

# FROM SILO BUDGETING TO FINANCIAL INTEGRATION

Where does the EU stand in diabetes care?

20 November 2020

Event report

## Better integrated care systems for improved health outcomes in diabetes



The EFPIA Diabetes Platform stands to improve the lives of people living with diabetes. There are multiple factors at play, but the way health systems are set up, and what impact they have on patients' health and quality of life are crucial. There is ample evidence that a more integrated approach to managing diabetes is the best practice. However, there remain significant roadblocks to implementing integrated diabetes systems across Europe. To address these gaps, EFPIA Diabetes Platform commissioned a report from the Economist Intelligence Unit entitled *"Implementing integrated diabetes systems in Europe. The enabling role of integrated finance and IT."* The report identifies the missing links needed for integrated care, namely integrated IT systems, and aligned finances and responsibility.

As part of this study, the Economist Intelligence Unit developed a scorecard, which allows to compare 28 European countries (EU 27 + UK) in each of these areas. The scorecard notably shows that:

- All 28 countries have implemented a **good basis of integrated care services**.
- Major barriers and gaps remain in the implementation of **integrated health IT systems**.
- The **lack of financial integration** in diabetes care is impeding the creation of effective integrated diabetes systems.

The aforementioned challenges are hampering the promise of better outcomes for people living with diabetes and reduced costs for healthcare systems.

Based on these key findings, the report presents three policy recommendations, which were the focus of the webinar organised by the EFPIA Diabetes Platform on 20 November 2020:

1. **Engage people with diabetes** to put them at the center of integrated diabetes services.
2. **Align or pool budgets** to enable clinical integration, reduce fragmentation and deliver patient-centered care.
3. Establish evaluation mechanisms to facilitate **continuous monitoring and improvement** of integrated diabetes systems.

Joining us for the discussion was Prof Chantal Mathieu, President of the EUDF, Member of the European Parliament (MEP) Christel Schaldemose, and Dr Loukianos Gatzoulis from the Directorate-General for Health and Food Safety (DG SANTE) in the European Commission. Dr Prabhav Trivedi and Elly Vaughan, respectively from the EFPIA Diabetes Platform and the Economist Intelligence Unit, presented the key findings from the report. The event gathered policy experts, healthcare professionals, European Union and Member State representatives, and patient groups, sharing ideas on how to best address the challenges pertaining to the implementation of integrated finances and health IT systems.

# From integrated diabetes care to integrated diabetes systems



The results from the EIU study indicate that integrated care is well established as a concept and in policy, but that the technical enablers of integrated systems are less present, resulting in an implementation gap.

Dr Prabhav Trivedi from the EFPIA Diabetes Platform and Elly Vaughan from the EIU stressed the importance of integration to improve patient outcomes, as well as to reduce costs and the fragmentation of care in diabetes.

Beyond the need to make healthcare systems patient-centric, and vertically integrate finances, all panelists underlined the crucial role played by comparable data in monitoring and evaluating key aspects of integrated healthcare systems.

## Incentives for patient centric care

According to Dr Prabhav Trivedi, incentives are likely to be complex and need to be tailored to the local level. All incentives should be developed based on the core principle of pooling budgets, in order to make healthcare systems more patient-centric.



*Financial incentives have been identified as significant behavioral influencers to encourage multiple providers to work together and ultimately, enable a better integration of healthcare systems and better care for the people with diabetes*

**Dr Prabhav Trivedi** / Global Medical Advisor Metabolic, Boehringer Ingelheim, EFPIA Diabetes Platform

Dr Loukianos Gatzoulis stressed that a shift in approach is needed, focusing more on outcomes that matter to patients rather than simply using volume as the main measurement.



*A change is required, moving away from the activity-oriented, volume-based approach, to more outcome-based approaches. This entails pooling and integration of financial resources as well as new contracting models. It is because effectively we are looking at many payers and service providers working together, and they need to work in a harmonious way*

**Dr Loukianos Gatzoulis** / Policy Analyst, DG SANTE, European Commission

Diabetes represents up to 9% of healthcare expenditure. Still, 75% of these costs are due to preventable complications. Prof Chantal Mathieu felt that policymakers should be more focused on prevention rather than management of the disease. She also underlined the importance of non-financial incentives, such as better outcomes for people with diabetes.



*When I am talking to Ministers, I always say that they will spend the money into healthcare anyway. What is up to us to decide is whether we should spend it early on, for instance on prevention, or rather on treatment of people once they already are on dialysis*

*Prof Chantal Mathieu / President, European Diabetes Forum*



## Data driven healthcare systems

Elly Vaughan explained how comparable health data could encourage healthcare professionals to adopt a holistic and patient-centric approach to diabetes care. She stressed the potential of integrated health IT systems to empower citizens by helping them to take greater control of their health and share decision making with healthcare professionals.



*We talk a lot about shared decision making. Providing patients with the data to do that is key. People living with diabetes have to make micro decisions throughout the day, but they need data to inform this decision-making process*

*Elly Vaughan / Associate, Economist Intelligence Unit*

Danish MEP Christel Schaldemose from the Progressive Alliance of Socialists and Democrats (S&D), recalled that the European Parliament, together with the European Commission, is working on a European strategy for a health data space and stressed the need to develop data-driven healthcare systems.



*Put the patient in focus. This will automatically lead to the development of integrated care systems. This should be a guiding principle for MEPs, as the Parliament has a key role to play in creating awareness and holding the Commission and Member States accountable*

*Christel Schaldemose (S&D, Denmark)  
Member of the European Parliament*

Prof Chantal Mathieu insisted on leaving no one behind, by promoting a better access of socio-economically disadvantaged groups to integrated diabetes care, thanks to integrated health IT systems. Europe can make the difference on data gathering.

## Scaling up best practices

Dr Prabhav Trivedi wished to see the EIU study and the scorecard findings to be discussed and implemented at European level and more importantly, at the local level. He further called on national authorities to develop concrete implementation plans based on the recommendations of the report.

Dr Loukianos Gatzoulis stressed the need to mobilise adequate investments to roll out the upscaling of integrated healthcare systems at national and EU levels. He recalled that in the current EU programming period, more than 1.5 billion EUR from Cohesion Policy funds have been used to support the work on health system reforms, including the development of more integrated healthcare systems.



According to MEP Christel Schaldemose, the shift from a siloed thinking should be extended beyond diabetes care. The European Parliament too needs to be better at approaching health issues and spreading good practices.

## Looking ahead

The needs of people living with diabetes should be at the center when it comes to implementing integrated diabetes care. As Prof Chantal Mathieu pointed out, without including them, everything else we do is irrelevant. People with diabetes need to be engaged more, and their input is crucial when it comes to policy decisions.

We need more financial integration in our health systems, and an end to siloed budgets and practices. For a fully integrated system to flourish, it is essential to have the involvement of every stakeholder in diabetes care, and for that we need to have the right incentives in place.

Even though several building blocks are in place, there is a long road ahead of us to achieve truly integrated diabetes care. Constant evaluation and close monitoring will be vital to ensure continuous adaptation of our health systems.

This webinar has driven forth the important discussion on diabetes care and highlighted the obstacles ahead. The implementation of fully integrated diabetes systems is key to achieving better outcomes, and we won't rest until we have attained this objective.



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EFPIA Diabetes Platform and the Economist Intelligence Unit launched a report entitled **“IMPLEMENTING INTEGRATED DIABETES SYSTEMS IN EUROPE, THE ENABLING ROLE OF INTEGRATED FINANCE AND IT”** during a webinar on silo budgeting and integrated diabetes systems on 20 November 2020. The report is the output of a dynamic collaboration process between key European Union stakeholders in diabetes care. It offers recommendations spanning integrated finance, health IT systems and continuous monitoring and evaluation of integrated diabetes systems.