

## OUR OPTIMAL HEALTH

*“affordable & sustainable health care for all people in Franklin County”*

### Executive Summary January 2007

#### **Purpose:**

OUR OPTIMAL HEALTH (Project) is addressing the need for new approaches to the provision of health care in Franklin County. The Project is fostering a community dialogue that will identify innovations to assure the delivery of affordable and accessible health care to its community.

#### **Need:**

Over 134,000 people lack health insurance in Franklin County (12.3% of total population). An estimated 50% of the uninsured in Franklin County or 67,000 people live in households with annual incomes of less than \$40,000 for a family of four. Those who lack insurance are more likely to receive care late or not at all and, as a result; medical conditions often become worse, requiring more intensive and costly interventions. More importantly, those who are uninsured and therefore unlikely to seek prompt medical treatment when they do become ill or develop chronic conditions face substantially increased odds of a poor prognosis. The cost of providing healthcare is significant in that small businesses often find that insurance coverage for their employees is either unaffordable or simply unavailable. On the other hand, large employers that do provide health insurance to their workers are bearing much of the costs of treating the uninsured, which are “shifted” to them through steeply rising premiums. In turn, employers must then pass along at least some of these costs to their employees, whose standards of living are then reduced due to increased insurance premiums and higher out-of-pocket expenses.

The lack of a coordinated and connected health care “system” contributes to total expenditures increasing at a rate 2 ½ times the rate of inflation, and health premiums 3X more expensive over 10 years. Using available statistics (Franklin County population of 1,088,971 in 2004; per capita healthcare spending in 2004 of \$5,939 per person based on U.S. population of 319.88 million in 2004 and National Healthcare spending of 1.9 trillion in 2004), an estimated **\$6,467,398,769** is spent annually on health care services in Franklin County .

#### **Background**

The Project is a complex and multi-layered effort. It was established following a series of events that generated discussions among community leaders about the possibility of exploring whether the people of Franklin County might be able to create a new response to a potentially impending health care implosion. It began in March 2005 when several local leaders participated in a three and a half-day meeting around the “Art of Hosting Meaningful Conversations”. At this meeting the core question emerged that asked “How can we create Affordable and Sustainable Health Care for all in our community – in Franklin County?”

#### **The challenge:**

- We have no health care “system”
- What we do have is not sustainable
- Every party feels like a victim
- No one feels empowered to act (on changing the whole)

In August 2005, community leaders invited Generon Consulting to “assess our community’s readiness for change to create the conditions necessary to envision and realize health care for all people in Franklin County that is affordable for individuals and sustainable for our community.”

Generon, an international consulting company and focused on solving complex world problems, spoke in depth with 58 people with differing perspectives on health care in Franklin County: leaders of hospitals, foundations, large and small businesses, and community organizations as well as politicians, public servants, physicians, and patients.

These interviews yielded four potential strategies for advancing health care in this community:

1. *Safety Net Plus*- To coordinate, strengthen and extend the existing safety-net
2. *Negotiating Table*-A place to make deals to rationalize competition
3. *Institute for Innovators*- To increase individual capacity for innovation
4. *Next Generation Lab*- To co-create systemic innovations

The first two options focus on incremental change while the remaining two seek fundamental shift. This gave rise to the option of either seeking a path leading to new emergence or a path leading to more of the emergency.

**The emerging challenge:**

“To create fundamental shift-while supporting incremental change”

Following the presentation of the feasibility study, we hosted a series of structured conversations called “community assemblies” with the assistance of the InterChange consulting group. The purpose of the assemblies has been to allow for a wide-ranging cross section of the community to engage in a conversational inquiry. Using a mix of participatory methods these stakeholders have been invited to 1) Share diverse perspectives to understand differing needs, see the wider picture and find the best possible solutions together; and, 2) Engage in a co-creative process that is based on “real business issues” and builds on what has gone before so that together the community develops ownership, commitment and transparent decision making.

The Core Hosting Group has invited key stakeholder groups to explore fundamental issues in a series of “assemblies”. Three assemblies have been hosted to date. Each assembly has analyzed input collected from each round of discussion to identify issues requiring further inquiry. This approach will provide insight into the areas where fundamental paradigm shifts are needed. The process is on-going and will require both Project staff and outside evaluators to both interpret and disseminate information gathered.

Six Assemblies have been hosted to date:

**Assembly 1: “Agreeing on the Readiness for Change/Clarity of the project’s purpose”**

**Assembly 2: “How do we organize ourselves to achieve the project’s purpose?”**

**Assembly 3: “Creating the common ground as a foundation for our future health care system”**

**Assembly 4: “Gain clarity around the common purpose of our health care system”**

**Assembly 5: “Identifying areas of innovation to work on together”**

**Assembly 6: “Advancing the four priority questions identified by the community”**

<p><b>Through the assembly process, the community created the following purpose statement for its health care system:</b></p> <p>The purpose of the health care system is to provide affordable &amp; sustainable health care that supports optimal health &amp; wellness for everyone in our community.</p>
<p><b>Through the assembly process, the community identified the following four questions to explore together:</b></p> <ul style="list-style-type: none"><li><input checked="" type="checkbox"/> What could/should be the specific actions and features of a system based on wellness rather than illness?</li><li><input checked="" type="checkbox"/> How can we motivate people to take personal responsibility for improving their health status?</li><li><input checked="" type="checkbox"/> What are the Social Contracts required for Affordable and Sustainable Health Care?</li><li><input checked="" type="checkbox"/> What are the potential revenue streams available for Affordable &amp; Sustainable Health Care?</li></ul>

The Core Hosting Group (steering committee) is organizing its resources to support three areas of emerging work:

- Hosting future community assemblies to support self-organizing teams working on fundamentally changing the health care system;
- Hosting future training sessions to build new capacity in our community for solving fundamental problems;
- Hosting expanded outreach to individuals/organizations (locally and nationally) to advance the movement and help in linking innovation activities.

The Project recognizes that the complexities involved require new approaches to problem-solving. Successful transformative change on an issue as complex as the delivery of health care will not be achieved in top down traditional approaches but instead may be achieved through purposeful conversations with ever-expanding communities of interest.

The Project is administered by Access HealthColumbus, a non-profit 501(c)(3) organization.