

Triple Aim Initiative Tackles Health Care Costs, Care, and Outcomes

By Eleanor Littman and Christine Sippl

What if we could design a health care system in which every piece worked in tandem to prevent illnesses and hospitalizations? What if that system were driven by the true needs of patients, helping them find and take advantage of every opportunity to be healthier (instead of just treating them after they become sick)? And what if you — the patient — left every encounter with your health care provider thinking, “They remember me; they’re doing everything they can to help me and my family stay healthy”?

That system does exist today, but only in small pockets across the country. Thanks to a national Triple Aim initiative sponsored by the Institute for Healthcare Improvement, Santa Cruz County has joined 38 other communities in North America and 19 international sites to compare ideas on how we can improve our local health care system.

The Triple Aim initiative takes its name from pursuing three key aspects of health care at the same time: reducing **costs**, improving how individual patients experience health **care**, and improving the health of entire populations (not just individuals). In the current competitive health care environment, it is extremely difficult to improve all three of these factors at the same time. The communities that have made progress on all three fronts have done so because they have a secret weapon — an agency or group that acts as an “integrator,” bringing forth and acting upon shared community values about health care, goals and resources.

In Santa Cruz County, the Health Improvement Partnership (HIP) plays this role by representing 23 different health care organizations. Building on a long and successful track record of collaboration among many of these players, HIP has provided a venue for tackling some tough health and social issues that affect all of us. We have joined forces again to participate in the national Triple Aim initiative.

Starting this fall, we will be testing a “patient navigator” system in which a trained case manager helps uninsured adults who are hospitalized in any of Santa Cruz County’s three hospitals to access and coordinate all recommended follow-up care for a full recovery, including primary care and specialized needs such as housing assistance or care for underlying mental health disorders. Through this program, patients who received sporadic and intermittent care before they were hospitalized will now have a consistent connection to a medical “home” where they are known and remembered, not just treated. By reducing the need for costly hospital re-admissions, we expect this program to save costs, improve the patient’s experience of care and yield better, more lasting health outcomes for the uninsured population.

We don’t know exactly what shape national health care reform will take, or how long it will take to affect costs and care across the country. But we do know that we can make improvements right here, right now. Our ultimate goal is that everyone in Santa Cruz County will someday benefit by receiving the same coordinated, quality care — at lower cost — that the Triple Aim model shows is within our reach.