

# EHMA 2024

Shaping and managing  
innovative health ecosystems

## Managing the value of care in daily clinical practice:

Expert roadmap by the Dutch Value-Based Health Care network Linnean

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Politehnica University of Bucharest, Bucharest, Romania

#EHMA2024

# Relevance

Care organizations lack methods to differentiate efficient from inefficient care.

Value-based health care (VBHC) may help, however...

- It lacks tools for the thorough evaluation of its implementation;
- How to operationalize and measure the value equation is unknown.

$$\text{Value} = \frac{\text{Health Outcomes}}{\text{Cost}}$$

Care organizations need guidelines to steer on *both* patient outcomes *and* costs.

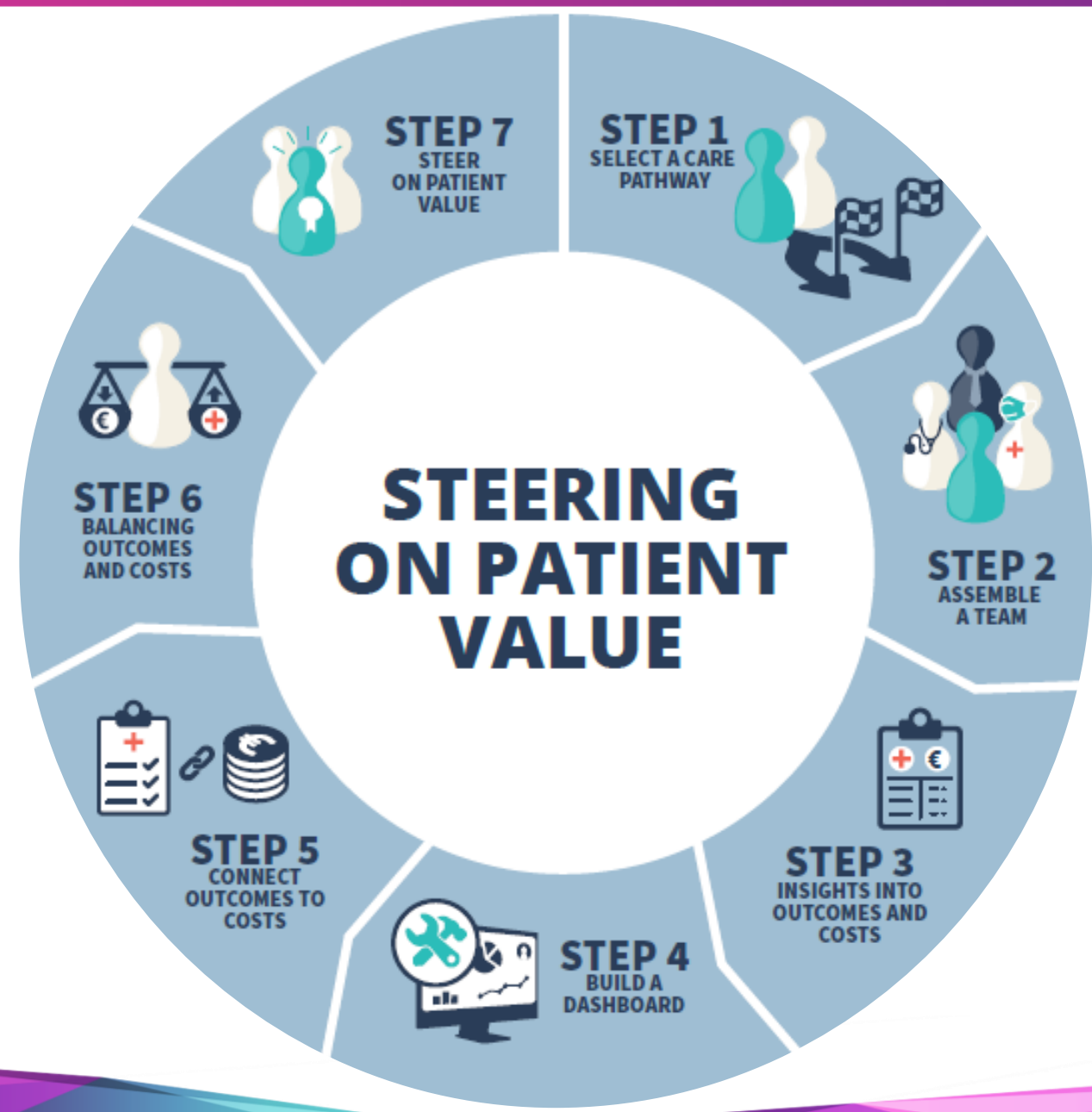


# Working group

## *Steering on Outcomes and Costs (2023)*

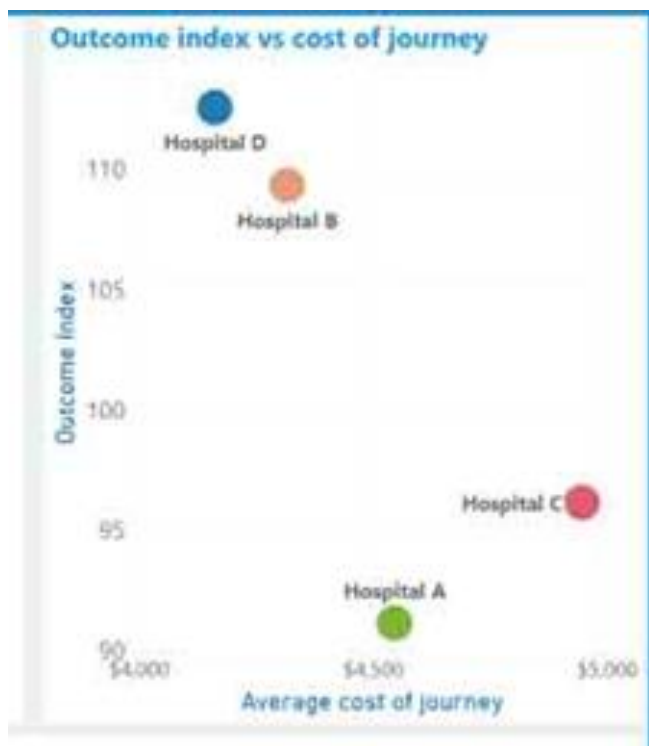
- **15 Dutch experts:** academics, care professionals, insurance expert and patient representative
- **Consultation group +20 (inter)national experts**
- Expert meetings and literature search to learn from e.g., Health Technology Assessment (HTA) and (inter)national frontrunners
- **Output:** webcast, roadmap, (inter)national examples and whitepaper

# Expert roadmap

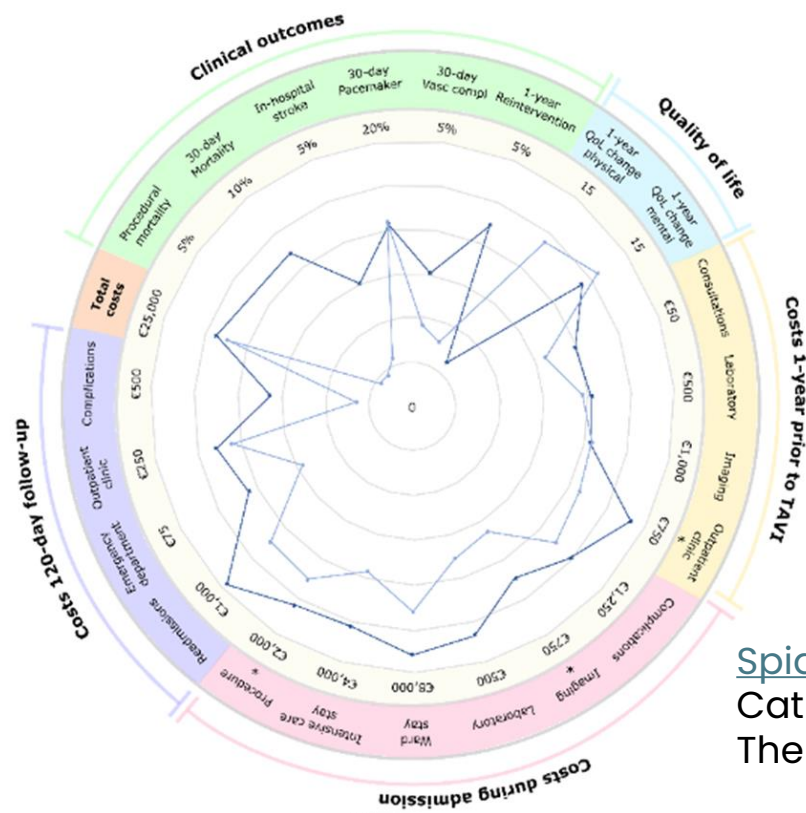


# Step 5. Connect outcomes to costs

## Option 1. Two-dimensional graph/matrix



Stroke dashboard  
Nordic Healthcare Group, Estonia

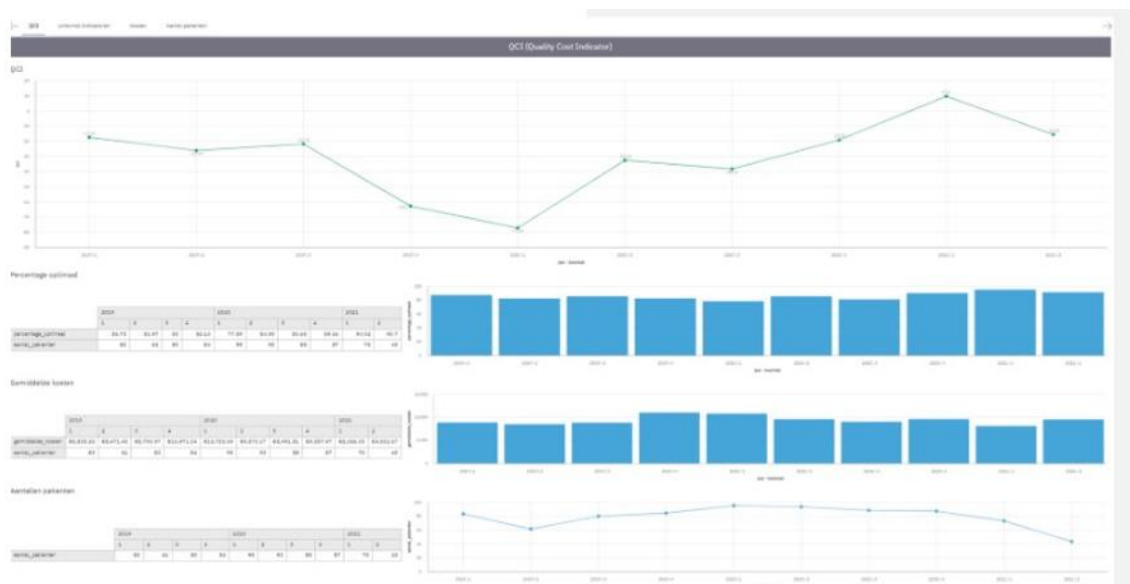


Spider chart  
Catharina Hospital, The Netherlands

# Step 5. Connect outcomes to costs

## Option 2. Single patient value

$$a. \Delta \text{ patient value} = \frac{\Delta \text{ outcomes}}{\Delta \text{ costs}}$$



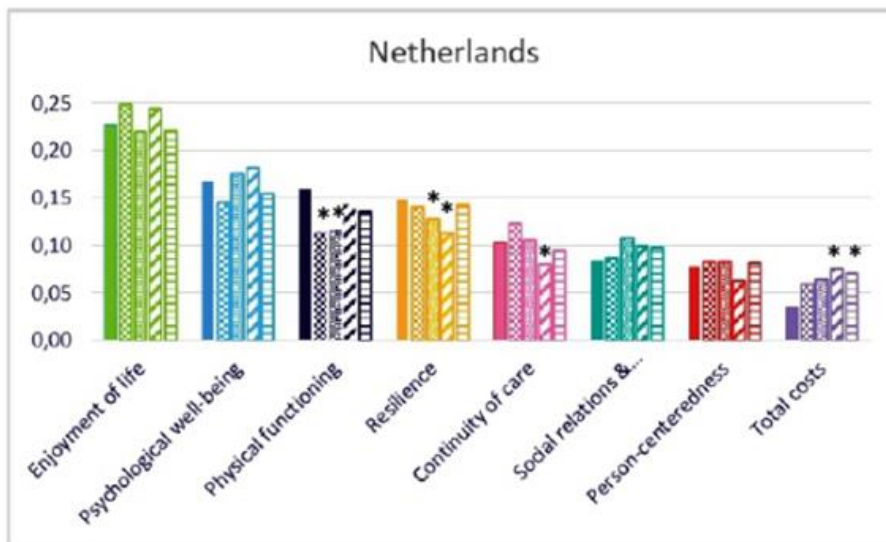
Quality-Cost-Indicator Framework  
Franciscus Gasthuis & Vlietland,  
The Netherlands

\* The breast cancer populations hasn't been casemixed for TNM classification

# Step 5. Connect outcomes to costs

## Option 2. Single patient value

### b. Multi-Criteria Decision Analysis



[SELFIE](#) Erasmus University (lead),  
The Netherlands

c. *Incremental Cost – Effectiveness Ratio* =

$$\frac{costs_{intervention} - costs_{daily\ practice}}{outcomes_{intervention} - outcomes_{daily\ practice}}$$

using a patient-reported outcome measure  
instead of the generic health measure EQ-5D

Based on the [National Health Care Institute's guidelines for economic evaluations](#)

# Conclusion

- There are diverse methods available to steer on patient value.
- We need to adjust these methods to fit the care organizations context.

## Future research:

- Which method fits best in certain contexts?
- Culture shifts in care organizations.
- Value-based contracting.



# Call to action

- Start steering on patient value with the data you have available!
- Share learned lessons *and* effective care pathways.

## Goals for 2024:

- Strengthen (inter)national learning network.
- Together alert care organizations that action needs to be taken.
- Develop a long-term research agenda.

# The Linnean Initiative

*Show how value-based care can be implemented in the current healthcare system; identify flaws and challenges, as well as provide solutions for the value-based healthcare system of the future.*

## History

- Started at the Dutch embassy in Washington, located on Linnean Avenue.
- Grew from **40-50 participants to > 1.600 members to date, from all healthcare domains**

## Characteristics

- Common ambition to accelerate the pace of health system transformation
- Open, independent, bottom-up
- Everyone participates in his/her personal capacity

## Activities

- >25 events
- > 175 good-practices
- 20 working groups resulted in > 18

knowledg products



**Linnean**



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# Want to join? Contact us!

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