

JOINT VALUE INITIATIVE

A (digital) patient-centered integrated practice unit creating and delivering lifelong value for inflammatory arthritis

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INTRODUCTION



Inflammatory arthritis (IA) patient population.



Experience restrictions in daily living as a consequence of their chronic illness.

Impact of IA is not limited to patients' overall quality of life:
0.74% of healthcare costs in The Netherlands
20-70% work-disabled

Despite advances in clinical outcomes, the fragmented care cycle with scarce data on routinely measured patient-reported outcomes (PROs) indicates a need for improvement within and across the IA patient journey.

AIM

To establish an (digital) integrated practice unit (IPU) named "Joint Value" that aims to continuously create and deliver better, and more value for patients as well as caregivers.

METHODS

To achieve this goal we conducted three main programs:

I. Joint referral:

Integrated care network of regional hospitals & primary care centers



Primary care patients suspected of IA ≥ 18 years old | Clustered randomized clinical trial 296 patients per group (power 0.8)
 Primary outcome: Percentage of patients diagnosed with an inflammatory rheumatic disease.
 Secondary outcomes: Quality of life (EQ-5D), work productivity (IPCO) & healthcare costs (MCO).

II. Joint compassion:

Implementation ICHOM IA standard set and adding value



III. Joint decision support:

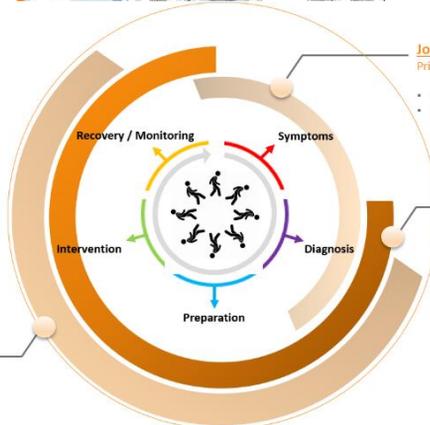
Digital support for patients & caregivers



RESULTS



IPU JOINT VALUE



Joint Referral

Primary care

- 40-80% referral reduction
- Cost-effective referral strategy (ICER €17k)

Joint Decision Support

Secondary care, nursing home, and home care

- Upscalable digital support system including integrated PROs
- Remote patient home-monitoring and coaching
- Ultimately impact on societal costs

Joint Compassion

Secondary care

- >800 longitudinally measured PROs
- 70% reduction in medical costs

CONCLUSIONS

Joint Value represents an unique (digital) IPU that connects patients, primary care centers and hospitals by implementing Porter's VBHC strategy. Due to this intensive and close collaboration we are able to:

- Continuously deliver and improve care that is of additive value for IA patients;
- Contribute to the national strategy of delivering 'the right care, at the right place, at reasonable costs';
- Stimulate active patient participation;
- Provide patients and caregivers with complete detailed outcome information in- & outside the consultation room.

Due to our upscalable digital support system, other indications and organizations can benefit from this initiative.