Dear friends of ICHOM,

We have great news to share. As the ICHOM team reflect on a busy and productive summer, we are looking forward to a great—and momentous—fall. In what will truly be a milestone in health care, by mid-November, each of the four Working Groups will have defined an ICHOM standard set of outcomes, as well as corresponding risk-adjusters, for the medical condition on which they have worked for the past months. These condition-specific outcome Sets are ready for use by anyone who is caring for patients suffering from cataracts, coronary artery disease, low-back pain, or prostate cancer. The Sets will be implemented globally and will enable patients and providers to come together to focus on the results that matter most to them. Ultimately, by measuring the ICHOM outcome Sets, caregivers around the world will generate the meaningful data that will help them improve performance among physicians and other clinicians, drive quality-focused reimbursement among payers, and, most importantly, improve outcomes for patients.

We are thankful for the dedication and expertise of our Working Groups and are eager to showcase the fruits of their labors at our annual conference in November.

On the eve of the debut of our Standard Sets, we believe it is appropriate not only to highlight our Working Groups, but also our sponsors, without whom our work would be impossible. To this end, we reached out to the leaders of four of our sponsoring organizations and asked them to explain why they support ICHOM’s vision—and why others in their sector should, too. We are grateful for the thoughtful responses we received, and we hope you will take a moment to read the perspectives they offered:

• Paul Villanti – Movember – Page 2
• Tom Feeley – MD Anderson Cancer Center – Page 3
• Steve Schutzer – Connecticut Joint Replacement Institute – Page 4
• Michael Sherman – Harvard Pilgrim Health Care – Page 5

We at ICHOM are thrilled to see how many individuals and organizations are currently engaging themselves in measuring medical outcomes. Their dedication to outcomes measurement adds nothing short of a new perspective to healthcare, a systematic focus, based on comparable data, on the results that matter most to patients. We hope that the following testimonials will help show the universality of this perspective across the health care spectrum. We are proud and deeply appreciative of your support for ICHOM’s work and vision of improving health care by introducing a new measure for success: the well-being of the patient.

Best regards,

Jens Deerberg-Wittram

WE ARE PROUD AND DEEPLY APPRECIATIVE OF YOUR SUPPORT FOR ICHOM’S WORK AND VISION OF IMPROVING HEALTH CARE BY INTRODUCING A NEW MEASURE FOR SUCCESS: THE WELL-BEING OF THE PATIENT.
Movember is a global men’s health charity, currently operating in 21 countries. As one of the leading non-government funders of prostate cancer research, we challenge ourselves to invest in programs that have the potential to improve health outcomes for all men in the countries we serve.

For men diagnosed and living with prostate cancer, the result that we seek is to improve their physical and mental health outcomes. In order to assess the current lived experience of men and their families, Movember has made significant investments in national prostate cancer clinical registries. We do so for many reasons. First and foremost, these registries are providing health outcomes data at a population level—for the first time—for men diagnosed and living with prostate cancer. While in most countries incidence and mortality data are readily available, population-based data on lived experience tends to be absent. They are also supporting a powerful clinical practice improvement platform for clinicians by linking treatment data, patient data and patient-reported outcome data, and providing risk-adjusted outcomes data. All of this helps to catalyse health-outcomes improvement research.

Movember was impressed by ICHOM’s ambition to bring together leaders across the globe to define a minimum outcome set for prostate cancer, a crucial component of all prostate cancer clinical registries. By applying the results of the ICHOM initiative across all our clinical registry investments, we can begin to understand and compare health outcomes not only within a country but between countries. ICHOM’s focus on health outcomes as a key driver for improving the lives of men living with prostate cancer is not only aligned with Movember’s vision; it should serve as a common goal for all stakeholders committed to improving the lives of men living with the disease. Powerful collaborative partnerships across the sector focused on health outcomes represents the most effective pathway to improving the lives of men we serve.
The University of Texas MD Anderson Cancer Center has been a supporter of ICHOM since ICHOM’s creation in 2012. Before then, we had a work team devoted to measuring the outcomes of our institution’s cancer care based on our work with Professor Michael Porter. As we did this work we learned that outcome measures for cancer care were poorly developed. Most of the measures available for cancer care were process measures that had minimal evidence of improved outcomes. We also learned that most cancer measures were not very focused on patient-centered issues, but rather on provider issues.

When ICHOM came on the scene it had a broad vision and set out to challenge current metric-development processes, which in cancer have been focused on the processes of care and not on outcomes that are important to patients. We signed on as early partners in the effort. We initially worked with the ICHOM team to identify gaps in cancer registries and have been engaged with them in the outcome-metric development process for cancer conditions. MD Anderson faculty have worked with the ICHOM team to develop an international approach to prostate cancer metrics.

ICHOM’s work has been particularly relevant to us since a major focus of their metric development has been patient-reported outcome measures (PROMs). What the patient feels about clinical outcomes has long been minimized in health care. ICHOM’s metric-development process carefully examines the patient perspective and includes, whenever possible, patient-reported outcomes of care.

We look forward to our continued work with ICHOM to understand better how health care can be reformed using the principles of value-based health care. At the core of that work is the measurement of outcomes of care that are meaningful to patients and that can be used both to help health care providers improve and inform our patients through transparent reporting of clinically meaningful, patient-centered outcomes of care.
The success of the Connecticut Joint Replacement Institute (CJRI), which was launched in 2007 in Hartford, Connecticut, is a consequence of our focus on generating clean, credible data on quality and cost, and making data-driven decisions. The “crown jewel” of our quality improvement program is a registry, established to provide follow-up data on perioperative outcomes and complications, which now contains information on over 14,000 patients. We have thus seen the extraordinary power of collecting, analyzing, and providing data to our surgeons in a fully transparent fashion. Simply stated, doing so changes human behavior.

Founded in 2012, ICHOM’s vision is to cultivate international, multi-stakeholder sharing of clinical outcomes measurement. In so doing, it lends its work to the global goal of condition-specific measurement standardization and encourages the development of logical and systemic outcomes-measurement tools. CJRI’s partnership with ICHOM opens the door for us to share our data and experience with our international colleagues.

Going forward, for ICHOM to achieve its full potential, there must be broad and diverse input from institutions not currently participating in such activities. With a clear focus on outcome measures specific to given medical conditions, providers across the health care spectrum should, and will, support ICHOM’s vision. We believe that in doing so, we can accelerate our collective knowledge base. As John F. Kennedy once said, "A rising tide lifts all boats." No doubt, this is germane to the current international health care state of affairs.

“WITH A CLEAR FOCUS ON OUTCOME MEASURES SPECIFIC TO GIVEN MEDICAL CONDITIONS, PROVIDERS ACROSS THE HEALTH CARE SPECTRUM SHOULD... SUPPORT ICHOM’S VISION.”
“THE OPPORTUNITY ICHOM PROVIDES US TO LEARN FROM BEST PRACTICES NOT JUST IN OUR COUNTRY, BUT WORLDWIDE, IS TRULY UNIQUE AND IS HELPING TO ACCELERATE OUR PROGRESS.”

MICHAEL SHERMAN
HARVARD PILGRIM PAYER

As a payer organization, we at Harvard Pilgrim Health Care live in a rapidly changing world, and one of our goals is to ensure that we continue to add value as accountabilities shift among the players. At Harvard Pilgrim Health Care, we believe that the changing market for health care delivery will create opportunities, not only to design new care delivery models that create incentives for value versus volume, but also to identify high-value providers so that we can encourage our insured members to seek out their services.

We all know that outcomes have improved wherever there has been agreement on measures that matter and on the public reporting of the results. Not only do the best performers improve upon their outcomes, but there is also a narrowing of the spread between best and worst. There is an abundance of clinical conditions for which we believe that measuring outcomes can also dramatically transform the care that patients receive, but the challenges are significant. They include the fact that there is a lack of agreement among stakeholders as to which measures are truly most important, many times complicated by providers’ natural desire to measure those areas in which they excel and not to think about those in which they do not.

Because a mission-driven, multi-stakeholder organization such as ICHOM can overcome many of these barriers, Harvard Pilgrim was quick to realize its value to us as a payer and welcomed the opportunity to support it, not only as a founding member, but also on an ongoing basis. Specifically, the fact that ICHOM itself is not a payer or provider allows its perspective to be viewed objectively by all participants, and physically bringing its stakeholders together annually allows for improved collaboration and learning. Moreover, the opportunity ICHOM provides us to learn from best practices not just in our country, but worldwide, is truly unique and is helping to accelerate our progress. We see ICHOM’s abilities as increasingly important and would encourage all in our industry to support the organization and have a voice.