ROAD TO RIGHT CARE TALK: PRESENTER NOTES AS OF 12.20.17



Slide 1:

Welcome and thank you for coming!

INTRODUCE YOURSELF AND YOUR RELATIONSHIP TO THE RIGHT CARE ALLIANCE. ADD ANY OTHER RELEVANT INFORMATION THAT MIGHT CONNECT YOU TO THIS AUDIENCE OR COMMUNITY

I am here today for two main reasons.

First, I want to tell you about the Right Care Alliance, why I am committed to the work we are doing; and why I believe it is a critical part of the radical transformation that has to happen it we want a healthcare system worthy of the ideals of this country.

Second, I want to recruit you to join us. Because we can’t do it without you.

TRANSITION: Before we get to that, though. I want to start with you and why you are here. To do that, I want to ask you to do a simple exercise



Slide 2

(EXPLAIN EXERCISE)

This is a paired exercise. You are going turn to the person sitting next to you and answer the following question:  
”What worries you most about our current health care system?”

I am going to give you a total of 4 minutes, so each person will have 2 minutes to share.

I will control the time and let you know when we are halfway done, so you can make sure you each have a turn to talk.

GIVE THEM A SIGN AT 2 MINUTES AND THEN LET THEM KNOW WHEN TIME IS UP.

Now I want to ask for some of you to share the headlines of your conversation. What came up in your conversation?

ONE AT A TIME ASK 2-3 PEOPLE TO SHARE THE HEADLINES FROM THEIR CONVERSATION. THANK THEM FOR SHARING.

TRANSITION: This is the foundation of the work; listening and sharing our personal stories and experience. I want to take a minute and share my story and what brought me to the work of the Right Care Alliance.



Slide 3:

TELL THE PERSONAL STORY OF WHAT BROUGHT YOU TO THIS WORK.

YOU WILL WANT TO CUSTOMIZE THIS SLIDE WITH A PERSONAL PICTURE OR SOMETHING THAT SYMBOLIZES A POINT IN YOUR STORY.

THE GOAL OF THE STORY IS TO PERSONALIZE WHAT LED YOU TO RCA

AND HOW IT ACTIVATED YOU TO WANT TO TRANSFORM THE SYSTEM.

TRANSITION: My experience led me to fully understand that our current system is broken and that I had to be part of the solution.



Slide 4:

Thinking back over the last year, we’ve seen that when tragedy strikes in the form of a hurricane or a mass shooting as a country and community we stand united.

In these moments, our differences disappear and we come together united by a shared fate. We find our common humanity.

This is how it should be with healthcare. In fact, our common biology is a key thing that unites us. We’ve all go the same parts when we put on a hospital gown.

TRANSITION: But unfortunately, the conversation about healthcare today in our country today is not about standing together, or about our shared humanity or connectedness.



Slide 5:

We are having a fractured conversation.

While we keep talking about various pieces of our health care challenges, we do not see or understand how it all works together to create a crisis that is greater than the sum of its parts.

Depending on who you are and what you do the conversation gets reduced to:

— Focusing on insurance or universal coverage

— Quality improvement initiatives

— Funding for groups or specialties

While all of these are important, it is a bit like the proverbial story of the blind men and the elephant. We are missing the big picture.

TRANSITION: Instead we end up polarized, debating reductionist points



Slide 6:

What we are experiencing in healthcare is a reflection of the crisis of our country writ large. We have lost the common thread that binds us together.

We’re screaming at one another. We are not listening. We are country deeply divided, a society in crisis.

TRANSITION: Healthcare holds both the reflection of the larger problem and the seeds of the promise for a brighter future. Let me explain what I mean.



Slide 7:

I believe that if you look at the health care a nation you can understand a great deal about a country. The health care system of a nation is a litmus test of sorts.

In how we care for one another, we reveal what matters to us as a country, what we hold most dear.

In our systems of health, we telegraph what we think both about the importance of the well-being of our fellow citizens and what role we believe health plays in our economy.

TRANSITION: And the choices we make today as a country about our health care serve as a barometer for the future of our nation



Slide 8:

So, if we want to heal what ails our country, I believe we must start with healthcare.

If we want to heal the rifts that divide our nation and move towards the founding promise of this country: towards life, liberty and the pursuit of happiness, we must start with healing the heart of health care. In fact, achieving the founding ideals of this country is not separate from, but dependent upon the health and healthcare of our nation.

TRANSITION: At this point, if you use our healthcare system as a lens to understand who we are and what we care about as a country, it is not a pretty picture. Not at all.



Slide 9:

If you look at our healthcare system, what you see is that it is fundamentally a system driven by money and profits, NOT health and well-being of the citizens.

While many of us will say the health care system is “not working,” in many ways it is working PERFECTLY for what it is intended to do in its current incarnation: **DRIVE PROFITS, NOT HEALTH.**

Looking at these headlines you can see the consequences of this system. This is a picture from an article in Fortune magazine of John Kapoor, the founder of Insys, an opioid manufacturer who was recently arrested on racketeering charges and blamed for bribing doctors to prescribe opioids which fueled the opioid epidemic. Ironically, this same man a year earlier was featured on the cover of Forbes as a financial hero and one of the “richest people in America.”

It is easy to look at this and say it is one bad actor in an otherwise ethical and healthy system. The truth is, his case is not all that unusual.

TRANSITION: In fact, the way that our current system is set up it is actually business as usual.



Slide 10:

The system itself is perpetuating the problem. It is a system that values profits and not patients.

This is the normal operating reality of medicine today. We are all victims of this reality, whether we are clinicians or patients. And it is not because the people in the system are bad people. Most doctors and nurses have good intentions, but they are in a system that incentivizes the wrong thing.

GIVE AN EXAMPLE OR TELL A STORY THAT GROUNDS THIS CONCEPT INTO REALITY:

-- HOW A DOCTOR EXPERIENCES THIS REALITY (EX: ORDERING MANY NOT NEEDED TESTS TO MEET A QUOTA)

-- HOW A PATIENT DOES (EX: NO TIME TO SPEND WITH A DOCTOR TO ACTUALLY CONNECT BECAUSE THEY ARE FOCUSED ON THEIR MEDICAL RECORDS AND SEEING MORE PATIENTS)

What this means is that we are all currently trapped in a system that DOES NOT SERVE ANYONE, not the patients nor the people who are supposed to care for them. And in the end, as clinicians and as patients we all feel alone and powerless to do anything to push against these larger forces.

TRANSITION: It is important to look at the big picture to really understand what is going on and how bad it truly is.



Slide 11: Here is the current reality. We have a system that provides neither health nor care. Costs are rising and care is decreasing.

TAKE TIME TO EXPLAIN THE VISUAL:

* Poor health
* Many people are getting TOO MUCH medicine, and that is making them sicker. (We call that overuse.)
* On the other side of the continuum, those with no money are not getting any care! (We call that underuse)
* We are in the midst of an epidemic of harm to patients
* The costs of care and of prescriptions are astronomical
* We are facing the highest level ever of physician burnout
* Underuse, those without money do not have access to care
* Out of control costs and tremendous waste.

This doesn’t just impact the health of our citizens, but the overall health of our country:

* Economic stagnation**:** Costs of health care are depressing take home wages for all but the very wealthy
* We are creating a situation where we see tremendous social inequality and financial insecurity

And we are actually unique in the world– uniquely bad. The US is ranked 11 out of 11 in an international comparison of health systems.

The bottom line is that individual CEOS, Big Pharma, and Health Insurance companies are getting richer, while overall America and Americans are getting sicker. Our overall system is corrupt and the health and well-being of the American people is for sale.

TRANSITION: Let me ground this reality in some recent numbers to help you understand what we are really talking about.



Slide 12:

* Health care premiums are expected to rise as much as 50% in 2018
* Even with the Affordable Care Act, 28 million Americans do not have health insurance.
* More than a million Americans lose their doctor to suicide each year
* 27% of Americans put off getting the health care they need due to cost
* Our life expectancy is the lowest out of 13 high-income OECD countries. In fact, America is the only country out of the 13 with a life expectancy below 80.

I want to be clear eyed about the dire reality of the situation. We cannot continue on this trajectory.

TRANSITION: And it is also important to point out, that modern medicine is capable of miraculous things.



Slide 13:

There are amazing actors in the system doing spectacular things.

We’ve cured diseases virtually eradicating polio and small pox.

The Cancer Moonshot is an exciting initiative that holds tremendous promise in the cancer field.

TRANSITION: And it is not just in the realm of cure and research where exciting things are happening.



Slide 14:

There are innovative groups with powerful ideas that are working to push against the dynamics that put profits ahead of patients. For example, let me tell you the story of Turntable Health.

The Turntable Health clinic in Las Vegas was an initiative was designed to be the next-generation medical clinic in Las Vegas. Founded as a primary care practice it looked to turn healthcare delivery on its head.

They did everything right. With support from the community, brilliant and focused leadership, and a clear vision for health care improvement, the clinic's founders, emphasized prevention and doctor-patient relationships. The clinic provided patients with easy access to care and ample face-to-face time with their doctor, for an affordable flat fee rather than paying doctors per service.

Turntable Health had better quality outcomes and higher patient satisfaction than any other clinic in Las Vegas. It was a medical success. But the insurance companies refused to work with the Turntable Health model. They demanded fee for service payments, their need for short-term profit overriding the founder’s long term vision for health. Turntable Health was forced to close earlier this year. The title of the article that was written about this was “How one US Clinic Disrupted Primary Care, Made Patients Healthier and Still Failed.”

(READ STORY HERE: <https://www.forbes.com/sites/robertpearl/2017/10/24/primary-care/#6e164cc62c0f)>

Here is the challenge for all the innovative ideas out there: our current system does not allow these bright spots to scale, or even survive. That’s what we want to change. We want to create a future where we can amplify and replicate what works, to allow the bright spots to become the norm. Our goal is to shift the corruption and poor results that are the dominant experience in our current system to create a different future.

TRANSITION: WE HAVE A VISON FOR THIS FUTURE: IT IS CALLED RIGHT CARE



Slide 15:

This is how we define Right Care.

Right Care is a human right. It places the health and wellbeing of patients first.

Achieving Right Care will require radically transforming how care is delivered and financed.

TRANSITION: So, what does that really look like?



Slide 16:

Right Care is a comprehensive vision that looks at the system holistically and how it needs to work together.

* It is grounded in the idea that healthcare is a human right.
* It is an honest and transparent system where corruption doesn’t exist,
* It is a system that is both affordable and effective where the cost of healthcare is not a barrier to living with good health.
* It is a system where patients feel empowered to speak up.
* There is universal coverage and hospitals that serve the communities.
* It brings healing and comfort to patients and satisfaction to clinicians; there is a restored relationship.
* We believe it is a powerful vision of the future, a vision that is uniquely American and speaks to the highest ideals of our country.

TRANSITION: The question is: how do we get there from here?



Slide 17:

These are the steps we will take to move towards our vision. Fundamentally, we believe we need to employ the tactics of movement building and organizing. Here’s what it looks like.

1. We start by Building a network of the engaged and enraged. This looks like recruiting people like you to build a network of local RCA Chapters across the country. We have 11 already in places like Boston, Chicago and Dallas.
2. We then organize and focus our efforts around key priorities: This looks like creating a national campaign that will focus on targeted issues. We are starting with the outrageous costs of prescription drugs.
3. Then we activate and unleash the power of the people. This will be in the form of a rapid response network that is able to be deployed and take local action on the ground in the ways that make the most sense and have the most impact. This may be: writing op-eds, hosting teach-ins, convening town hall meetings or showing up at protest demonstrations. Our goal will be to exert pressure for change from both inside and outside the system.
4. Through this work we will develop leaders, build our power and catalyze a social movement. As we raise awareness and harness the results of our actions, we will be able to continue to build our network.

This is our theory of how the change will happen.

TRANSITION: The truth is there’s only so much we can do as individuals, especially when we are sick enough to be under a doctor’s care. We need collective action.



Slide 18:

Together we are powerful.

Ultimately, we are building a powerful social movement comprised of:

* Doctors and healthcare professionals who are desperate to fix the system they are part of
* Students who want to be part of a system worthy of their ideals
* Patients and care givers who are harmed by this system
* Community activists who are committed to the health, success and prosperity of their communities

TRANSITION: Ultimately, to achieve our goal, the demand for change in our healthcare system must come from you, from me, from all of us, working together.



Slide 19:

*Because a truly transformed health system can only come about when both clinicians and the public perceive the current system’s failings, can conceive a radically better one, and then begin to work together to advocate for it.*

This means we will think national, but heal local.

It means we will exert pressure from both inside and outside the system

And it means that we start with sharing our stories, building trust and creating connections across groups.

Our first step involves going in to communities and having these types of conversations, helping people understand how bad our health care system really is and to understand what it will take to have a great system.

TRANSITION: This is not about making changes at the margins, this is about a radical transformation.



Slide 20:

We need nothing short of a healthcare revolution.

**And it has to come from us. ALL OF US.**

We can’t wait for someone to fix it “at the top:” HILARY CLINTON’S PLAN FAILED.

It can’t be solved from within:the ACA was created by catering to insurers and other actors in the current system. It’s not perfect.

This has to be a real movement, a movement that is willing to break glass, step on toes, and picket hospitals to force the deep change that is necessary.

**TRANSITION: WE ALREADY HAVE OUR FIRST TARGET**



Slide 21:

And this is our first deployment and where we are starting: focusing on out of control drug pricing.

We know people need medications and believe everybody should be able to access the pills they need.

We know it is a critical issue for people: Prescription spending is growing faster than any other part of the health care dollar and is currently nearly 20% of healthcare costs.

We also know it will be a major issue in the upcoming elections. So, it will be on people’s radars.

TRANSITION: We began this focus during Right Care Action Week

NOTE TO RCA TEAM: IS THIS STILL CORRECT INFO ON THE CAMPAIGN?



Slide 22:

These are pictures from our work across the country during Right Care Action Week. We organized multiple events in cities from DC to Dallas to Haiti!

We went to Farmer’s Markets, met in hospitals with residents and asked patients to tell us what worries them most about health care costs. The overall goal was to talk honestly about the current situation, to create connections and to build our membership in the Right Care Alliance.

TRANSITION: Now we need you to be a part of this.



Slide 23:

Starting right where you are today, by agreeing to no longer stay silent on the sidelines.

We are in a crisis and we will continue to suffer until we stand up. Together.

If what you’ve heard here today makes sense, then we invite you to join us.

We need you. Our country needs you.

Join a movement that is not afraid to look at the big picture and be honest about what is really going on. A movement that is working together to take collective action to heal the heart of healthcare.



Slide 24:

Here is how you do that:

1. Do not leave here tonight without signing up on the lists we have going around.
2. Agree to come to our next meeting. SHARE MEETING INFO

Once you sign up, a local RCA leader will reach out to you and keep you informed of what we are doing.

TRANSITION: I believe we are at a unique moment in the story of our country.

This is a moment to decide who we are as a people, and what fundamentally matters to us.



Slide 25:

Who are we if we are making people sicker, causing medical harm and bankrupting our citizens and our country in order squeeze more profits from the system?

I do not believe that is who we are. I believe we can be better.I believe we can shift the narrative to one that starts with the premise that a great nation is a healthy nation. A narrative that starts with the belief that a thriving country starts with healthy, strong individuals. And a narrative that creates an understanding that the collective health of the individuals that make up our nation impacts our economy, our democracy, and our moral leadership in the world. If we are to reach towards the larger values and ideals of our country (life, liberty and the pursuit of happiness), we MUST start at ground zero and transform our health care system from one that provides neither health nor care to one that is caring, compassionate and has connection at its heart.



Slide 26:

**So, join us.**

Link arms with the Right Care Alliance and together let’s build a healthcare system that is worthy of our highest ideals as individuals, communities and a nation.

I am happy to answer any questions afterwards.

THANK YOU FOR COMING!