

VBHC SUMMIT OF THE AMERICAS

1ST EDITION OF THE AMERICAS DRAGONS' GRANT

2024



APRIL 17-19, 2024
MONTREAL, QUEBEC, CANADA

#VBHCSUMMITOFTHEAMERICAS

TABLE OF CONTENTS

WELCOME MESSAGE	3
PRE-SUMMIT PROGRAMME	7
SUMMIT DAY 1 PROGRAMME	8
FIRESIDE CHAT	10
SUMMIT DAY 2 PROGRAMME	11

CONFERENCE SPEAKERS & PANELISTS	14
---------------------------------	----

DRAGONS' GRANT & ENDORSEMENT	29
------------------------------	----

DRAGONS' NOMINEES	32
-------------------	----

DRAGONS' JURY	58
---------------	----

SPONSORS	61
----------	----

WELCOME, BIENVENUE, BEM-VINDO

Welcome to the first inaugural VBHC Summit of the Americas and Dragons' Grant taking place in Montreal, Quebec, Canada and online. It is a historic occasion to go beyond basic principles of Value-Based Health Care (VBHC) to celebrate and learn from existing VBHC implementation initiatives from across Canada, Brazil, and elsewhere. We will hear about promising ongoing projects, network with like-minded, value-driven healthcare leaders and be inspired to take these best practices to our own local communities.

This hybrid event is meant to bring the experts to you, to move from concepts to practice and stimulate the reflection needed to mobilize all the stakeholders of the healthcare ecosystem to get excited about and inspire others to join this meaningful paradigm shift towards #VALUE. The global experts in VBHC will also enable reflection and learning about value-based health care transformation in different contexts. Whether you are a health care professional, a patient or patient advocate, a public or private payer, a health system manager, a researcher, a public decision maker, or working for a life-science company, you will no doubt learn something new and be inspired. We will celebrate promising initiatives from Brazil & Canada through the first Dragons' Grant of the Americas and encourage others to start thinking about their projects for next year.

Don't hesitate to reach out to us and your fellow attendees, and let's get the momentum going to #TransformHealthCare for all!



Bienvenue au premier Sommet VBHC des Amériques sur les soins de santé axés sur la valeur et à la Compétition des Dragons, qui se tiendra à Montréal (Québec), au Canada, et en ligne. Il s'agit d'une occasion historique d'aller au-delà des principes de base des soins de santé axés sur la valeur (VBHC) pour célébrer et apprendre des initiatives de mise en œuvre existantes au Canada, au Brésil et ailleurs. Nous entendrons parler de projets prometteurs en cours, nous allons résauter avec des leaders en soins de santé animés du même esprit et axés sur la valeur, et nous serons inspirés pour transposer ces meilleures pratiques dans nos propres communautés locales.

Cet événement hybride a pour but de faire venir les experts à vous, de passer des concepts à la pratique et de stimuler la réflexion nécessaire pour mobiliser tous les acteurs de l'écosystème des soins de santé afin qu'ils s'enthousiasment pour ce changement de paradigme significatif vers la #VALEUR et qu'ils incitent les autres à le rejoindre. Les experts mondiaux de la VBHC permettront également la réflexion et l'apprentissage de la transformation des soins de santé axés sur la valeur dans des contextes différents. Que vous soyez un professionnel de la santé, un patient ou un défenseur des patients, un payeur public ou privé, un gestionnaire de système de santé, un chercheur, un décideur public ou que vous travailliez pour une entreprise de sciences de la vie, vous apprendrez sans aucun doute quelque chose de nouveau et serez inspiré. Nous célébrerons des initiatives prometteuses au Brésil et au Canada grâce à la première Compétition des Dragons des Amériques et nous encouragerons d'autres personnes à commencer à réfléchir à leurs projets pour l'année prochaine.

N'hésitez pas à communiquer avec nous et avec les autres participants, et donnons l'élan nécessaire pour #Transformerles soins de santé pour tous !

Eva Villalba, MBA, MSc. HCT, VBHC Green Belt
Fondatrice & Associée principale – Expertise Valeur en Santé
Ambassadrice Canadienne – VBHC Center Europe
Présidente – Communauté de pratique VBHC

Dr. Marcia Makdisse, MD, PhD, MBA, VBHC Green Belt, MSc in Health Care Transformation
Fondatrice & Associée principale de Mak Valor et de Academia VBHC
Ambassadrice pour le Brésil, VBHC Centre Europe
Présidente-sortante de l'initiative VBHC, American College of Cardiology

Bem-vindo à primeira Edição do VBHC Summit of the Americas and Dragons' Grant, que será realizado em Montreal, Quebec, Canadá e on-line. É uma ocasião histórica para ir além dos princípios básicos da Value-Based Health Care (VBHC), para celebrar e aprender com as iniciativas de implementação de VBHC existentes no Canadá, no Brasil e em outros países.

Será também uma oportunidade de conhecermos projetos promissores em andamento, de nos conectarmos com líderes da área de saúde que pensam da mesma forma e que se preocupam com o valor em saúde, e de nos inspirarmos a levar tais práticas para nossos contextos locais.

Este evento híbrido tem o objetivo de trazer os Experts em VBHC até você, passar dos conceitos à prática e estimular a reflexão necessária para mobilizar todos os stakeholders do ecossistema de saúde a se entusiasmarem e inspirarem outras pessoas a se juntarem a essa significativa mudança de paradigma rumo ao #VALOR. Os Experts globais em VBHC também permitirão a reflexão e o aprendizado sobre a transformação direcionada por Value-Based Care em diferentes contextos. Seja você um profissional de saúde, um paciente ou um defensor de pacientes, um pagador público ou privado, um gestor atuando na área da saúde, um pesquisador, um tomador de decisões públicas ou um funcionário de uma companhia farmacêutica ou de dispositivos médicos, sem dúvida você aprenderá algo novo e se inspirará. Celebraremos iniciativas promissoras do Brasil e do Canadá por meio da primeira edição do VBHC Dragons' Grant das Américas e incentivaremos outras pessoas a começarem a pensar em seus projetos para o próximo ano.

Não hesite em entrar em contato conosco e com seus colegas participantes, e vamos dar o impulso necessário para #TransformHealthCare para todos!

Eva Villalba, MBA, MSc. HCT, VBHC Green Belt
Sócia-fundadora - Expertise Valeur en Santé
Embaixadora canadense - VBHC Center Europe
Presidente - Comunidade de Prática VBHC

Dr. Marcia Makdisse, MD, PhD, MBA, VBHC Green Belt, MSc in Health Care Transformation
Sócia-fundadora da Mak Valor e da Academia VBHC (Brasil)
Embaixadora para o Brasil, VBHC Center Europe (Holanda)
Past Chair, Iniciativa de VBHC, American College of Cardiology (USA)

**VBHC SUMMIT OF THE AMERICAS
AND 1ST EDITION OF THE AMERICAS DRAGONS'
GRANT PRESENTED BY:**



***Centre intégré
universitaire de santé
et de services sociaux
du Centre-Ouest-
de-l'Île-de-Montréal***

Québec 

PRE-SUMMIT PROGRAMME

APRIL 17

JEWISH GENERAL HOSPITAL

3755 CHEMIN DE LA CÔTE STE- CATHERINE

Centre intégré
universitaire de santé
et de services sociaux
du Centre-Ouest-
de-l'Île-de-Montréal

Québec 

9:00-12:00

Site Visit: The Jewish General Hospital, West-Central Montreal Health & Social Services Network, Affiliated with McGill University (limited places)

Visitors will have the opportunity to see value based care in action across the organization:

- Visit to the Cancer Center with Dr. Gerald Batist and Karine Lepage
- Visit to the Integrated Heart Center with Dr. Lawrence Rudski, Mary Lattas and Stephanie Petezian
- Visit to the Command Center and Virtual Care satellites with Erin Cook, Dr. Shannon Fraser, Andre Poitras, Kimberly Gartshore and Adelaide Perrin de Bousac
- Tour of the emergency department with Dr. Marc Afilalo and Victor Uscatescu
- Overview of the Connect Health Record that integrates care across the organization with Dr. Justin Cross and Michael Shulha
- Overview of the value-based care data tool utilized within the organization with Ani Galystan, Ella Gabitov, Jennifer Gutberg and Erin Cook

12:30-14:00

Networking lunch at the Jewish General Hospital (Lea Polansky space*)



Hôpital général juif
Jewish General Hospital



vos soins partout
care everywhere

SUMMIT DAY 1 PROGRAMME

APRIL 18
JEWISH GENERAL HOSPITAL
3755 CHEMIN DE LA CÔTE STE- CATHERINE



Hôpital général juif
Jewish General Hospital

8:00-9:00

Registration and light breakfast

9:00-9:15

Opening remarks by Summit Co-Chairs, Eva Villalba and Dr. Marcia Makdisse

9:15-10:40

Welcome presentations

- Elizabeth Teisberg - Redefining Healthcare in 2024
- Dr. Lawrence Rosenberg - Vision for VBHC Transformation in Quebec
- Erin Cook - VBHC Initiatives at the West-Central Montreal Health & Social Services Network

10:40-11:00

Health break & Networking

11:00-12:00

Keynote Session #1 - Value-based care & the well-being of the health care workforce

- Alice Andrews, Assistant Professor, Value Institute for Health & Care, USA
- Dr. Shannon Jackson, Providence Health, Vancouver, Canada

12:00-13:00

Lunch & Networking

13:00-14:00

Keynote Session #2 - Implementing Integrated Practice Units & Value-Based models of Care

- Paul van der Nat, St. Antonious Manager and Professor of VBHC, Radboud University, Netherlands

**Centre intégré
universitaire de santé
et de services sociaux
du Centre-Ouest-
de-l'Île-de-Montréal**

Québec



SUMMIT DAY 1

PROGRAMME (CONT'D)

APRIL 18

JEWISH GENERAL HOSPITAL

3755 CHEMIN DE LA CÔTE STE- CATHERINE

14:00-15:00

Keynote #3 - Setting up a Value Management Office (VMO) in your Healthcare Organization

- Dr. Marcia Makdisse, VBHC Ambassador for Brazil, Mak Valor Mentoring, Brazil

15:00-15:20

Health break & Networking

15:20-16:00

Keynote #4 - Developing and deploying an Enabling Value-Based Health Technology Platform

- Renske Veenstra, Managing Director responsible for Health Data Platform, Santeon, The Netherlands

16:00-16:10

Closing remarks

- Eva Villalba, VBHC Ambassador for Canada, Expertise Valeur en Santé and Dr. Marcia Makdisse, VBHC Ambassador for Brazil, Mak Valor Mentoring

19:00-22:00

Gala dinner and Ask the Experts

Humaniti Hotel - 340 rue de la Gauchetière O. Montréal, H2Z 0C3

*Centre intégré
universitaire de santé
et de services sociaux
du Centre-Ouest-
de-l'Île-de-Montréal*

Québec 



JOIN US FOR A SPECIAL FIRESIDE CHAT WITH THE EXPERTS

April 18 - 19:00
Humaniti Hotel Montreal
340 rue de la Gauchetière O.



HUMANITI
MONTRÉAL



Elizabeth Teisberg

Executive Director of the Value
Institute for Health and Care,
University of Texas, Austin



Jennifer Bright

President, ICHOM;
Consultant, Momentum Health Strategies LLC



SUMMIT DAY 2

PROGRAMME

APRIL 19
HUMANITI HOTEL MONTREAL
340 RUE DE LA GAUCHETIÈRE O.



8:00-8:40

Breakfast and registration

8:40-8:50

Opening remarks by Summit Co-Chairs, Eva Villalba and Dr. Marcia Makdisse

8:50-9:50

Panel Discussion #1 - Creating value through population health

- Eva Villalba, VBHC Ambassador for Canada
- Sir Muir Gray, Founding Director, Oxford Value and Stewardship Program, UK
- Joanne Castonguay, Health and Welfare Commissioner, Quebec

9:50-10:30

Dragons' Nominees Pitches

- Steven Buijs, VBHC Center Europe, The Netherlands

10:30-11:00

Health Break & Meet the Nominees

11:00-11:40

Keynote Session #1 - Cultural & Organizational Change as an Enabler of Scaling Value-Based Transformation

- Paul van der Nat, St. Antonius Manager and Professor of VBHC, Radboud University, The Netherlands

11:40-12:10

Keynote Session #2 - How Innovative Payment Models have Evolved in the Netherlands

- Prof. Fred van Eenennaam, Chair of VBHC Center Europe, The Netherlands



SUMMIT DAY 2

PROGRAMME (CONT'D)

APRIL 19

HUMANITI HOTEL MONTREAL
340 RUE DE LA GAUCHETIÈRE O.

12:10-13:30

Lunch break (served on site)

13:30-14:10

Keynote Session #3 - Lessons from Santeon's VBHC 10 years of Implementation Experience

- Pieter de Bey, Managing Director at Santeon, The Netherlands

14:10-15:10

Panel Session #2 - VBHC Implementation and Scaling Up: Examples from Brazil and Canada

- Dr. Marcia Makdisse, VBHC Ambassador for Brazil (moderator)
- Karine Lepage, CIUSSS Centre-Ouest-de-l'Île-de-Montréal, Canada
- Dr. Shannon Jackson, Providence Health, Vancouver, Canada
- Dr. Henrique Diegoli, Joinvasc, Brazil

15:10-16:00

Panel Discussion #3 - Charting the Course: Perspectives on the Future of Value-Based Healthcare from Key Stakeholders

- Matheus Vieira, President & General Manager, Roche Diagnostics Canada
- Sylvie Bouchard, Consulting Pharmacist
- Louise Binder, Patient Advocate



SUMMIT DAY 2

PROGRAMME (CONT'D)

APRIL 19

HUMANITI HOTEL MONTREAL
340 RUE DE LA GAUCHETIÈRE O.

16:00-16:20

Finals - Dragons' Grant & Endorsement

16:20-16:40

Health Break and Jury Deliberation

16:40-16:55

2024 Americas Dragons' Grant & Endorsement Announcement

- Dr. Marcia Makdisse, VBHC Ambassador for Brazil, Mak Valor Mentoring
- Eva Villalba, VBHC Ambassador for Canada, Expertise Valeur en Santé
- Steven Buijs, VBHC Center Europe, The Netherlands

16:55-17:00

Closing Remarks by Summit Co-Chairs Eva Villalba and Dr. Marcia Makdisse

17:00-19:00

Celebration and Networking

CONFERENCE SPEAKERS & PANELISTS

Eva Villalba is the Executive Director of the Quebec Cancer Coalition, a non-profit patient advocacy group dedicated to improving the Quebec health-care system for people affected by cancer. She graduated from McGill University with a double major in Psychology and Applied Linguistics, then completed an MBA from HEC Montréal with the objective to apply best business practices to the non-profit sector. She is a board member of the Artificial Intelligence Impact Alliance (AIIA) and sees great potential in applying AI and technological innovations to the health-care sector to prevent and improve health outcomes. Eva is the first Quebecker

and Canadian to obtain a graduate degree in Value-Based Health Care (VBHC) with an MSc. in Health Care Transformation at the University of Texas at Austin with Professor Elizabeth Teisberg and other VBHC experts. Eva is a fierce patient advocate and believes strongly in the potential of the Quebec health-care system to be a world-class leader in Value-Based Care. She is also the co-chair of the Resilient Healthcare Coalition (RHC), a diverse group of health system leaders across the public, private, and non-profit sectors committed to helping Canadian health care systems enhance patient care and improve health outcomes by becoming faster, nimbler, and better able to adapt to future shocks.

In January 2022, she founded Expertise Valeur en Santé to be able to accompany public and private sector clients in the transition towards Value Based-Health Care in Quebec and in Canada. Eva has an extensive international network of Value-Based Health Transformation Leaders, has a VBHC Green Belt Certification from VBHC Center Europe, based in Amsterdam. She is their official Canadian Ambassador, and the exclusive trainer for the French version of the VBHC Green Belt Certification in Canada. She also provides Keynote presentations and customized training on value creation and VBHC implementation on demand.



EVA VILLALBA
SUMMIT CO-CHAIR
MBA, MSc HCT, VBHC Green Belt



CONFERENCE SPEAKERS & PANELISTS

Marcia holds a degree in Medicine, a Masters in Cardiology, a PhD in Medicine, an MBA in Health Management and a Master of Science in Health Care Transformation from the Value Institute for Health and Care at the University of Texas at Austin. Throughout her career she has developed skills and expertise in Clinical Cardiology, Healthcare Management and Research. Between 2005 and 2016, she served as the Head of Cardiology at Albert Einstein Jewish Hospital, a leading organization in Latin America and from 2016 on has dedicated her career to Value-Based Health Care. Putting VBHC into practice is one of her top priorities. She led the



MARCIA MAKDISSE
SUMMIT CO-CHAIR

MD, PhD, MSc HCT, VBHC Green Belt

implementation of the first Value Management Office (VMO) in Latin America at Einstein, in 2017, and since then has implemented other VMOs, in Brazil, including provider and payer organizations.

Marcia is the VBHC Center Europe Ambassador for Brazil, since 2019, and a Faculty of the VBHC Yellow, Green and Black Belt Certifications and has a Scientific Partnership with the Oxford Value and Stewardship Program. She is also a Member of the Wennberg International Collaborative and a Past-Chair of the American College of Cardiology's VBHC Initiative.

Marcia has 49 papers published on PubMed and over 26,000 citations with an H-index of 30. She is a co-editor and co-author of the Atlas of Variation in Healthcare Brazil, the first published by a middle-income country in collaboration with the Wennberg International Collaborative.

Currently, she serves as Educator, Researcher and Consultant in several VBHC ongoing projects through Mak Valor Mentoring (www.makvalor.com) and Academia VBHC (www.academiavbhc.org), in Sao Paulo, Brazil.



CONFERENCE SPEAKERS & PANELISTS

Lawrence Rosenberg is Professor of Surgery and Medicine at McGill University, and President and CEO of the Integrated Health and Social Services University Network of West-Central Montreal. Previously, he was Executive Director of the Jewish General Hospital; and before that, he was Chief of Surgical Services and Director of Transformational Change at the JGH.

Dr. Rosenberg received his MD, CM degree from McGill University, where he completed specialty training in General Surgery. He holds an MSc and PhD in Experimental Surgery from McGill and completed post-doctoral studies and a surgical fellowship in transplantation at the University of Michigan.

He was Director of the Multi-Organ Transplant Program at Montreal General Hospital, inaugurating McGill University's Pancreas Transplant Program and leading the team that performed the first successful liver transplant at McGill.

Dr. Rosenberg has served as a consultant to the Juvenile Diabetes Research Foundation (JDRF), the Canadian Diabetes Association (CDA), the Canadian Institutes for Health Research (CIHR) and the NIH. He has received many career awards, including an appointment as Chercheur National (national scientist) of the Quebec Government.

Dr. Rosenberg was instrumental in the creation of three national multidisciplinary research teams funded by JDRF-CIHR, the Canadian Foundation for Innovation (CFI) and the Stem Cell Network of Centers of Excellence.

Dr. Rosenberg also received an MEng from University of Waterloo, with concentrations in Systems, Innovation and Entrepreneurship. He is presently designing and implementing the first provincial digital health innovation & research incubator, and has garnered support from the Quebec Ministers of Health, Labor and Innovation & Economic Development.

Dr. Rosenberg has extensive experience as a clinician-scientist, educator, and consultant in value-based health systems and management of change.



**DR. LAWRENCE
ROSENBERG**

President and CEO - CIUSSS
Centre-Ouest-de-l'Île-de-Montréal



CONFERENCE SPEAKERS & PANELISTS

Professor Elizabeth Teisberg, Ph.D. wrote *Redefining Health Care*, the foundational book on value-based health care, with Prof. Michael E. Porter. She currently holds the Distinguished University Chair in Value-Based Health Care at the University of Texas, Austin. She has received awards for her roles in founding the field, for her pioneering work on implementation of high value health care, for teaching excellence, and for her impact on health care delivery. She advises, keynotes, and teaches internationally to help organizations design and implement care that improves meaningful outcomes and advances health equity.



**PROF. ELIZABETH
TEISBERG, PHD**

Distinguished University Chair
University of Texas, Austin, USA

With over 4 years of experience in Value Based Healthcare (VBHC) implementation both as a VBHC Green Belt teacher and healthcare consultant, he has been actively involved in teaching and promoting the principles of VBHC. Throughout his career, he has successfully completed multiple projects related to the implementation of VBHC. Additionally, he has served as the leading event manager for the international VBHC Dragons Grant and Endorsement for the past 4 years. He wants to share his passion for healthcare systems and patient value with others.



STEVEN BUIJS, MSC

Content Officer at VBHC Center
Europe, Certified VBHC Green Belt
Trainer



CONFERENCE SPEAKERS & PANELISTS

Alice Andrews, Ph.D., has expertise in research and education aimed at enabling health care providers, health system leaders, employers, and other stakeholders to transform health care delivery. Her research interests focus broadly on the implementation of health care solutions centered around outcomes that matter to patients and the design of systems that support the health care workforce. Andrews currently is a senior research scientist and senior lecturer at the Geisel School of Medicine at Dartmouth College and holds positions as assistant professor of medical education at Dell Medical School and clinical associate professor of

management at the McCombs School of Business at The University of Texas at Austin. Previously, she was the director of education for the Value Institute for Health and Care at UT Austin, where she received the Dell Medical School Academy of Distinguished Educators Excellence in Teaching award in 2019 and 2021.

Andrews is on the editorial review board for the Journal of Patient Experience and the Journal of Health Organization and Management. She has served as juror for the Value-Based Health Care Prize offered by the Value-Based Health Care Center Europe since 2020 and previously was on the advisory board of the Value in Health National Programme for NHS Wales. Andrews holds a doctorate in organizational behavior from Cornell University and a master's of science in the evaluative clinical sciences from Dartmouth College.



PROF. ALICE ANDREWS

Assistant Professor, Value Institute
for Health and Care, University of
Texas, Austin



CONFERENCE SPEAKERS & PANELISTS

Professor Sir Muir Gray has worked in the Public Health Service Sector, in England since 1972.

Sir Muir is currently an Executive Director of the Oxford Value and Stewardship Programme, Director of The Optimal Ageing Programme, and Founding Director of the Critical Appraisal Skills Programme (CASP). Sir Muir's work focuses on increasing value for populations and patients by systems design and culture change.

Sir Muir has worked in the Public Health Service in England since 1972. He has carried out a number of tasks in that time including serving as the Director of Research and Development for Anglia and Oxford Regional Health Authority, establishing and serving as the Director of the UK National Screening Committee, establishing the National Library for Health, serving as the Director of Clinical Knowledge Process and Safety for the English NHS National Programme for IT, serving as the Director of the National Knowledge Service, serving as the Chief Knowledge Officer of the English NHS, serving as the co-Directors of the England Department of Health QIPP Right Care Programme and helping to establish the Cochrane Collaboration with Sir Iain Chalmers. Sir Muir is an internationally renowned authority on healthcare systems and has advised governments of several countries including England, Wales, Australia, New Zealand, Italy, Spain and Germany and regularly delivers plenary sessions at international events.

Sir Muir is also a Professor in the Nuffield Department of Surgery at the University of Oxford and is the Director of the Value Based Healthcare Programme at the University. He was knighted in 2005 for the development of the foetal, maternal and child screening programme and the creation of the National Library for Health. He published many influential Atlases of Variation. He then left to found Better Value Healthcare, and then the Oxford Centre for Triple Value Healthcare, a mission driven social enterprise.



SIR MUIR GRAY

Executive Director, Oxford Value & Stewardship Programme



CONFERENCE SPEAKERS & PANELISTS

Jennifer has held influential positions, demonstrating her commitment to advancing healthcare quality and value. As the Founder and President of Momentum Health Strategies, she successfully spearheaded initiatives focused on improving patient outcomes and increasing value in healthcare.

Jennifer holds a Master of Public Administration & Public Policy from George Washington University, as well as a Bachelor of Arts in Political Science from Trinity College. Her extensive expertise in healthcare strategy and her deep understanding of

the challenges faced by the industry make her an ideal leader for ICHOM. Her track record of driving innovation and fostering collaboration among diverse stakeholders will advance ICHOM's mission to standardize health outcomes measurement worldwide.



JENNIFER BRIGHT

President - ICHOM, Consultant,
Momentum Health Strategies LLC

Paul is program manager value-based healthcare at St. Antonius Hospital, research development manager at Santeon and professor value-based healthcare at IQ healthcare (Radboud University Medical Centre). Paul is working on VBHC implementation and research in local, national, and international initiatives since 2013. He is one of the initiators of Meetbaar Beter and worked there as manager in 2013-2017 (merged within the Netherlands Heart Registry).

His current research focuses on condition-based organization of hospitals, change management

requirements in the implementation of value-based healthcare and patient participation within multidisciplinary value improvement teams. Paul was installed as professor in 2022 and gave his inaugural lecture 'from amazement to improvement' in September 2023. Paul was strategy consultant at The Decision Group in 2008-2011 and he holds a PhD in High-Energy Physics for his work at the National Institute for Subatomic Physics (NIKHEF, Amsterdam).



PAUL VAN DER NAT

Manager and Professor Value-Based
Healthcare, Radboud University

CONFERENCE SPEAKERS & PANELISTS

Erin Cook is the Director of Quality, Transformation, Evaluation, Value, Ethics and virtual care of the Integrated Health and Social Services University Network of West-Central Montreal, Quebec.

Erin received her Nursing Degree from Athabasca University, and her Masters in Nursing from the University of British Columbia, and has received multiple certifications in agile management, Value Based care, and digital transformation.

Erin Cook has been instrumental in the transformation towards value based care in the Integrated Health Network of the West-Central, Montreal. She developed integrated data approach to measuring value across the care

continuum, integrating costs and outcomes, and supported the transition to integrated practice units.

A nurse by profession, she has experience in hospital care, long-term care and cross-functional programs. Her experience in quality improvement, agile project management, and innovation initiatives has helped improve the patient experience through healthcare transformation. Erin co-led the rollout of the nationally recognized hospital at home program at the integrated health network for which she garnered support from Quebec Ministry of Health. She has also worked at the provincial level, to develop the Virtual Care program for the province. Her other responsibilities include supporting the organization in transformational change, care variability, and the operations of the command center which supports patient flow across the Health Network. She has received several National awards and recognitions for Value based Care, Health Care innovation and Virtual Care .



ERIN COOK

Director of Quality, Transformation, Evaluation, Value, Ethics and Virtual Care - CIUSSS Centre-Ouest-de-l'Île-de-Montréal



CONFERENCE SPEAKERS & PANELISTS

An economist and expert in the health-care system, she is an Associate Professor at Pôle santé HEC Montréal. Recognized for her knowledge and expertise in health systems policies, innovation policies, health system governance and major project governance systems, Joanne has also been a member of the Génome Québec Board of Directors since 2019. She previously led research with the Institute for Research on Public Policy (IRPP) and, prior to that, with the Center for Interuniversity Research and Analysis of Organizations (CIRANO). Over the past decade, she has influenced the development of Québec bills

through her publications, including a series on governance of major public infrastructure projects and a comparative analysis of hospital funding mechanisms. She is the daughter of Claude Castonguay, known in Quebec as the father of the Quebec public health insurance regimen. She is the Health and Welfare Commissioner since December 2019 is an independent observer of the quality, accessibility and funding of services. The Commissioner can make recommendations to the government on improving the performance of the healthcare system.



**JOANNE
CASTONGUAY**

Health and Welfare Commissioner,
Quebec



CONFERENCE SPEAKERS & PANELISTS

Dr. Jackson is a hematologist primarily interested in non-malignant blood conditions including inherited and acquired bleeding disorders. She obtained her medical degree, internal medicine, hematology and hemostasis training at the University of Calgary and moved to Vancouver in 2009. She is currently the Medical Director of the Adult Bleeding Disorders Program of BC/Yukon that cares for about 950 people with bleeding disorders over a huge geographic area based in Vancouver, Canada. She is a founder of Westcoast Hematology and the co-head of the Division of Hematology at St. Paul's Hospital.

She has published >60 papers in the area of bleeding disorders spanning prophylaxis and cardiovascular disease in adults with hemophilia, health outcomes measurement in hemophilia care and the clinical implications of factor VIII assay discrepancies. Dr. Jackson is passionate about measuring health outcomes that matter to patients and transforming to a Value Based Health Care model of care and has a Masters in Health Care Transformation from the Value Institute for Health and Care, at the University of Texas Austin.

Pieter de Bey is a director of Santeon with effect from December 1, 2017. De Bey currently works for the Boston Consulting Group (BCG) in New York, where he is responsible for the strategic processes of several American healthcare providers. Earlier in 2016, he made an important contribution from BCG Amsterdam to the organization of Value-Based Health Care (VBHC) within Santeon. Previously, he worked for ICHOM (International Consortium for Health Outcomes Measurement), which plays a prominent role in the further dissemination of VBHC.



SHANNON JACKSON

MD, Providence Health, Vancouver,
Canada



PIETER DE BEY

Director - Santeon

CONFERENCE SPEAKERS & PANELISTS

There is hardly anyone who advocates for Value Based Healthcare as consistently as he does. Prof. Dr. Fred van Eenennaam brought the concept of VBHC from the US to Europe by founding the VBHC Center Europe, a leading platform for visitors and members who want to learn about Value-Based Health Care implementation. He is also a professor and strategy consultant in the healthcare sector. For Prof. Dr. van Eenennaam, Value Based Healthcare is the only way to focus on what is essential in healthcare – the value for patients.



**PROF. FRED VAN
EENENNAAM**

Chairman VBHC Center Europe,
Certified VBHC Black Belt Trainer

Depuis 2008, Karine Lepage a travaillé comme gestionnaire en oncologie. Mme Lepage détient une maîtrise en administration des services de la santé, option analyse et évaluation du système de santé de l'Université de Montréal, un baccalauréat en sciences infirmières de l'Université Laval, et elle est certifiée ceinture verte, Lean-Six Sigma et value-based health care. Mme Lepage a un intérêt particulier sur la collaboration interprofessionnel, l'amélioration continue des soins et l'implantation des indicateurs axés sur la valeur tel que l'évaluation de l'expérience patient et les résultats rapportés par les patients.



KARINE LEPAGE

B.Sc. Inf. M.Sc, Green Belt VBHC et
Lean Six Sigma
Clinical Coordinator - CIUSSS
Centre-Ouest



CONFERENCE SPEAKERS & PANELISTS

Henrique Diegoli, MD, MSc, is a neurologist trained at Univali and Hospital São José in Brazil, and a health economist educated at the University of York, UK.

Since 2014, he has served as a volunteer researcher in the Joinvasc program, which aims to improve patient-centered outcomes throughout the entire continuum of stroke care. This program was awarded the 2021 Value-Based Healthcare (VBHC) Prize.

In 2022, he contributed to the development of the Atlas of Variation in Healthcare: Brazil, which features 30 maps comparing outcomes, costs, and the frequency of resource utilization across the country.

Currently, he is involved in research supporting the incorporation of new healthcare technologies in Brazil, including conducting systematic literature reviews, cost-effectiveness studies, and projects related to VBHC.



HENRIQUE DIEGOLI
MD, Joinvasc Stroke Program - Brazil

Matheus Vieira, a dynamic healthcare executive with over two decades of industry experience, currently leads as President and General Manager at Roche Diagnostics Canada. With a solid background, including degrees in pharmacy, biochemistry, a Master's in Genetics, and an MBA in Business and Marketing, Matheus has made significant contributions to healthcare on a global scale, navigating diverse roles across various countries and regions. Originally from Brazil and having lived in Switzerland, Finland, and now Canada, his international experience enriches his leadership



MATHEUS VIEIRA
President and General Manager -
Roche Diagnostics Canada

approach. Throughout his career with prominent companies like Abbott, Becton & Dickinson, and Roche, Matheus has been committed to improving healthcare access, driving innovation, and nurturing talent. At the forefront of Roche Diagnostics, he continues to propel patient care advancements, utilizing his profound expertise in commercial, medical, and marketing realms.



CONFERENCE SPEAKERS & PANELISTS

Sylvie Bouchard holds a bachelor's degree in Pharmacy from Université Laval in Québec city (1988). She also has a diploma (1989) and a master's degree (1992) in Hospital Pharmacy from Université Laval (Faculty of Pharmacy), and an MBA in Corporate Management (2001), also from Université Laval (Faculty of Business Administration).

Sylvie Bouchard was a hospital pharmacist and hospital pharmacy manager. She joined the Conseil du médicament in April 2010, has since become l'Institut national d'excellence en santé et en

services sociaux, where she has held various management positions over the years. In February 2020, she headed the Direction de l'évaluation des médicaments et des technologies à des fins de remboursement. She has recently become an active retiree, wanting to share her expertise in health technology assessment through consultation.

Renske Veenstra is the managing director of the award winning Health Intelligence Platform Santeon (HIPS). This (federated) dataplatform is build by the seven Santeon hospitals in the Netherlands and facilitates VBHC benchmarking and research. With basic principles as a common datamodel and a common datagovernance structure for all hopitals. Renske has more than 10 year experience in the Dutch healthcare system and the use of data for VBHC. She started as an intern at the Netherlands Comprehensive Cancer Organisation (IKNL) where she (a.o.) studied the impact of physician

preferences on breast cancer treatment decisions. After that she worked at the Dutch Institute for Clinical Auditing (DICA) as manager data distribution before making a conscious decision to go work for the Santeon mission in which seven hospitals work together on improving healthcare.



SYLVIE BOUCHARD
Consulting Pharmacist



RENSKE VEENSTRA
Managing Director - Santeon

CONFERENCE SPEAKERS & PANELISTS

Louise Binder is a prominent figure in the legal and health advocacy field, with a career spanning over 25 years. Her dedication to informing health policy and improving treatment access practices from a patient perspective has had a significant impact, particularly in the areas of HIV/AIDS and cancer.

In 1996, Louise co-founded the Canadian Treatment Action Council (CTAC), an organization that played a crucial role in ensuring access to treatments and quality care for individuals living with HIV. Through collaboration with federal and provincial

governments, as well as other stakeholders, CTAC contributed to enhancing drug review and approval systems, pricing policies, and access to liver transplants for the HIV/AIDS community.

Louise's advocacy extends to women's issues, as demonstrated by her decade-long tenure as the chair of Voice of Positive Women, an Ontario-based women's organization. She has also been involved in addressing women's issues internationally, highlighting her commitment to advancing gender equality and women's health.

In the realm of cancer advocacy, Louise has continued her impactful work, serving as a Health Policy Consultant with the Save Your Skin Foundation for over 6 years. This demonstrates her versatility and dedication to addressing pressing health concerns beyond HIV/AIDS.

Throughout her career, Louise Binder has been recognized for her outstanding contributions. Notable accolades include receiving an Honorary Doctorate of Laws from Queen's Law School, the Order of Ontario from the Province of Ontario, and two Queen Elizabeth II medals. These honors underscore her significant impact and dedication to improving healthcare systems and advocating for the rights of patients.



LOUISE BINDER

Patient Advocate



1ST EDITION OF THE AMERICAS DRAGONS' GRANT

PRESENTED IN PARTNERSHIP WITH
VBHC CENTER EUROPE



CELEBRATING PROMISING INITIATIVES, NETWORKING & BUILDING MOMENTUM

On the 19th of April 2024, the first inaugural VBHC Summit of the Americas and Dragons' Grant is taking place in Montreal, Quebec, Canada. This is an occasion to celebrate and learn from existing VBHC implementation initiatives from across Canada and Brazil, to hear about promising ongoing projects, and to network and mobilize like-minded, value-driven healthcare leaders.

The Americas Dragons' Grant is nested within the VBHC Summit of the Americas which brings together renowned VBHC experts from the Americas and from Europe with whom participants can interact during an inspiring Scientific Agenda, with earlyadopters from Brazil and Canada who come to share their experiences and lessons learned Case and with VBHC Dragons' Grant nominees. The goal is to endorse these VBHC rough diamonds that need some shaping and grant the VBHC growth diamonds that need to scale up in order to accelerate their VBHC initiative. We believe today's nominees are the VBHC Prize winners of the future!

The Dragons' Grant was launched in 2018 by the Value-Based Health Care Center Europe, in the Netherlands and the the winners of the Dragons' Grant will gain automatic participation in the international VBHC Dragons' Grant in Amerongen, The Netherlands, on May 14th 2024, besides personalized coaching sessions from VBHC Ambassadors and VBHC Center Europe worth 10 000\$.

This booklet brings a summary of the nominees for this 1st Dragons' Grant of the Americas and will help participants in their interaction with them and in voting for your favorite initiative!

We welcome all participants and are excited to announce and recognize the winners of the Americas VBHC Dragons Grant & Endorsement 2024 at the event!



EVA VILLALBA
SUMMIT CO-CHAIR
Non-voting jury member



DR. MARCIA MAKDISSE
SUMMIT CO-CHAIR
Non-voting jury member

1ST EDITION OF THE AMERICAS DRAGONS' GRANT

PRESENTED IN PARTNERSHIP WITH
VBHC CENTER EUROPE



FACTSHEET: INTERNATIONAL DRAGONS' GRANT

Previous grant winners:



Previous endorsement winners:



ValueBased
HealthCare

Center
Europe

1ST EDITION OF THE AMERICAS DRAGONS' GRANT

PRESENTED IN PARTNERSHIP WITH
VBHC CENTER EUROPE



FACTSHEET: INTERNATIONAL DRAGONS' GRANT

Six years of recognition and endorsement of Value-Based Healthcare Implementation

Trends: VBHC Dragons Grant & Endorsement



ValueBased
HealthCare

Center
Europe

1ST EDITION OF THE AMERICAS DRAGONS' GRANT NOMINEE #1

CONTINUUM

The CONTINUUM project seeks to understand how advanced digital technology can help health professionals and patients suffering from multiple serious medical conditions to jointly manage their treatment plan at home to reduce hospital readmissions.



MEDTEQ⁺
L'INNOVATION POUR LA SANTÉ
INNOVATION FOR HEALTH



**Boehringer
Ingelheim**



CHUM
Centre hospitalier
de l'Université de Montréal

CRCHUM

CENTRE DE RECHERCHE



GREYBOX

1ST EDITION OF THE AMERICAS DRAGONS' GRANT NOMINEE #1

CONTINUUM

The CONTINUUM project seeks to understand how advanced digital technology can help health professionals and patients suffering from multiple serious medical conditions to jointly manage their treatment plan at home to reduce hospital readmissions. The success of the program is the result of a collaborative effort with a public/private partnership between the CHUM, the CHUM Research Centre, MEDTEQ+, Greybox Solutions Inc., and Boehringer Ingelheim (Canada) Ltd.

The use and implementation of digital health solutions in the management of chronic disease is increasing, but very few studies have demonstrated their impact on the health care system particularly in reducing some of the cost drivers associated with hospitalization. As heart failure is one of the leading causes of hospitalization in Québec and across Canada, the CONTINUUM program developed a mobile app for remote patient monitoring (RPM) and a digital therapeutics (DTx) solution aimed at assisting clinicians in medication optimization and preventing hospitalizations among HF outpatients. This project was led by the Centre hospitalier de l'Université de Montréal (CHUM), with the support of private and public partnership. The program is based on the Greybox Solutions' Takecare platform, it included:

1. A self-care app via smartphone or tablet where patients entered vital signs, weight, and heart failure symptoms;
2. Remote monitoring of these data by the CHUM's clinical nurses;
3. Digital therapeutics automated medication suggestions sent to the treating medical team; and
4. Heart failure educational modules for patients

1ST EDITION OF THE AMERICAS DRAGONS' GRANT NOMINEE #1

CONTINUUM (CONT'D)

The CONTINUUM program included a 3-month randomized controlled trial evaluating the risk of hospitalization of heart failure outpatients versus standard of care alone. The preliminary results were presented at the American Heart Associations' Scientific Sessions in Philadelphia in November of 2023. A significant reduction in the number of emergency room visits and/or hospitalizations and demonstrated a 23% reduction in healthcare costs.

Preliminary Results

The preliminary results show that the number of ER visits and/or hospitalizations (all cause) per patient was 0.19 ± 0.47 for the intervention group and 0.55 ± 0.89 for the control one ($P=0.05$). Survival analysis showed a trend in favour of the intervention group (95 days (CI95% 87-104) vs 78 days (CI95% 68-89); $P=0.08$). The total cost of healthcare consumption (hospitalizations + ER visits) in the intervention group was \$134,088 CAD vs \$174,924 CAD in the control group (+30%).

(Further preliminary results have been accepted for publication but are under embargo at this time.) In addition to the impact on emergency visits and hospitalization, the program demonstrated impact on quality of life, treatment optimization and compliance.

1ST EDITION OF THE AMERICAS DRAGONS' GRANT NOMINEE #2

A CONSERVATIVE CARE PROGRAM FOR PATIENTS WITH CHRONIC KIDNEY DISEASE (CKD)

Coordinated multidisciplinary care to slow down CKD progression and prepare patients to start dialysis, prioritizing peritoneal dialysis, to reduce hospitalizations and favour kidney transplantation.



1ST EDITION OF THE AMERICAS DRAGONS' GRANT NOMINEE #2

A CONSERVATIVE CARE PROGRAM FOR PATIENTS WITH CHRONIC KIDNEY DISEASE (CKD)

To slow down loss of kidney function, timely and adequately prepared entry into dialysis therapies, prioritize peritoneal dialysis, reduce hospitalizations and favour kidney transplantation.

In Brazil, in both in public and private sectors - the majority of CKD cases have a late diagnosis, resulting in costly emergency treatments and complications, particularly after the Covid-19 pandemic, with an increase in the complexity of untreated cases. NefroClínicas' approach highlights the importance of prevention and early treatment of CKD. It emphasizes the need for preventive measures, from clinical monitoring to dialysis and transplant options, understood as the "Chronic Kidney Disease Care Pathway."

When entering the Care Pathway, the patient is linked to a reference nephrologist and to a nurse navigator. Furthermore, assessments by psychologists, nutritionists and physiotherapists are included in the program, at a frequency defined by the stage of CKD or the individual patient needs. A social worker is responsible for processing the patient's registration process on the national transplant list, so that they are ready to join the Brazilian National Transplantation Program.

For the year 2024, we continue with the strategy of horizontal expansion, closing new partnerships, with new health plans, to cover a greater number of patients with the same medical condition.

1ST EDITION OF THE AMERICAS DRAGONS' GRANT NOMINEE #2

A CONSERVATIVE CARE PROGRAM FOR PATIENTS WITH CHRONIC KIDNEY DISEASE (CKD)

Preliminary Results

Costs not measured yet.

In our discussions with partner operators, we have demonstrated “avoided cost” or waste reduction through the indicators obtained. This can be verified by comparing the numbers usually measured by the healthcare market, whether in the public or private sector. Although we are not yet able to express these costs in financial orders of magnitude, we can present indirect information that, despite not presenting monetary references, shows a clear reduction in expenses and significant avoided costs. This can be seen in the indicator Hospitalization Rate of Patients Under Treatment (target contracted: less than or equal to 25%), where we found a rate of only 3.9% of hospitalizations in December/2023, among patients in the managed portfolio. If we compare with market data, where numbers above 20%, 25% or more are admitted, we see substantial savings in favor of the system. According to information from SBN – Brazilian Society of Nephrology “a hospitalized patient costs five times more than the patient treated in the clinic, the government loses a lot of money leaving the patient hospitalized, occupying a hospital bed” (SBN Informa Magazine - Year 25 | n° 114; April May June|2018).

1ST EDITION OF THE AMERICAS DRAGONS' GRANT NOMINEE #3

ENDOMETRIOSIS CARE PATHWAY

A care pathway to fully address diagnosis, treatment and post-intervention follow-up of patients with endometriosis aimed to optimize quality of life, manage symptoms and address emotional issues while monitoring long-term outcomes.

Hospital
 **Christóvão
Da Gama**

1ST EDITION OF THE AMERICAS DRAGONS' GRANT NOMINEES #3

ENDOMETRIOSIS CARE PATHWAY

This care pathway dedicated to endometriosis is unique in its offer of a comprehensive and personalized approach to a complex condition. Its scope ranges from diagnosis to treatment and post-intervention follow-up, aiming to optimize the patient's quality of life, control pain, address emotional issues and monitor long-term outcomes. By prioritizing the patient and integrating disciplines, this approach aims to offer comprehensive support, promoting effective, patient-centered outcomes. Upon receiving the diagnosis, the patient who agrees to participate is welcomed by the nurse navigator. Detailing the process, she leads the application of health questionnaires and the EQ5D-3L. At this point, the patient gains access to a direct communication channel with the nurse to clarify doubts or make requests, such as scheduling appointments and exams. Over the course of 5 years, the patient is monitored through scheduled questionnaires, specialized consultations and specific exams for her journey. Any significant deviation in the answers given by the patient, the multidisciplinary team is called to direct the relevant care, ensuring personalized and efficient management of endometriosis. Since its implementation in August 2022, the Endometriosis Care Pathway has welcomed 176 patients by December 2023, standing out as a comprehensive initiative. With the collaboration of not only expert gynecologists but also a colorectal surgeon, this approach stands out as a significant contribution. The nurse navigator plays a central role, connecting patients to the medical team, elevating the care experience to a level of excellence. With a multidisciplinary approach that includes nutritionists, psychologists and psychiatrists, the Care Pathway responds in a personalized and efficient way to individual needs.

1ST EDITION OF THE AMERICAS DRAGONS' GRANT NOMINEE #3

ENDOMETRIOSIS CARE PATHWAY

Preliminary Results

Of the 176 cases, 89% were advised to undergo a surgical approach, while 11% followed a clinical treatment path, demonstrating a diversified and adaptable offer. The predominant pain-focused complaints, from menstrual cramps to dyspareunia, were managed with remarkable effectiveness. In the pain assessment, initially recorded at an average of 9 on a scale of 0 to 10, there was a notable reduction to 1 after the first year. Quality of life, assessed from 0 to 100, starting from worst health to peak well-being, had a pre-treatment average of 70. After one year, it reached an average of 90, revealing a substantial improvement in the patients' well-being. This collective effort, permeated by the dedication and expertise of the team, aims not only for clinical excellence, but also aims to inspire as a notable example of integrated care. On average, patients lived with signs and symptoms of endometriosis for 5 years, seeking treatment for 2 years. It is notable that as the time with signs and symptoms increases, complications related to endometriosis become more significant, demanding a more complex approach. In this context, one of the Care Line's primary objectives is to reduce this time interval, not only to mitigate complications, but also to optimize the costs associated with treating this health condition.

1ST EDITION OF THE AMERICAS DRAGONS' GRANT NOMINEE #4

A 90-DAY EPISODIC BUNDLE TO IMPROVE CARE IN THE SURGICAL TREATMENT OF LOW BACK PAIN

A model co-designed with the care team to improve the quality of surgical care of lumbosacral radicular pain to optimize the appropriateness of care, patient experience and outcomes, and costs.



HOSPITAL
MÃE DE DEUS
SISTEMA DE SAÚDE MÃE DE DEUS

1ST EDITION OF THE AMERICAS DRAGONS' GRANT NOMINEE #4

A 90-DAY EPISODIC BUNDLE TO IMPROVE CARE IN THE SURGICAL TREATMENT OF LOW BACK PAIN

The VBHC initiative for the surgical treatment of lumbosacral radicular pain stands out for its comprehensive and unique approach. The main purpose is to improve the patient experience, achieve high-quality clinical outcomes and optimize costs throughout the care cycle, with a focus on the sustainability of the healthcare system. The difference between this initiative lies in the formation of a multidisciplinary team that coordinates patient care from diagnosis to post-operative care.

This holistic approach allows for a personalized and efficient approach, aligned with the VBHC philosophy. Collaboration between different medical specialties and healthcare professionals results in more effective value delivery. The relevance of the initiative is highlighted by the growing demand for patient-centered and results-oriented healthcare approaches. By focusing attention on lumbosacral radicular pain, a common and often debilitating condition, the initiative aims to improve patients' quality of life, reduce pain, and enhance functional capacity using patient-reported outcome measures (PROMs). Active patient involvement is essential to the success of the initiative.

Patients actively participate in decisions, receive clear information and support throughout the care cycle, contributing to a more satisfactory experience and more positive results. The methods employed include the implementation of standardized clinical protocols, the use of innovative technologies to coordinate care, and the continuous analysis of data to evaluate performance and identify areas for improvement. This evidence-based approach ensures the effectiveness and efficiency of treatment by adapting to individual patient needs.

1ST EDITION OF THE AMERICAS DRAGONS' GRANT NOMINEE #4

A 90-DAY EPISODIC BUNDLE TO IMPROVE CARE IN THE SURGICAL TREATMENT OF LOW BACK PAIN

The dimension of the initiative covers the entire cycle of care, from initial assessment to post-surgical follow-up for 90 days. This ensures a comprehensive approach not only focused on acute treatment, but also on preventing complications and promoting long-term health.

Preliminary results

A significant improvement in patient satisfaction, a reduction in postoperative recovery time and a decrease in costs related to the treatment of lumbosacral radicular pain are observed. These results highlight the potential of VBHC as an effective approach to improving the quality and efficiency of healthcare. Currently, the initiative has 10 completed patients and 12 in post-surgical follow-up, totaling 22 patients. Of these, only 6 (27.3%) are female, and the average body mass index (BMI) is 31.47 kg/m².

Preliminary results demonstrate functional improvements, with an ODI delta of 21.64, and patient experience, with an average satisfaction score between 9 and 10 among patients who completed the journey. These initial results indicate the promising success of the initiative. These data highlight the potential effectiveness of VBHC amid the financial and demographic challenges facing the healthcare system today.

1ST EDITION OF THE AMERICAS DRAGONS' GRANT NOMINEE #5

A DROP OF EINSTEIN FOR EVERY BRAZILIAN: COORDINATED AND SUSTAINABLE CARE FOR ORGANIZATIONS & PEOPLE TO LIVE THEIR BEST LIVES

To seek equity through a health service that promotes connection in a humanized and integrated way that warrants a comprehensive and meaningful experience, both in person and digitally.



ALBERT EINSTEIN

SOCIEDADE BENEFICENTE ISRAELITA BRASILEIRA

1ST EDITION OF THE AMERICAS DRAGONS' GRANT NOMINEE #5

A DROP OF EINSTEIN FOR EVERY BRAZILIAN: COORDINATED AND SUSTAINABLE CARE FOR ORGANIZATIONS & PEOPLE TO LIVE THEIR BEST LIVES

Market pressures and the level of transformation in the healthcare sector motivated Einstein to take steps towards the population health of its employees and dependents. Thus, the Integrated Care Project was created with the purpose of “Seeking equity through a service that promotes connection in a humanized and integrated way with the guarantee of longitudinal and meaningful experience both in person and digitally. Integrated Care must be data-driven, with cost-effectiveness as a component, in delivering value driven by the quintuple aim so people can live their best life.

From Quintuple Aim, value delivery will be evaluated and defined based on the pillars: population health, experience with care (beneficiaries and health professionals), cost-effectiveness and equity: People will have access to a service with quality and safety of Einstein care, a fluid journey and relevant and equitable care according to your needs; from the point of view of the paying source, Einstein will enable optimal value delivery, guaranteeing the sustainability of the healthcare ecosystem and accident control; from the employer's point of view, there will be the possibility of knowing the health status of its employees with predictability and control of the quality of care, outcomes and associated costs, enabling a connection with the ESG strategy and social impact as health promoters for its employees.

In the first phase of Minimum Viable Product (MVP), which will begin in February 2024, a population of around 3,000 Einstein employees will be involved in initiatives leveraged with Integrated Care at an Einstein Clinic in the neighbourhood of Santana, São Paulo. Actions developed by teams structured into 8 squads will be implemented, using agile methodology: Patient experience and onboarding, Care team, Pathway/protocols, Clinical staff engagement, Selection of networks/providers, Data/technology gearing, Value delivery and Economic viability.

1ST EDITION OF THE AMERICAS DRAGONS' GRANT NOMINEE #5

A DROP OF EINSTEIN FOR EVERY BRAZILIAN: COORDINATED AND SUSTAINABLE CARE FOR ORGANIZATIONS & PEOPLE TO LIVE THEIR BEST LIVES

Preliminary results

Implementation of an MVP for February 2024. Results not yet available.

The implementation of integrated health care can have a series of positive impacts on patients' clinical outcomes. It is expected that with the implementation of the project, an improvement in the population health of the beneficiaries will be achieved.

Coordinating prevention, screening and early intervention actions allows us to identify risk factors and health conditions before they become significant problems, resulting in more effective strategies to maintain health and prevent long-term complications.

Managing chronic conditions with constant monitoring and collaboration between healthcare professionals can improve the patient's quality of life, control disease progression and prevent complications. The integration of services such as therapy, rehabilitation and long-term care contributes to a comprehensive and streamlined approach.

Continuity of care is also improved with the integrated approach. This is especially crucial during transitions, such as moving a patient from primary to specialty care, or from inpatient to outpatient care. Efficient coordination in these transitions can reduce errors, ensure continuity of care, and promote a more fluid patient experience.

1ST EDITION OF THE AMERICAS DRAGONS' GRANT NOMINEE #6

PROxy NETWORK

The PROxy Network is a research platform dedicated to generating patient-centered evidence, highlighting outcomes relevant to patients over their journey and placing their voices at the forefront of healthcare decision-making. It integrates stakeholders, including over 100 community pharmacists, patient associations, and healthcare practitioners, pioneering patient-centered research in Canada.



1ST EDITION OF THE AMERICAS DRAGONS' GRANT NOMINEE #6

PROxy NETWORK

The PROxy Network is a scale up initiative as it focusses on scaling up multiple projects horizontally and vertically. It serves as an innovative research platform facilitating the generation of patient-centered evidence in a wide-range of medical conditions.

In Canada, the healthcare system is publicly funded, ensuring access to hospital and physician services without incurring direct charges to patient. Additionally, Canadian have the option to supplement their coverage with private insurance, which can help to cover treatment cost and address other healthcare needs. The access to innovative therapy involves a systematic evaluation of the clinical effectiveness, cost-effectiveness, and broader social implications to inform decision-making regarding the adoption, reimbursement, and utilization of a new healthcare technologies. Canadian payers and policy makers recognize the value of real-world evidence (RWE) and patient-reported outcomes (PROs) to better inform funding decisions. Despite the recognized need for real-world data, only few organized structures prospectively collect this type of data in Canada.

The PROxy Network is an innovative research platform that enables the generation of patient-centered evidence in wide-ranging medical conditions to help the decision-making process. PROs collected though the network includes but is not limited to quality of life, healthcare resource utilization, patient satisfaction, and caregiver burden. The PROxy Network goes beyond conventional methods of generating RWE, highlights the outcomes that matter most to patients and places their voice at the core of healthcare decisions. Empowering patients to actively engage in shared decision-making, our platform provides a direct conduit for patients to articulate their perceptions of health status, symptoms, and overall quality of life. PROs offer a direct assessment of the impact of healthcare interventions on patients' live, facilitating a more accurate evaluation of the value delivered by different treatments.

1ST EDITION OF THE AMERICAS DRAGONS' GRANT NOMINEE #6

PROxy NETWORK

This unique Canadian initiative stands out by involving interdisciplinary stakeholders, such as an established network of community pharmacists, patients' associations, or healthcare practitioners. The Network facilitates synergistic collaboration among multiple stakeholders to identify eligible patients for participation in a PROxy study. The population involved in our initiative includes all patients visiting community pharmacies, members of a patient's association, or visiting specialized clinics. Community pharmacists, patients' associations, or healthcare practitioners will approach the eligible patients and the PROxy Network team will obtain the patient's consent. Data are collected using the PROxy Network secured web-based platform.

Preliminary Results

A cross-sectional proof-of-concept study assessed the impact of migraine on work productivity and activity impairment of adults using triptans. Conducted in 10 pharmacies member of the PROxy Network recruited 100 patients, of which 92 met the inclusion criteria. Findings from this RWE study demonstrate that despite acute migraine treatment (triptan), patients' daily productivity remains significantly affected, especially those with chronic migraine. Although Canada offers preventive treatments for chronic migraine, their limited accessibility due to high costs affect their usage. This study provides crucial evidence for both public and private payers, underscoring migraine's real impact and urging discussions on reimbursement criteria of innovative migraine treatment.

1ST EDITION OF THE AMERICAS DRAGONS' GRANT NOMINEE #7

PREDICTIVE MODEL BASED ON MACHINE LEARNING FOR CHRONIC LOW BACK PAIN

Our initiative is unique in that it offers a predictive model based on machine learning for selecting patients with high-risk chronic low back pain to be allocated into integrated practice units within a public health care network.



1ST EDITION OF THE AMERICAS DRAGONS' GRANT NOMINEE #7

PREDICTIVE MODEL BASED ON MACHINE LEARNING FOR CHRONIC LOW BACK PAIN

Our purpose is to offer equitable healthcare and provide quality of life for people suffering from chronic low back pain using artificial intelligence tools with the expectation of making the healthcare network a connected and efficient system for what matters to patients. Guiding purpose is different from objectives.

Our approach offers a comprehensive care pathway focused on biopsychosocial principles for a period of 12 months as the primary outcome, based on standardized measurement of outcomes using the International Consortium for Health Outcomes Measurement (ICHOM) set for low back pain. Patients sign the informed consent, followed by severity of disease stratification into mild, moderate and severe cases using the verbal analogue pain scales, Oswestry disability index and quality of life using the EQ-5D-3L. It then stratifies the risk of chronicity using the STarTBack scales (individual cases) and also Örebro (cases evaluated in a group of patients) to identify low, medium and high risk. Based on the classifications carried out, we allocate patients into face-to-face healthcare episodes, specific and focused on kinesiotherapy with manual therapy for periods of 90 days, with weekly reassessments and we continue for a maintenance period of 9 months, with reassessments in six months to complete 12 months of standardized care. During the twelve months, imaging exams are evaluated at the beginning of the stratification for moderate to severe cases with measurement of parameters of the intervertebral disc, spinal canal, anteroposterior sagittal displacement and their respective classifications.

All information is entered into a RedCap protocol, all patient data is anonymized according to general data protection law. An artificial intelligence system of neural networks with semi-supervised control is used.

1ST EDITION OF THE AMERICAS DRAGONS' GRANT NOMINEE #7

PREDICTIVE MODEL BASED ON MACHINE LEARNING FOR CHRONIC LOW BACK PAIN

Expected results

Improvement in pain, functionality and quality of life within the proposed period of 12 months with the optimization of allocation for quick access to selected episodes in the lines of care outlined for patients with low back pain in the health care network.

This includes access to physical therapy within 7 days of episode allocation, access to a hospital emergency room within 48 hours for cases of cauda equina syndrome or progressive motor deficit, access to an integrated practice unit to receive infiltration/block resources or spinal surgeries within the target period of 30 days for cases appropriately selected based on evidence-based clinical relevance.

We hope that the patient's experience can be satisfactory with an improved feeling of care, welcoming and perception of engagement from the care team. We also hope that the clinical team can perceive the effectiveness of care by offering relevant care at an appropriate time in an equitable manner, improving team spirit. We hope to improve the intersectoral management processes of the healthcare network, enabling managers to use resources more assertively and based on reliable data.

We also hope that artificial intelligence capabilities can be useful in offering transparent and reliable information for the predictive aspects of predictive decision making and provide well-being for healthcare professionals to exercise their analytical skills in making final decisions for their patients. As a final objective, we hope that patients feel cared for in their outcomes of interest and that the health system is able to fulfill its purpose of achieving social well-being in a sustainable way.

1ST EDITION OF THE AMERICAS DRAGONS' GRANT NOMINEE #8

A VALUE-BASED CARE SYSTEM FOR LOW BACK PAIN

Unimed Porto Alegre, a Brazilian health insurance plan with over 650,000 beneficiaries, co-created with a multidisciplinary team an integrated care system that operates through a network aimed at improving care experience & quality of life of people with low back pain.



1ST EDITION OF THE AMERICAS DRAGONS' GRANT NOMINEE #8

A VALUE-BASED CARE SYSTEM FOR LOW BACK PAIN

Low back pain is one of the biggest causes of disability and medical visits, characterized by a wide variety of practices and costs that do not necessarily reflect adequate quality of care or delivery of value. Many patients find themselves unassisted, lost in the healthcare system and without knowing who to turn to, resulting in fragmented and low-resolution care. Often, these patients consult with several health professionals, undergo numerous exams and procedures, without experiencing significant clinical improvements. The social impact is immense, with functional disability and limiting pain affecting work capacity, social life and, in many cases, generating dependence on opioids. This is an experience that clearly does not add value and highlights the shortcomings of the current healthcare system.

Unimed Porto Alegre, a medical cooperative and healthcare operator with more than 650 thousand beneficiaries, is proposing an innovative approach to redefine the patient journey through the co-creation of an integrated value-based care system, operating as a network with the purpose to improve the quality of life of people suffering from low back pain. Our purpose is to make a difference in the care of people, taking advantage of our privileged position in articulation with the entire health system to become the true agents of this transformation, influencing and promoting the delivery of value in health.

Our initiative, led by Valor Office, involved a technical team made up of healthcare professionals with recognized knowledge in low back pain, together with specialist services, to co-design episodes of care focused on relevance and outcomes that really matter to patients, as determined by the "experience groups". By mapping the low back pain patient journey across care episodes, we are able to build continuous and coordinated care networks, with patient navigation and interoperability of data and clinical information.

1ST EDITION OF THE AMERICAS DRAGONS' GRANT NOMINEE #8

A VALUE-BASED CARE SYSTEM FOR LOW BACK PAIN

With 17 outcome indicators distributed across four dimensions - outcome, experience, cost drivers and process - our network will provide coordinated, comprehensive and patient-centered care, emphasizing timely and pertinent access. Measuring and comparing results among network members and with data from the literature will allow the development of continuous cycles of improvement and the evolution towards value-based competition, scaling to a true VBHC healthcare ecosystem. Principles of efficient resource management, continuous learning, shared risk and performance bonuses are integrated into our approach.

With the launch of the value-based low back pain care system scheduled for March 2024, Unimed Porto Alegre hopes to impact the lives of at least 2 thousand users over the next 5 years, improving their quality of life and reintegrating them into the job market and social life through an integrated value-based care network

Expected Results

Improved quality of life (EQ5D3L) with recovery of functionality (ODI) and reduction of pain (EVN).

Reduction in emergency room visits, hospitalizations related to low back pain, rate of procedures to control low back pain and, mainly, reduction in surgical procedures with no relevance to care.

Through permanent contact with the navigator and cognitive behavioral therapies, it is expected that the network will help to achieve greater adherence to the care plan, as well as encourage patients to change their lifestyle to prevent new episodes. Contacting the patient to collect experience and feedback will help in realizing greater value for the patient.

1ST EDITION OF THE AMERICAS DRAGONS' GRANT NOMINEE #9

THE RIGHT CARE AT THE RIGHT PLACE: VALUE-BASED COMPARISON OF EMERGENCY DEPARTMENTS, WALK-IN CLINICS AND PRIMARY CARE PRACTICES FOR LOW- ACUITY PATIENTS

Our initiative seeks to identify the alternative that provides the best value to a population that often presents to the emergency departments (ED). The value of care will be compared in 3 different settings (ED, walk-in clinics and primary care), from patient and healthcare system perspectives, to guide healthcare policy and system organization.



UNIVERSITÉ
LAVAL

CENTRE DE
RECHERCHE

CHU
de Québec
Université Laval

1ST EDITION OF THE AMERICAS DRAGONS' GRANT NOMINEE #9

THE RIGHT CARE AT THE RIGHT PLACE: VALUE-BASED COMPARISON OF EMERGENCY DEPARTMENTS, WALK-IN CLINICS AND PRIMARY CARE PRACTICES FOR LOW- ACUITY PATIENTS

Our initiative is the most comprehensive and extensive ever conducted on this crucial subject for our healthcare systems. It brings together 14 institutions from Québec and Ontario, including emergency departments, primary care practices, walk-in clinics, and urgent care centers. It not only assesses the value of care provided through traditional in-person consultation methods but also investigates telemedicine evaluation.

Our goal is to compare the value of the care administered in emergency departments, walk-in clinics and primary care practices from both patient and healthcare system perspectives to guide healthcare policy and system organization.

Emergency departments (ED) are specialized, and costly resources designed to provide care for patients with urgent or life-threatening conditions. However, low-acuity ambulatory emergency patients (i.e. patients consulting for health issues that do not require being kept for observation on a stretcher) still represent 30 to 60% of all ED visits in Canada. While some identify these visits as a potential source of ED overuse or misuse, others argue that patient evaluation in the ED may be more cost-effective. The debate is even more controversial as the COVID-19 pandemic has shifted primary care practices and walk-in clinics partly towards telemedicine (i.e. remote or virtual consultation by phone or videoconferencing), a presumably more convenient and efficient consultation modality.

1ST EDITION OF THE AMERICAS DRAGONS' GRANT NOMINEE #9

THE RIGHT CARE AT THE RIGHT PLACE: VALUE-BASED COMPARISON OF EMERGENCY DEPARTMENTS, WALK-IN CLINICS AND PRIMARY CARE PRACTICES FOR LOW- ACUITY PATIENTS

While Canadian jurisdictions are struggling with unceasing increases in their healthcare expenditures, the most efficient care pathways must be identified and strengthened in order to ensure sustainable and viable health systems for all Canadians. By comparing the value (i.e. health outcomes and costs) of the care given in person or by telemedicine in EDs, walk-in clinics and primary care practices for ambulatory emergency patients, our project will enable decision- and policy-makers to:

- 1) determine the most efficient care settings for this population; and
- 2) promulgate value-centred reforms where ambulatory patients with acute unexpected needs will receive the best urgent care at the lowest cost. We believe this will represent a major contribution to the sustainability and funding of Canadian health systems while fulfilling their mission of improving the health of the population.

Expected Results

At the end of the project, a steering committee composed of knowledge users and scientists will oversee the knowledge translation strategies. These strategies will include: 1) a project website;

2) a social media dissemination strategy;

3) presentations at national and international conferences and to supporting organizations (e.g., CIHI); and

4) publications in high-impact journals. Finally, as mentioned above, we will organize a two-day virtual symposium where patients, clinicians, and policymakers will be presented with concrete recommendations for Canadian healthcare systems based on our results. We believe this approach will stimulate value improvements and inspire those providing care to ambulatory patients with acute conditions.

1ST EDITION OF THE AMERICAS DRAGONS' GRANT



MEET THE DRAGONS



DR. SHANNON JACKSON
PROVIDENCE HEALTH



MATHEUS VIEIRA
ROCHE DIAGNOSTICS CANADA



PROF. FRED VAN EENENNAAM
VBHC CENTER EUROPE



HON. FRED HORNE
HEALTH POLICY ADVISOR

1ST EDITION OF THE AMERICAS DRAGONS' GRANT



MEET THE DRAGONS



PROF. ALICE ANDREWS
VALUE INSTITUTE FOR HEALTH & CARE



KARINE LEPAGE
CIUSSS CENTRE-OUEST



LOUISE BINDER
PATIENT ADVOCATE



GENEVIÈVE LAVERTU
JOHNSON & JOHNSON MEDTECH

1ST EDITION OF THE AMERICAS DRAGONS' GRANT



MEET THE DRAGONS



DR. HENRIQUE DIEGOLI
JOINVASC STROKE PROGRAM



PAUL VAN DER NAT
RADBOUD UNIVERSITY



SIR MUIR GRAY
OXFORD VALUE & STEWARDSHIP PROGRAM

VBHC SUMMIT OF THE AMERICAS

1ST EDITION OF THE AMERICAS DRAGONS' GRANT

April 17-19, 2024

Montréal, Québec, Canada

Presented by:



Centre intégré
universitaire de santé
et de services sociaux
du Centre-Ouest-
de-l'île-de-Montréal

Québec 

Dragons' Grant & Endorsement in partnership with:

ValueBased | Center
HealthCare | Europe

Gold sponsors:

Johnson & Johnson
Innovative Medicine



Silver sponsor:



Bronze sponsors:



VBHC SUMMIT OF THE AMERICAS

1ST EDITION OF THE AMERICAS DRAGONS' GRANT

2024



APRIL 17-19, 2024
MONTREAL, QUEBEC, CANADA

#VBHCSUMMITOFTHEAMERICAS