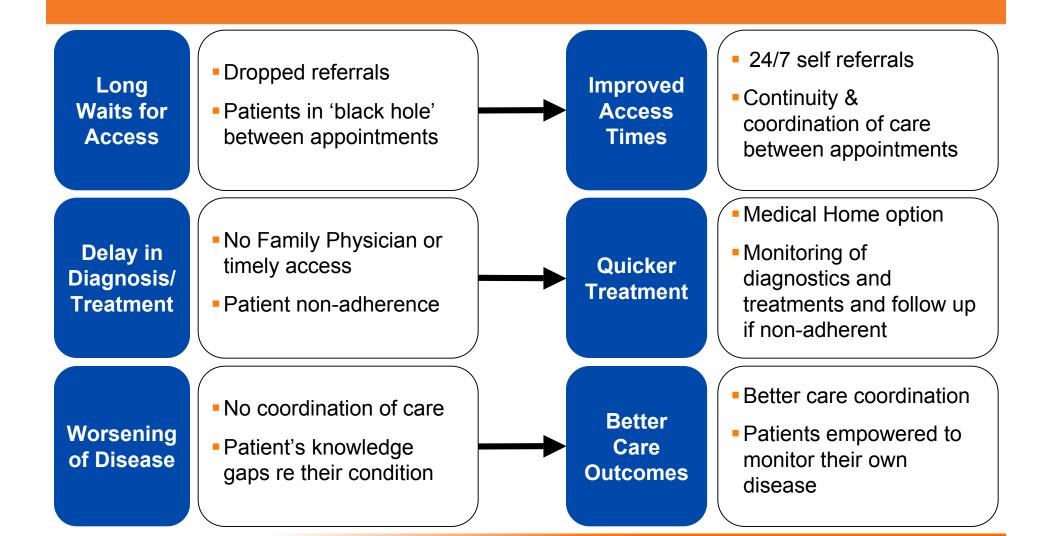
- Provider Focused
- Illness Focused
- Institutional Based
- Episodic Care
- Patient Compliance
- Provider Decisions

CDM–Focused Model

- Patient & Family Focused
- Wellness & Coping Strategies
- Community & Home-Based Care
- Continuum of Care
- Self Management Coaching Focused
- Multi-disciplinary, evidence-based decisions with patient as part of the team

Challenges re Quality Chronic Disease Care

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Patient Care: Before and After Implementation of CDM (cont'd)

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Care not Meeting Clinical Standards

- Inconsistency in care delivery
- Few metrics or standards

Better
Adherence
to Clinical
Standards

- Clinical guidelines for single & co-morbid chronic conditions
- Consistent standards in care delivery

Rising Healthcare Costs

- Costly interventions most often used
- Short-term treatment instead of long-term prevention

Contained Healthcare Costs

- More clinically appropriate & lower cost interventions
- Predictive modeling to drive prevention

Inefficient
Use of
Human
Resources

- Physician-centric system
- Face-to-face visits drive most care activity

Better Use of Human Resources

- Lower-cost, multidisciplinary care team
- Telephone-based service reduces face-toface interventions

Outcomes Achieved by McKesson's US Diabetes CDM Programs

Utilization Outcomes	Patient Satisfaction Outcomes
 Up to 24% decrease in inpatient hospitalizations Up to 45% decrease in ED visits Up to 16% decrease in outpatient facility visits Average \$1,300 net savings per person per year ROI of up to \$4.34 : 1 	 Overall satisfaction with program: 93% Nurses' understanding of symptoms & concerns: 95% Education & support provided by McKesson nurses: 93% Comfort level speaking with the nurses: 94% Recommend the program to a friend: 95%
Clinical Outcomes	Primary Care Provider Satisfaction Outcomes
 51% increase in ASA therapy 240% increase in those with lipid lowering prescriptions 45% increase in HA1C Tests 53% decrease in symptoms of hypoglycemia 	 Overall satisfaction with program: 86% Refer other patients: 89% Satisfied with the clarity & completeness of information provided: 90% Believe program improves patient compliance with best practice recommendations: 94% Believe program helps patients communicate with health care professionals about symptoms & concerns:

Sources: "Diabetes Disease Management in a Community-Based Setting" Managed Care 2002, Medimedia USA, 2001; Washington Department of Health

McKesson Canada's CDM Best Practices Applied to Mental Health

Outcomes

- Enhanced & more timely access to 24/7 mental health services, particularly for rural & culturally diverse populations
- Standardized approach to assessment & referral
- •Improved clinical outcomes (both symptomatic and functional)/improved compliance with drugs & treatment plans
- Patient satisfaction over 90%
- •Significant decrease in psychological distress & improved well being
- •Improved support for Patient's PCP and/or Psychiatrist
- •Effective integration with other community-based health care providers
- More efficient use of available mental health care resources

- Mental Health Assessment/Triage
- Crisis Intervention & Response Coordination
- 24/7 Support Line (Patient & Families)
- Relapse Prevention
- Post Hospitalization Discharge Support
- Counselling
- Case Management
- Addictions Helpline (Smoking, Gambling)
- Behavioural Modification (Addictions)



McKesson's Mental Health CDM delivered value to the Australian health system



"More accurate and complete data on patients & service demand; standardization of assessment and referral processes; better quality assurance mechanisms; and established performance criteria are some of the benefits..."

 Auditor General's Report on McKesson's Mental Health CDM program in New South Wales, Australia

Questions/Comments Next Steps

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Thank You!



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