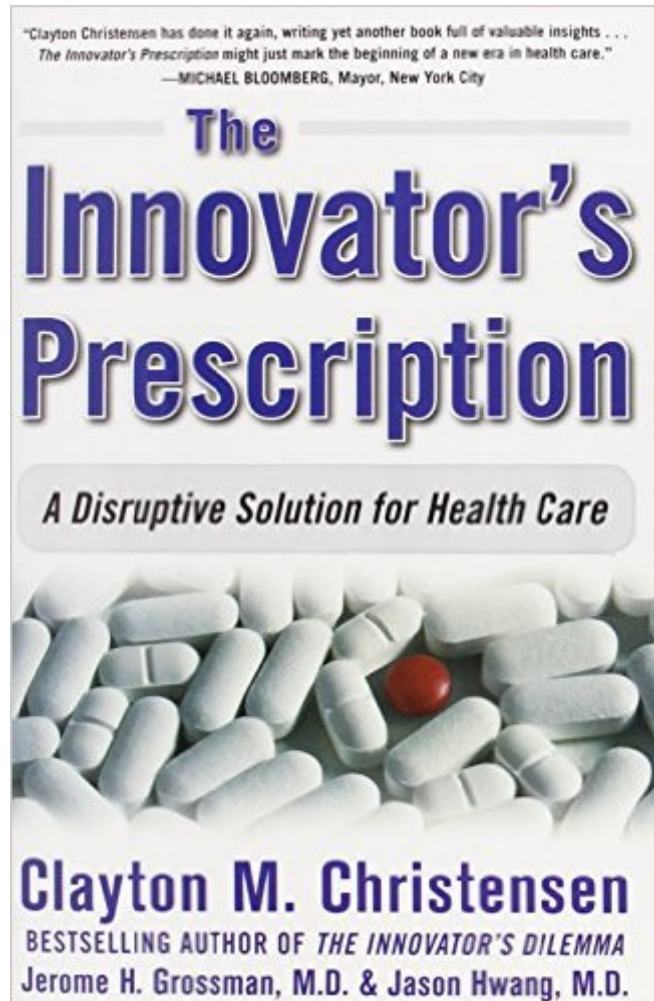


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The Innovator's Prescription: A Disruptive Solution For Health Care



Synopsis

A groundbreaking prescription for health care reform--from a legendary leader in innovation . . . Our health care system is in critical condition. Each year, fewer Americans can afford it, fewer businesses can provide it, and fewer government programs can promise it for future generations. We need a cure, and we need it now. Harvard Business Schoolâ€™s Clayton M. Christensenâ€•whose bestselling *The Innovatorâ€™s Dilemma* revolutionized the business worldâ€•presents *The Innovatorâ€™s Prescription*, a comprehensive analysis of the strategies that will improve health care and make it affordable. Christensen applies the principles of disruptive innovation to the broken health care system with two pioneers in the fieldâ€•Dr. Jerome Grossman and Dr. Jason Hwang. Together, they examine a range of symptoms and offer proven solutions. YOUâ€™LL DISCOVER HOW â€œPrecision medicineâ€• reduces costs and makes good on the promise of personalized care Disruptive business models improve quality, accessibility, and affordability by changing the way hospitals and doctors work Patient networks enable better treatment of chronic diseases Employers can change the roles they play in health care to compete effectively in the era of globalization Insurance and regulatory reforms stimulate disruption in health care

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Customer Reviews

It is a commonplace that the U.S. healthcare system is broken, but the discussion often degenerates into a debate about who is responsible. This book takes a different approach, focusing

on what is wrong with the healthcare system and needs to change so it can work better. The proposed solution is to discard the current fee for healthcare service model, in which healthcare providers are systematically paid to treat illness without recompense for fostering welfare, and create a three-track system: (1) Fee for service would continue to apply to diagnostic services, where - due to the nature of the patient's condition and the state of medical knowledge - there is a high need for intuitive investigation versus results-based treatment for conditions that are well understood. (The process described brings to mind episodes of House, a TV show in which a brilliant but irascible doctor challenges a team of colleagues to find the problem before the patient dies.) (2) Fee for result would apply for treating conditions that are well understood and have a clearly defined solution -- colonoscopies, laser eye surgery, implantation of stents, etc. (3) User networks for patients with chronic conditions/ unhealthy practices to learn how they can help themselves and be motivated to do so. As is pointed out again and again, disruptive changes will be needed to get from A to B. Thus, hospitals must be redirected to focus on diagnostic services and cede provision of standardized care and wellness coordination to specialized clinics and other agencies. Primary care physicians (the traditional "family doctor") should concentrate on diagnostic services at a lower level rather than acting as "gatekeepers" for referrals to specialists.

The decade worth of research spent understanding, studying, and ultimately offering solutions to make the health care system more accessible, higher quality, and affordable is clear. Unlike other books, the authors avoid the traps the plague most other solutions by taking a completely different perspective by looking at other industries where products and services offered were "so complicated and expensive that only people with a lot of money can afford them, and only people with a lot of expertise can provide or use them." Yet convincingly through plenty of examples, it shows how telephones, computers, and airline travel moved from only accessible to those with the resources to become available and affordable to all. The book tackles every aspect of health care and asks how will those in health care be disrupted and subsequently surpassed by other providers which deliver care that is more convenient, higher quality, and lower cost. What will hospitals need to do as increasingly more surgical procedures are performed in high volume specialty hospitals? How will doctor practices sustain themselves as new diagnostic tools and research makes the identification and treatment of problems more precise that nurse practitioners with clear protocols can deliver care previously required by physicians? What mechanisms exist to streamline and integrate the various players of health care (doctors, hospitals, purchasers, insurers) so that all are focused on the benefit of wellness and outcomes of patient care rather than maximizing each of their own

financials? (Hint: large employers will integrate health care and others will only purchase care delivered by integrated healthcare delivery systems).

I have been an active participant in healthcare developing and commercializing over twenty medical technologies across nine medical specialties since the 1970's. I have also lectured on the medical industry as an Assistant Professor of Surgery at Creighton University Medical Center and as a guest lecturer at Anderson School of Management (UCLA), Haas School of Business (University of California), and Graziadio Business School (Pepperdine University), and spent significant time in the 1990's on FDA reform. I have been privileged to have had a front-row seat observing the major changes that have shaped today's healthcare system - industry consolidation for both the supplier (pharma, med-tech, and diagnostic) and delivery (hospital, clinics, physician practice) segments; the move from unregulated fee-for-service to regulated fee-for-service; the growth of medical malpractice and its impact on the cost of healthcare; the use and misuse of technology; the draconian regulatory burden (FDA and CMS) associated with developing new life-improving or life-saving technologies; and, as a result, the growth of healthcare as a share of GDP from 6% to 16%. To this industry insider, healthcare is a system in critical condition and needs radical surgery. Clayton Christensen who authored one of the best books on innovation ("The Innovator's Dilemma") has now teamed up with Jerome Grossman, M.D. and Jason Hwang, M.D. to bring well-researched insights into a disruptive solution for effective value-added health care in "The Innovator's Prescription." Christensen and company outline the technological enablers of disruption then show us how various aspects of the healthcare system can be effectively disrupted to produce better, more cost-effective healthcare for all Americans.

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