Group Health research explores what's next in health care reform

Leading in population health management

We do practical research to help our patients, our communities, and the world to stay healthy.

- Since 1983, Group Health has had our own non-profit, public-domain research institute to improve health and health care for people everywhere.

- Our scientists are committed to doing research that answers pressing questions for the public good.

- We study what works—& what doesn't—to achieve the most important outcome for people everywhere: *good health.*

We bring depth and efficiency to research on public health:

- 95% of our $45-million annual budget comes from research grants and contracts, including seven from the Affordable Care Act-funded Patient-Centered Outcomes Research Institute.

- Our dozens of interdisciplinary scientists have appointments at the University of Washington and other leading institutions such as Fred Hutchinson Cancer Center and University of California.

- For diversity and statistical power, we partner with Kaiser and others in the HMO Research Network and other national and international collaborations.

What's next?

- The Affordable Care Act addressed coverage more than cost, but affordability must come next.

- Reform means providing care to more people than ever.

- Caring for all of them requires curbing costs and low-value care, which doesn't improve health and may actually be harmful.

Our research shows how to curb costs while improving care.

- We learn what it takes to translate new treatments efficiently into clinical care—and track effects on health outcomes.

- We study how Group Health avoids overdiagnosis and overtreatment (like overusing CT scans and opioids for chronic noncancer pain).

- We're evaluating Group Health's implementation of Choosing Wisely and value-based insurance design.

- In 2013, our research showed Group Health doubled colon cancer screening rates while cutting costs by using electronic health records and stepped care to reach out to patients overdue for screening.

Shared decision making

- Shared decision making helps people understand the value of their care and make the decisions that are right for them—so they don't get more or less care than they need.

- Group Health has delivered more decision aids to patients than has any other single system *in the world*. We've studied the impact and published in *Health Affairs*.

Patient-centered medical home

- The medical home is a way to coordinate and streamline care and ground it in primary care.

- In our ongoing evaluation of the medical home from Group Health to safety-net clinics, several projects stratify patients so they get the right level of care—a strategy known to yield cost savings, lower death rates, and improve patient outcomes.

Our research and practice on population health management includes:

- Chronic Care Model, team-based care, accountable care organizations, and integrating care for physical and mental health

- Peer support and self-management support for coping with chronic conditions

- End-of-life care and conversations

Our research makes a difference.

- Group Health's learning health system puts our findings into practice quickly.

- So Group Health patients, clinicians, and administrators reap the benefits.

And the benefits of our research reach far beyond Group Health.

- We publish often in *Annals of Internal Medicine, BMJ, Health Affairs, JAMA, The Lancet,* and *New England Journal of Medicine*

- We're covered often by *The Atlantic, Los Angeles Times, New York Times, NPR, Reuters, Seattle Times, TIME, Washington Post, Wall Street Journal,* and *USA TODAY*

- By finding practical ways to make health care more effective and efficient, we make it possible for more people around the country and the world to stay healthy and *get the care they need.*

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