



Future Trends in Healthcare & Higher Education

2015 APHA Annual Meeting
ICTHP Section / November 3, 2015

John G. Scaringe, DC, EdD
President / CEO
Southern California University of Health Sciences

Session Outline

- Healthcare
 - Frame the Problem
 - Trends
- Higher Education
 - Frame the Problem
 - Trends
- Challenges for Integrative Professions
- Implications
 - Practice
 - Integrative Colleges & Universities
- What our University is Doing



Healthcare



Higher
Education

FINAL
EDITION

The Times

EXTRA!
EXTRA!

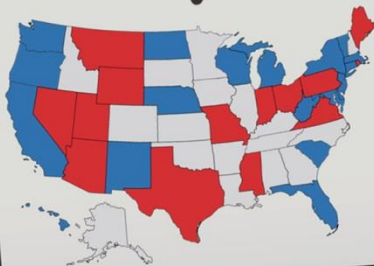
TWIN U.S. CRISES

Healthcare Reform



Healthcare and higher education are both in a state of flux and reform. As a healthcare university, Southern California University of Health Sciences (SCU) must have a heightened awareness of these reforms and begin examining what opportunities these changes will create. odi odignimet offic temporepudam restint lit laut dolorit ea valorit atendipidici ideles et lacepel liquatur, conet

State by State



Both Face Three Similar Issues

Both face three similar issues: rising costs, diminishing access, inefficiency and waste, and inconsistent

Higher Education Reform



Healthcare and higher education are both in a state of flux and reform. As a healthcare university, Southern California University of Health Sciences (SCU) must have a heightened awareness of these reforms and begin examining what opportunities these changes will create. odi odignimet offic temporepudam restint lit laut dolorit ea valorit atendipidici ideles et lacepel liquatur, conet

Framing the Problem



Healthcare
Reform



Higher
Education
Reform

Issues Driving Reform

US HEALTHCARE

US HIGHER EDUCATION

Rising Costs
Inconsistent Quality
Diminishing Access &
Disparities



Healthcare
Reform



Higher
Education
Reform

Issues Driving Reform

- Waste & redundancy
- ↑ administrative burden
- Aging population
- ↑ Chronic disease
- Defensive medicine
- ↓ Access
- Inconsistent quality
- Fragmentation
- Technology
- Regulatory restraints



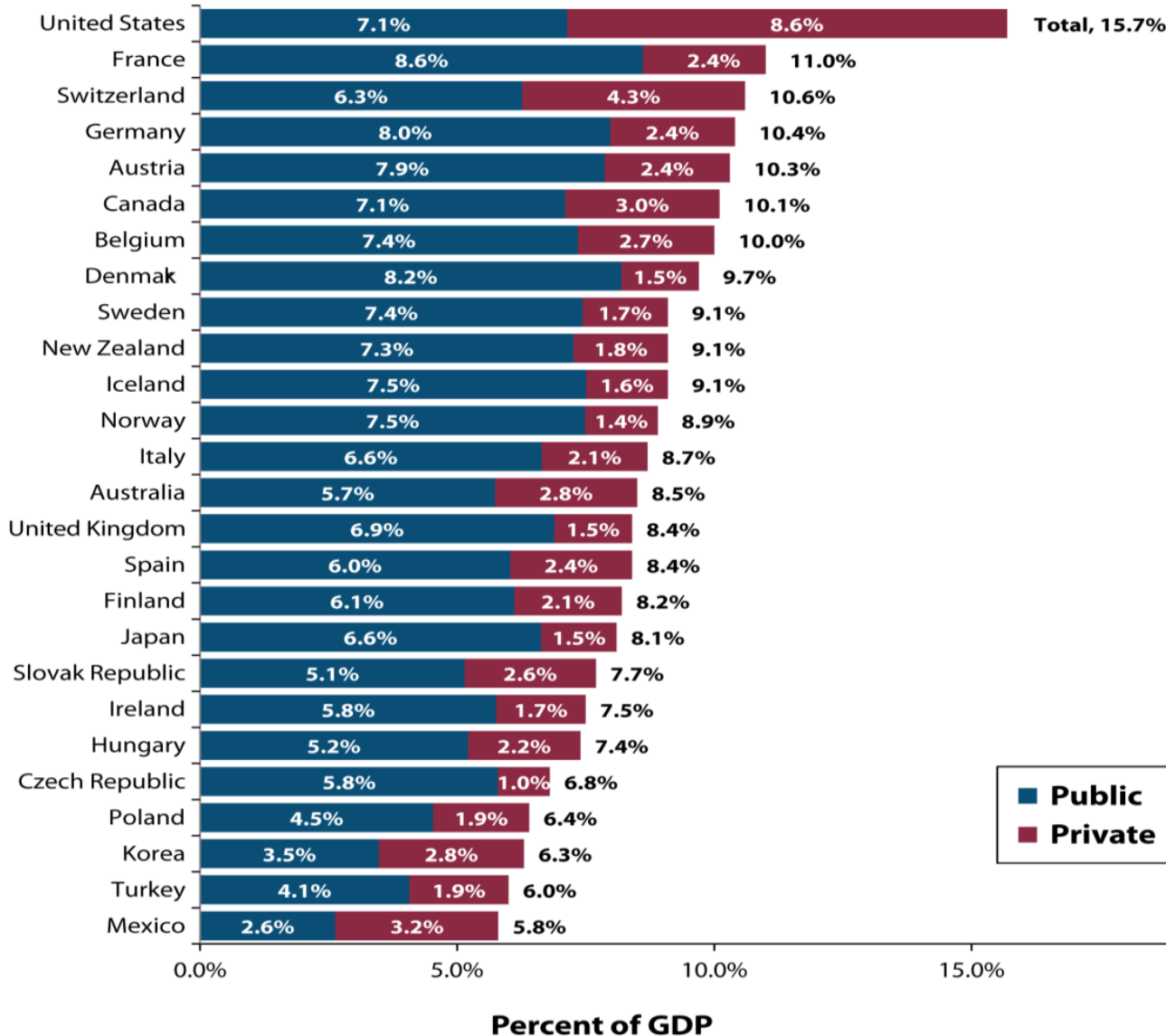
Healthcare
Reform



Higher
Education
Reform

United States spends more than any other country on health care

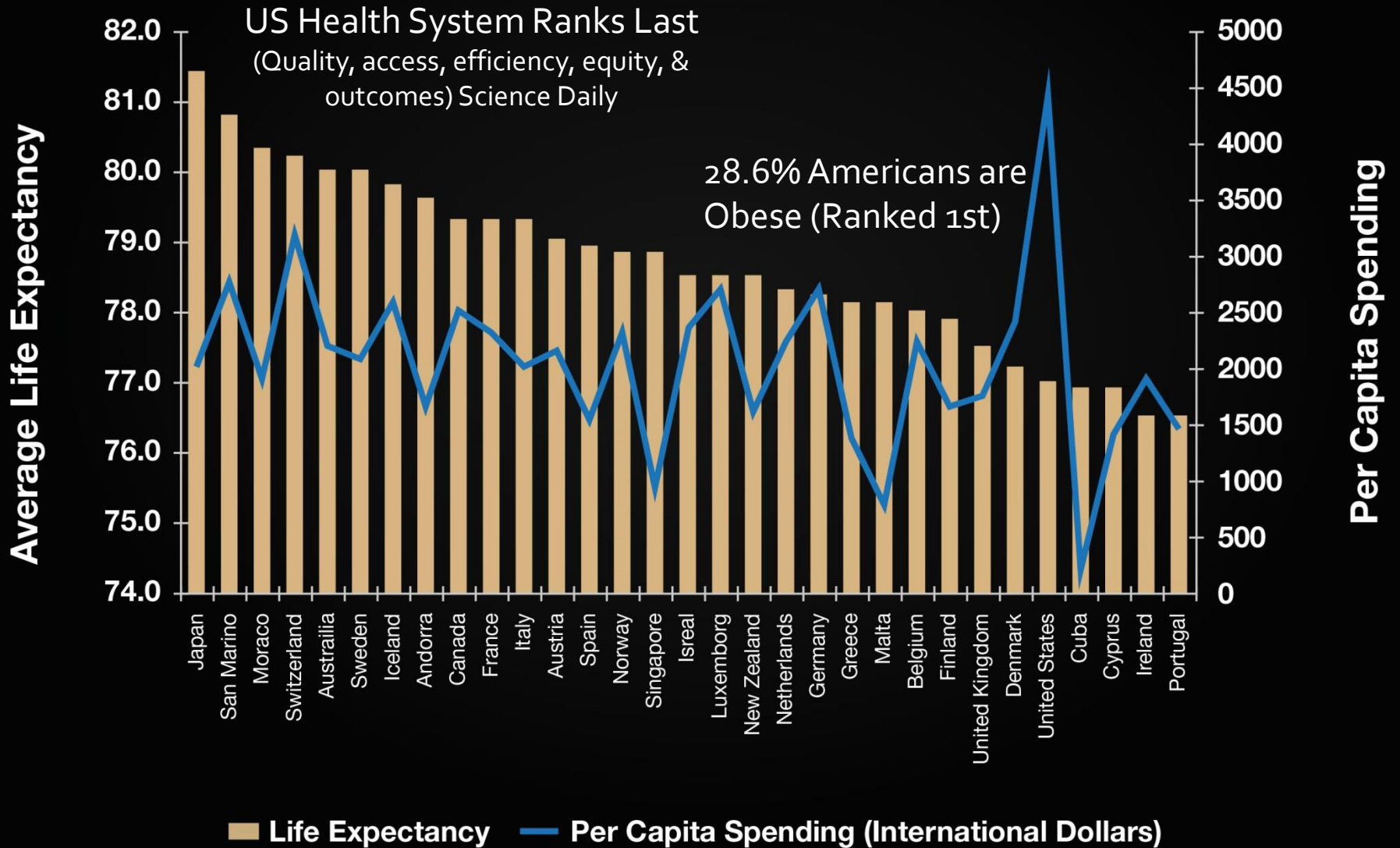
Public and private expenditures on health care spending (as percent of GDP), 2007*



17.9% in 2011

~\$2.8 T

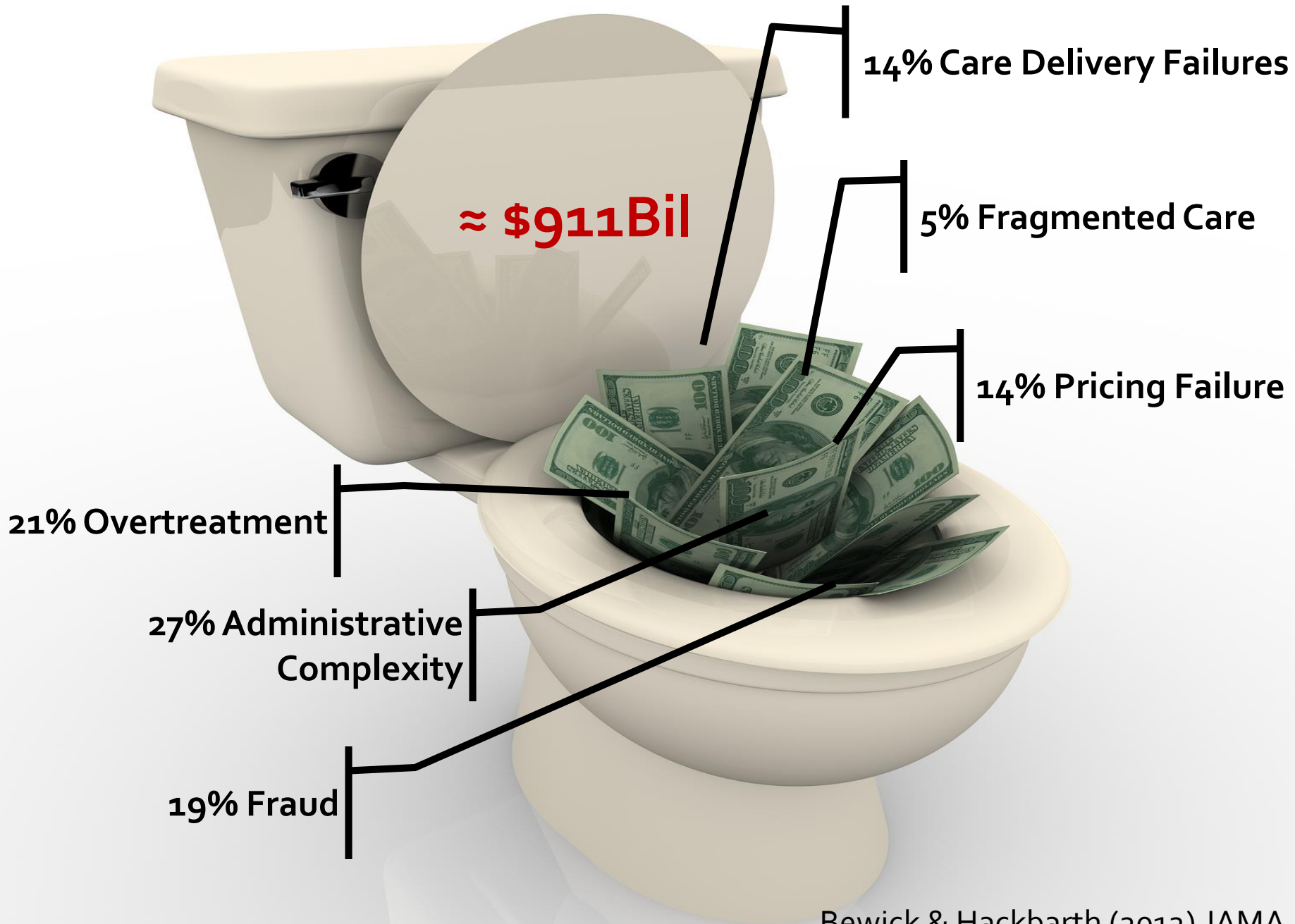
The Cost of a Long Life



**30% doesn't
improve
health**



2.8 Trillion



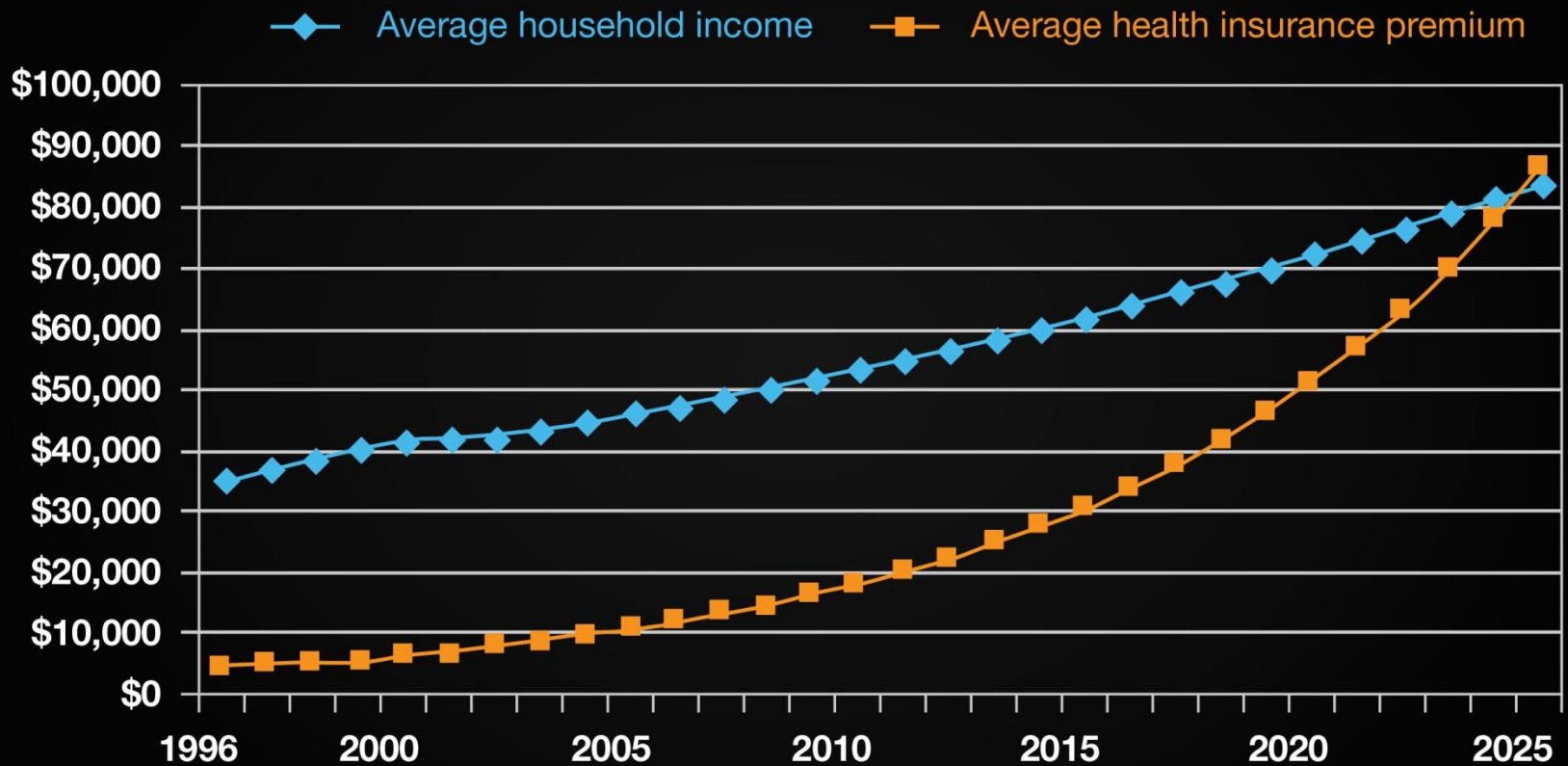
A collage of US dollar bills, orange pill bottles, and red and white capsules. The text "\$300 Billion" is overlaid in a blue font on a semi-transparent white background.

\$300 Billion

A collage of US dollar bills, orange pill bottles, and red and white capsules. The text "10% 1950" is overlaid in a blue font on a semi-transparent white background.

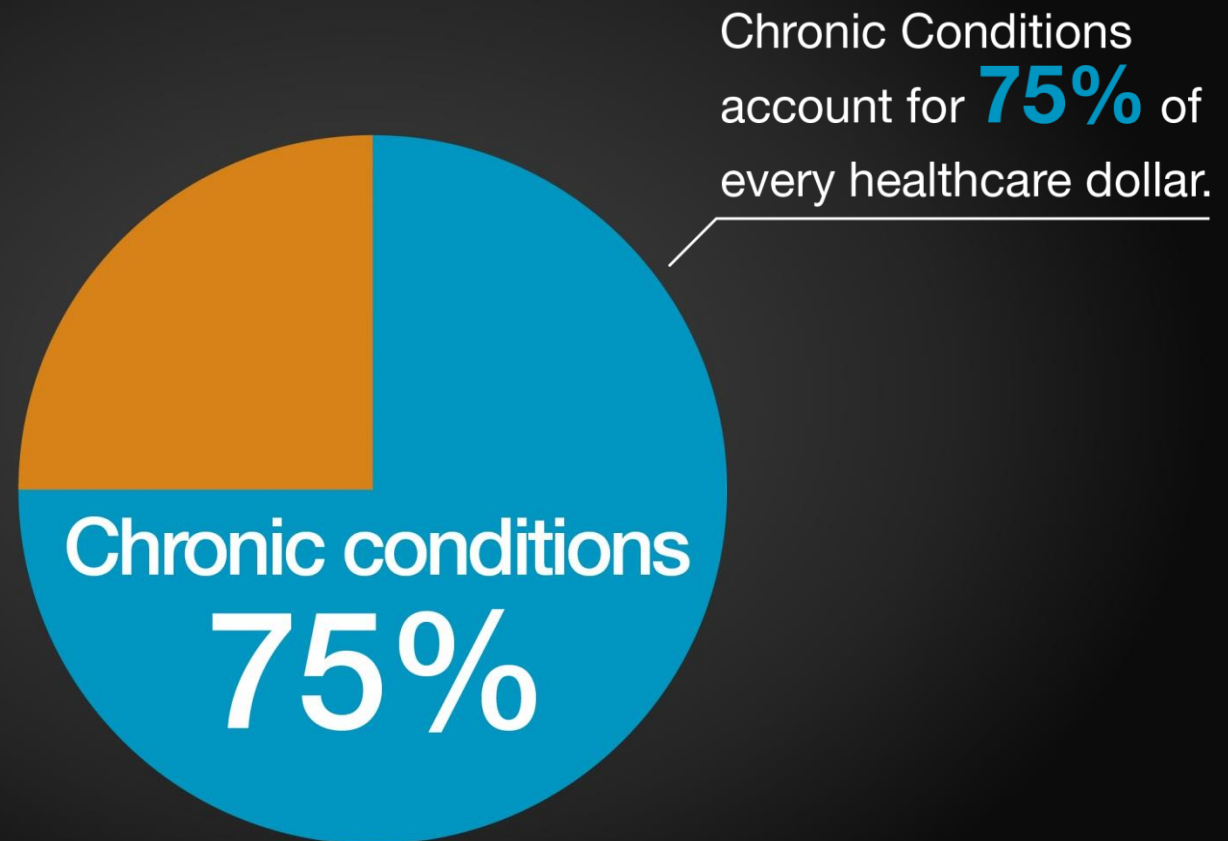
10% 1950

Annual Health Insurance Premiums

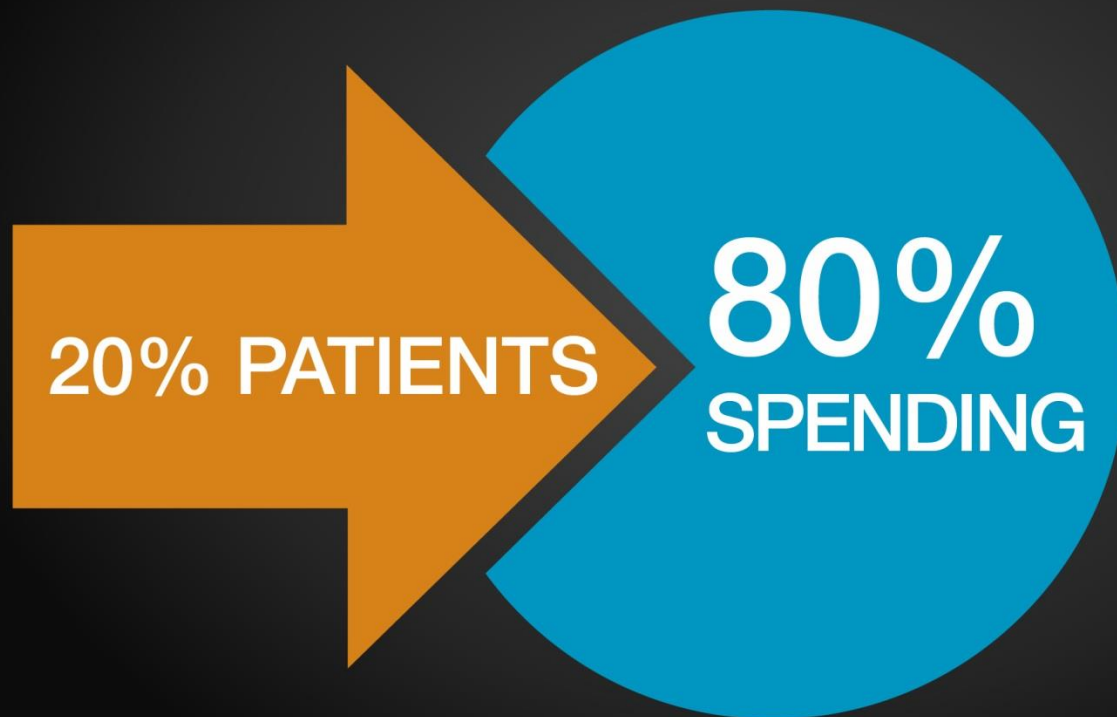


Graham Center (2005) *Who will have health insurance in 2025?* *Am Fam Physician* 72(10)

The Cost of Chronic Conditions



Pareto Principle (80/20 Rule)



Pareto Principle (80/20 Rule)

- 20% patients / spending 80% of money
- Extreme variation of care
 - quality, price, & medical ethics
- Orphaned Pareto Group
 - 8-10% misdiagnosed
 - 10% faulty or incomplete Dx
 - 35-40% poor Tx Plan



You say it's a sharp, stabbing pain. Hmmm
... sharp ... stabbing pain."

Pain

Pain is a significant public health problem accounting for \$560-\$635 billion annually

Institute of Medicine



Healthcare
Reform



Higher
Education
Reform

Opioid Abuse & Addiction

U.S spent

\$72 Billion

annually on opioid analgesic

Outnumber

all other overdose deaths

Not counting indirect

Economic Impact

Responsible for

60%

of overdose
deaths

from ER, substance tx centers, etc

75% Increase

in non-medical use of opioids
between 2000-2010

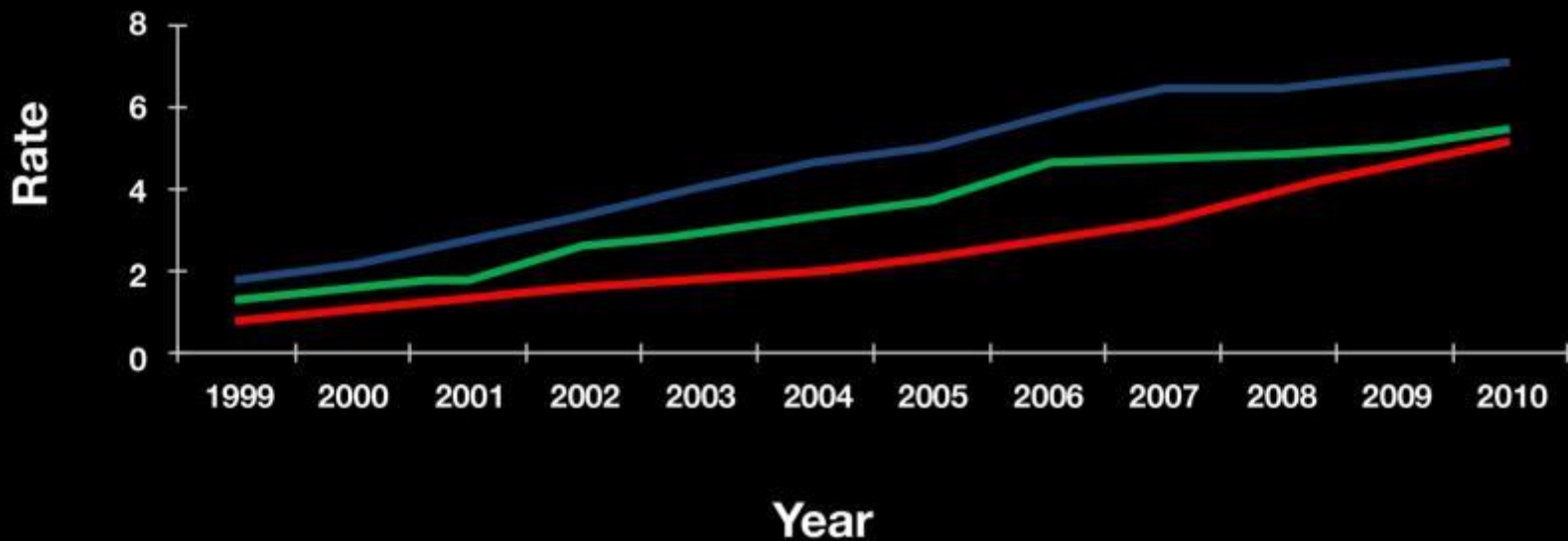


Healthcare
Reform


124% Increase

in those 50 yrs or older since 2000

Rates of opioid deaths, opioid sales, and opioid substance abuse treatment admissions, United States, 1999-2010



— Opioid Sales KG/10,000 — Opioid Deaths/100,000 — Opioid Treatment Admissions/10,000



THINGS ARE
LOOKING UP, LOIS
YOU'RE NEXT IN LINE FOR
RADIATION THERAPY

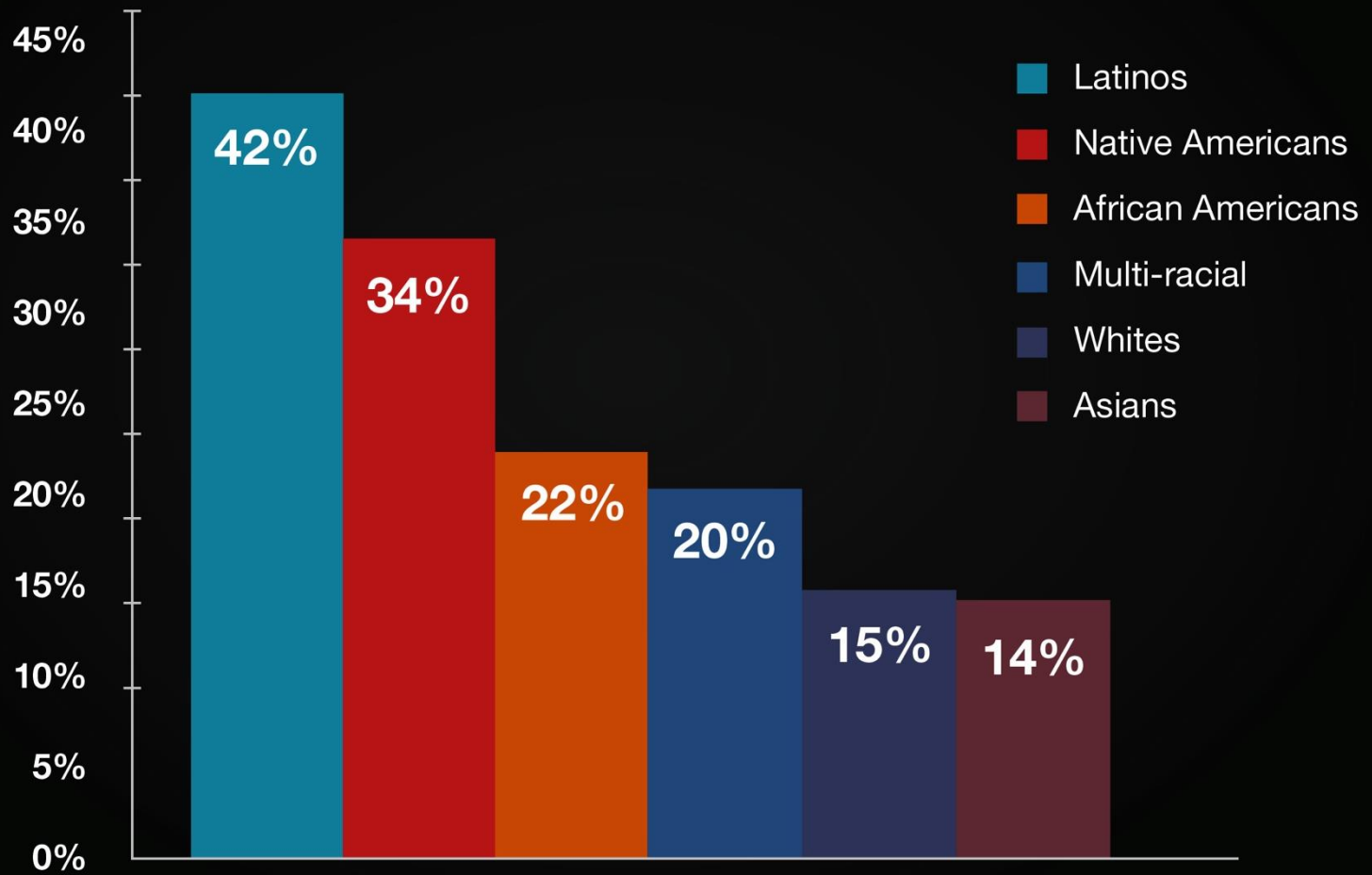
YOU KNOW
THAT HEART
SURGERY YOU
WERE WAITING
FOR?

GOOD
NEWS, PHIL.
A HOSPITAL
BED JUST
OPENED UP

©IRICE00

MORE EVIDENCE OF A HEALTH CARE SYSTEM IN CRISIS

Adults Age 18-64 w/o Health Insurance



Centers for Disease Control & Prevention

Disparities in Quality

- African-Americans and Native Americans received worse care than Whites for \approx 40% of quality measures
- Asians received worse care than Whites for 20% of measures
- Hispanics received worse care for about 60% of measures
- Poor people received worse care than high-income people for about 80% of quality measures

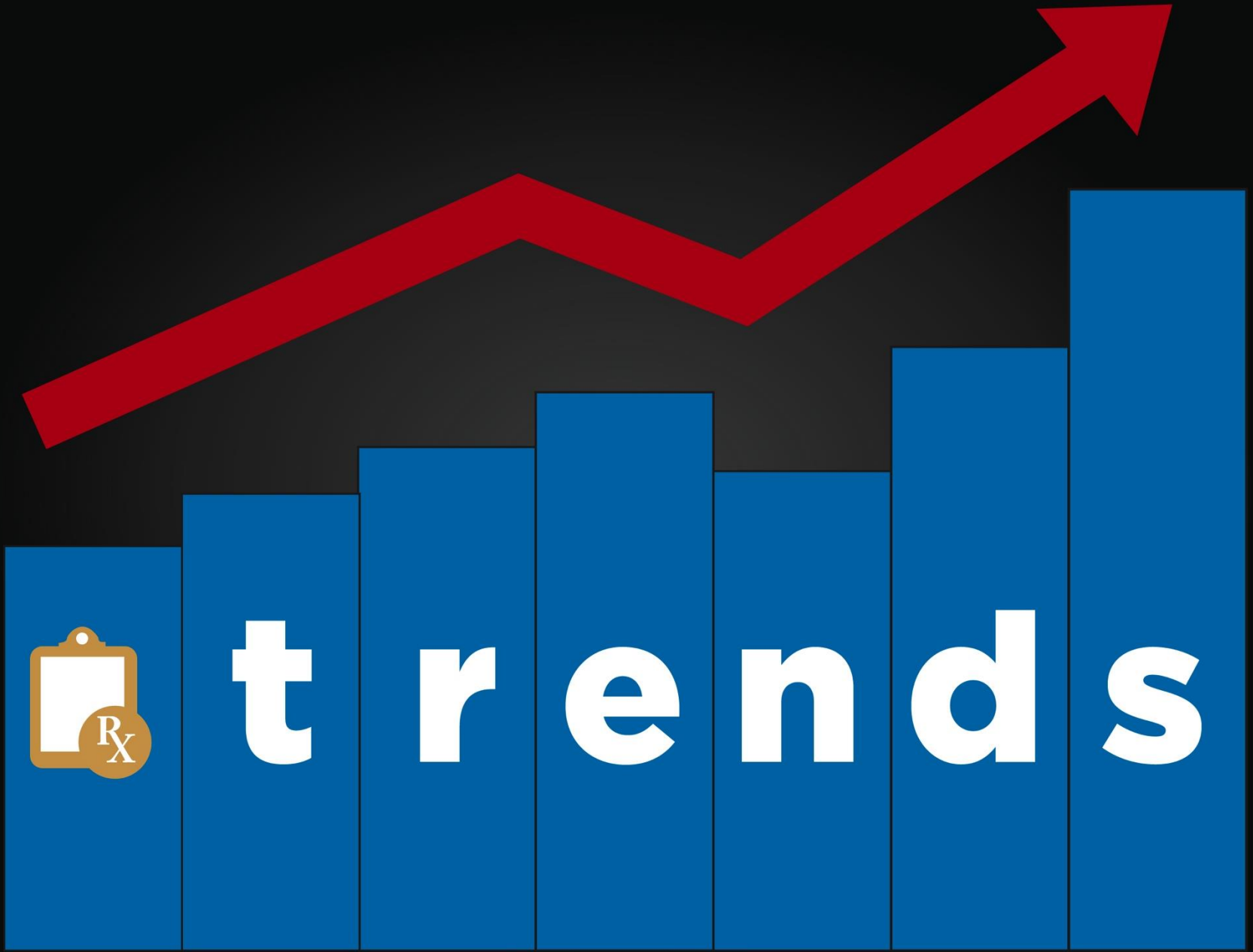
Disparities in Access

- African-Americans had worse access to care 1/3 of measures
- Asians and Native Americans had worse access to care 20% of measures
- Hispanics had worse access to care for 5 of every 6 measures
- Poor people had worse access to care than high-income people for all measures



Healthcare
Reform

Higher
Education
Reform



An illustration featuring several stylized human figures in various professional attire, including lab coats, scrubs, and business casual wear. They are arranged around a central point, connected by a network of light gray lines that form a circular pattern. The background is white, and the overall style is clean and modern. The text is overlaid on this network.

**“What is the matter with our patients?”
to
“What matters to our patients”**

Integrated Healthcare is...

the practice of healthcare that reaffirms the importance of the relationship between practitioner and patient, focuses on the whole person, is informed by evidence, and makes use of all appropriate therapeutic approaches, healthcare professionals and disciplines to achieve optimal health and healing.

Consortium of Academic Health Centers for Integrative Medicine, 2009



Benefits of Integrated Healthcare

- Improve outcomes
- Improve care for chronic conditions
- Better care coordination
- Limited fragmentation



Healthcare
Reform



Higher
Education
Reform

Trends in Healthcare

- Patient at center of decisions
- Integrated Healthcare Teams
- Moving Away From Private Practices / “Consolidation”
 - Organizational Performance
 - Designing Systems for Care
- Evidence-Based Outcomes
- Population Medicine to ‘Personalized Care’



Healthcare
Reform



Higher
Education
Reform

Trends in Healthcare

- Quality of Life Over Longevity
- Safe Self-Care / Patient Responsibility for Health
- Away From 'Dx & Tx' to 'Predict & Prevent'
- Reimbursement Shifts Away From Fee-For-Service
- Shifts Away From Hospitals to 'Care Anywhere'



Healthcare
Reform



Higher
Education
Reform

“The Value Problem”

We need to deliver
better **outcomes** at a
lower total **cost**.



Healthcare
Reform



Higher
Education
Reform

Framing the Problem



Healthcare
Reform



Higher
Education
Reform

What are the issues driving reform?

US HEALTHCARE

Rising Costs
Inconsistent Quality
Diminishing Access &
Disparities

US HIGHER EDUCATION

Rising Costs
Inconsistent Quality
Diminishing Access &
Disparities

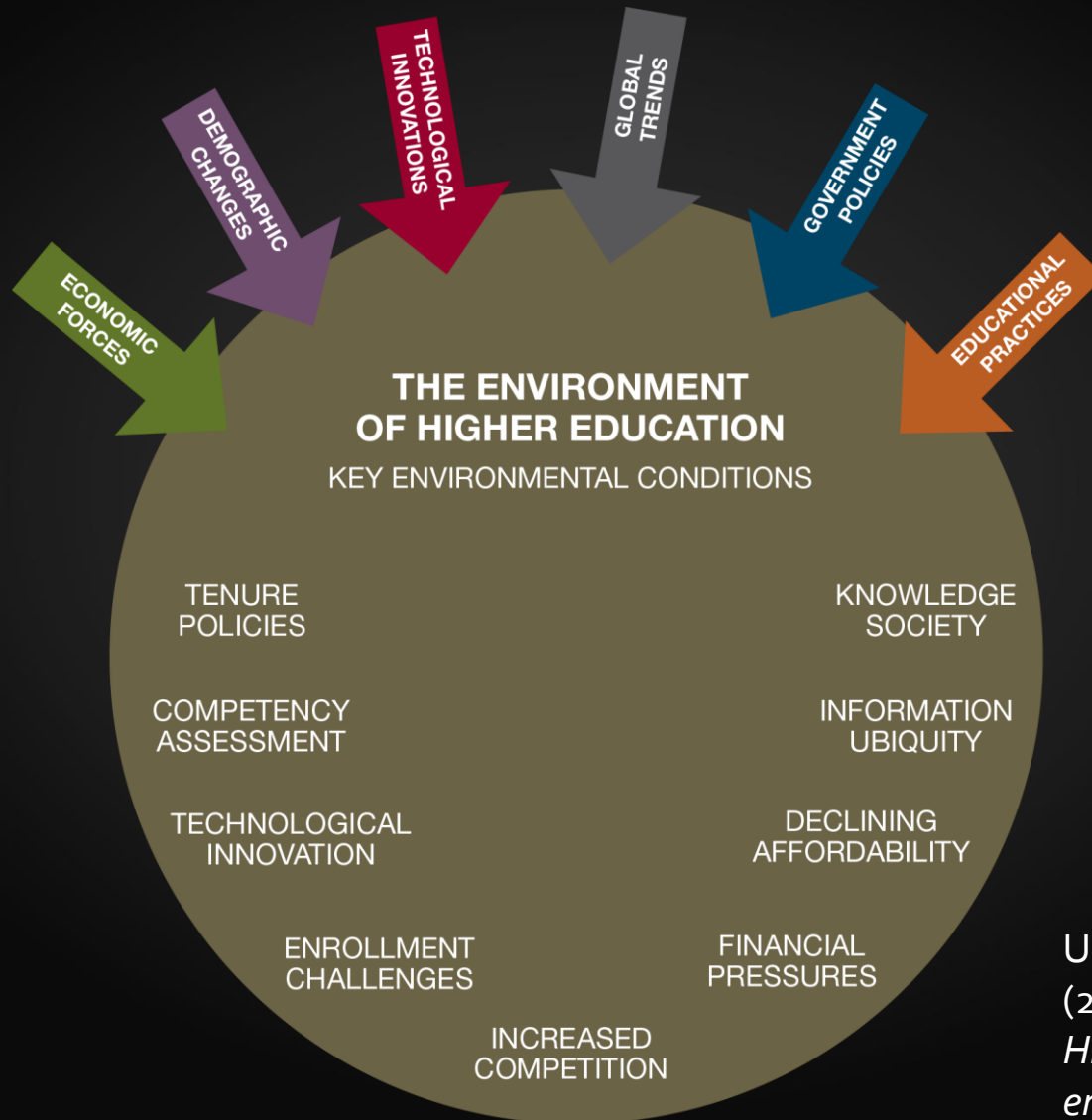


Healthcare
Reform



Higher
Education
Reform

Forces of Change



University of Denver
(2014) *Unsettling Times:
Higher education in an
era of change*

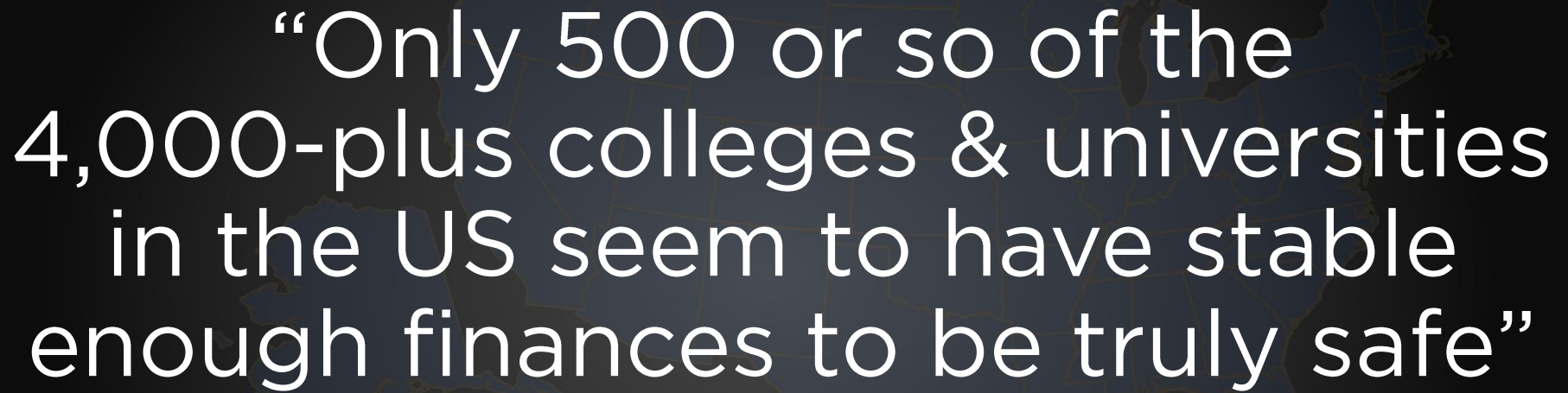
“Negative to Stable”

2015

“Negative Outlook
on Higher Education”

MOODY'S

Moody's Investors Service (January 2014)



“Only 500 or so of the 4,000-plus colleges & universities in the US seem to have stable enough finances to be truly safe”

NY Times (2013)



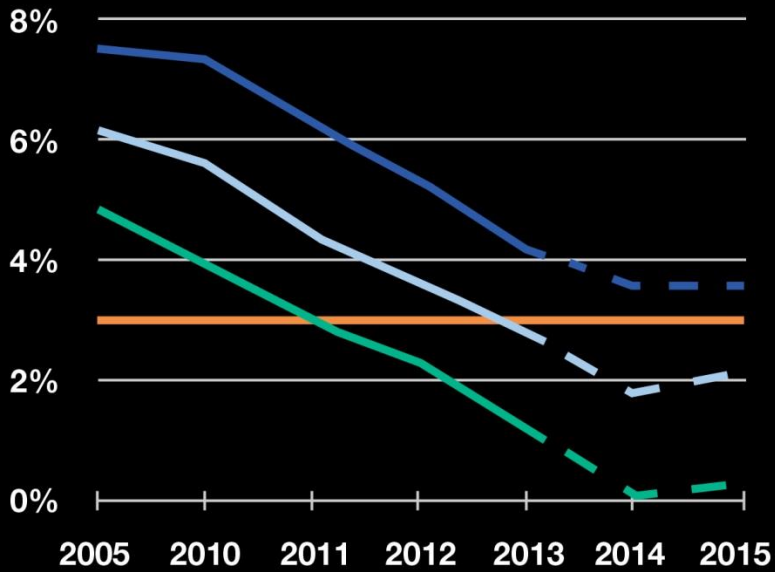
Healthcare
Reform



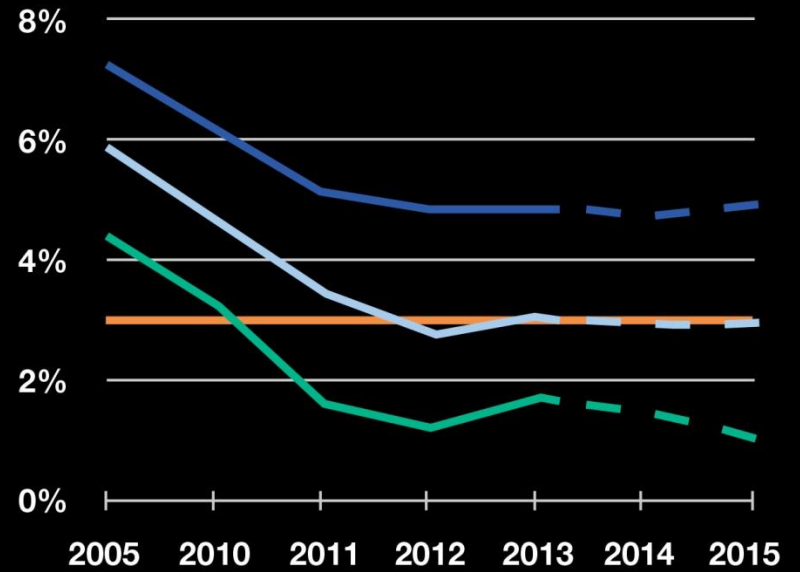
Higher
Education
Reform

Sustainable Revenue Growth Will Elude Most Public and Many Private Universities

Weak revenue trends for most public universities



Revenue trends of most private universities are leveling off

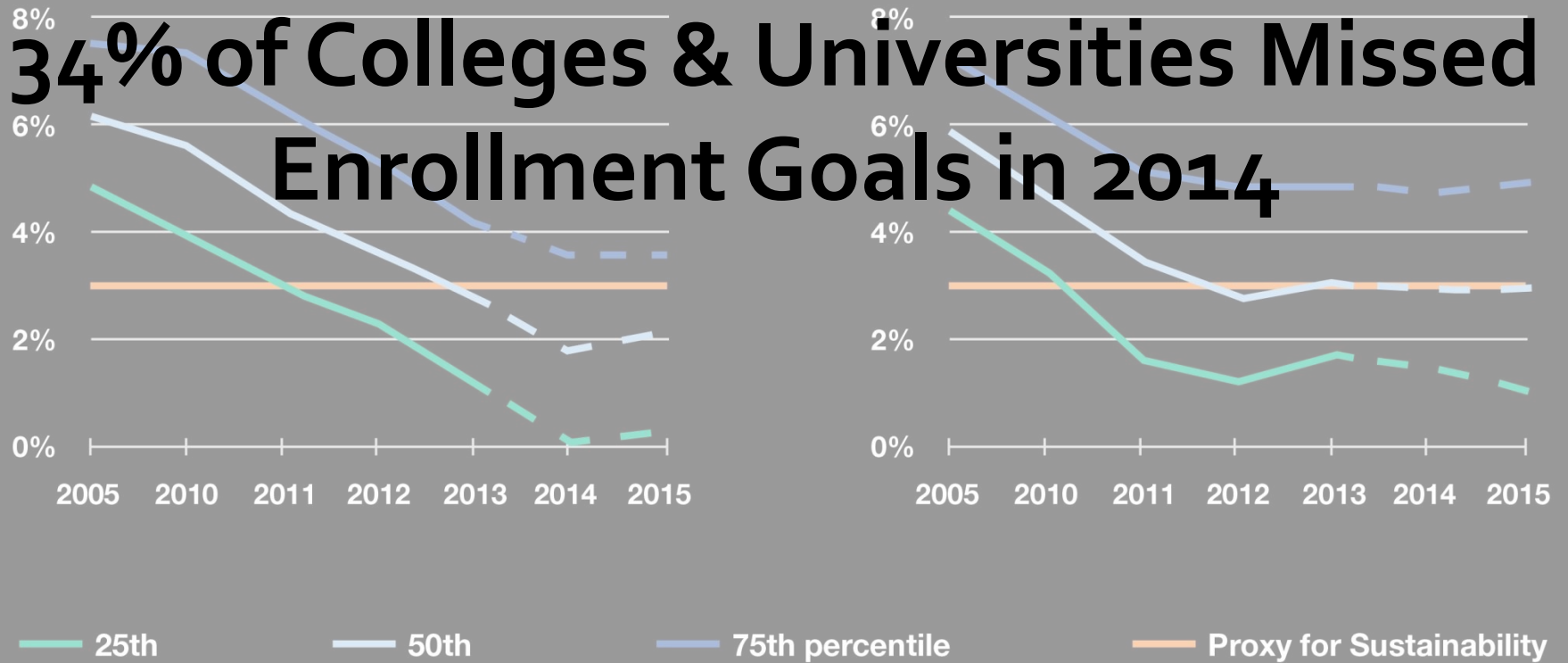


25th 50th 75th percentile Proxy for Sustainability

Sustainable Revenue Growth Will Elude Most Public and Many Private Universities

Weak revenue trends for most public universities

Revenue trends of most private universities are leveling off

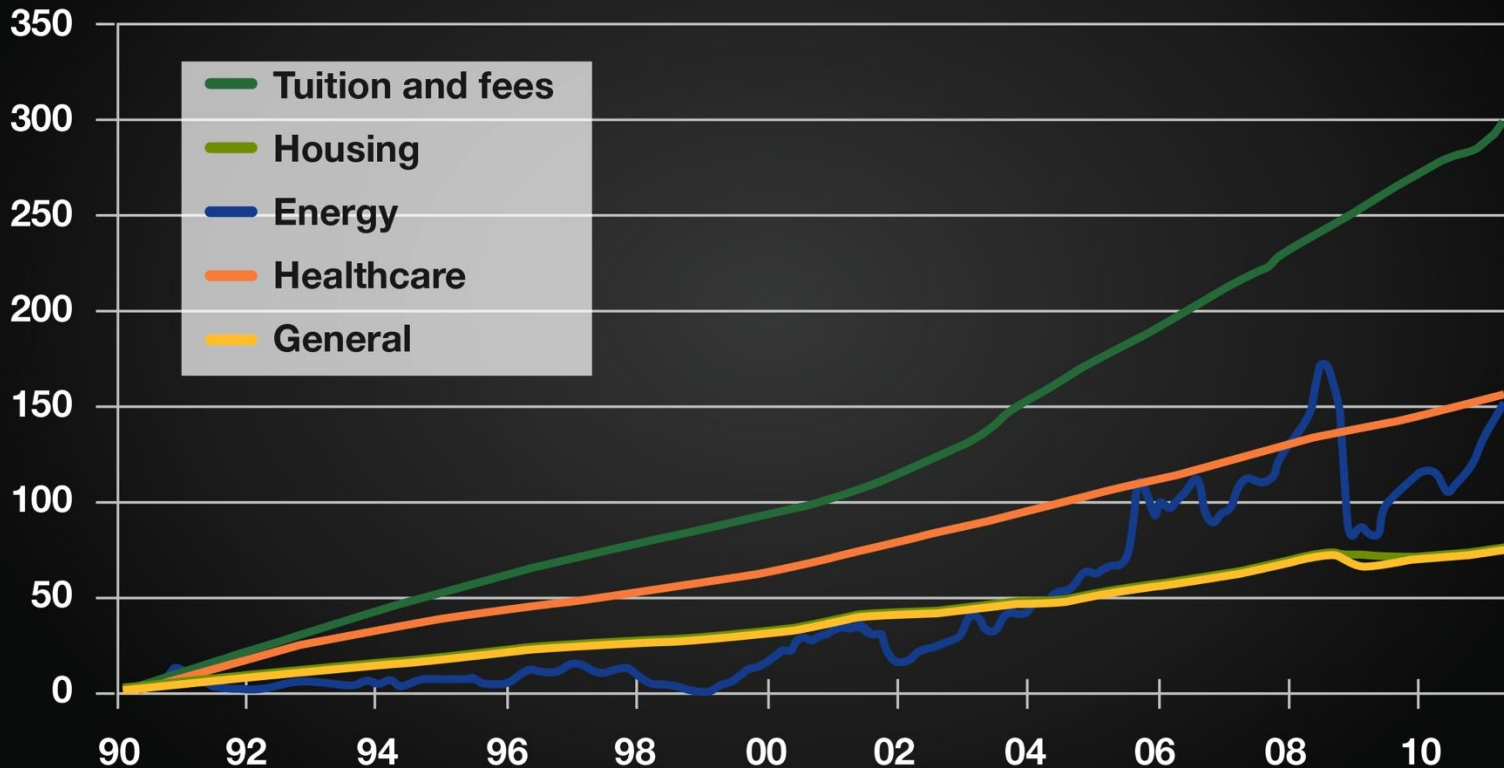


TUITION FEES



Tuition vs Other Price Indices

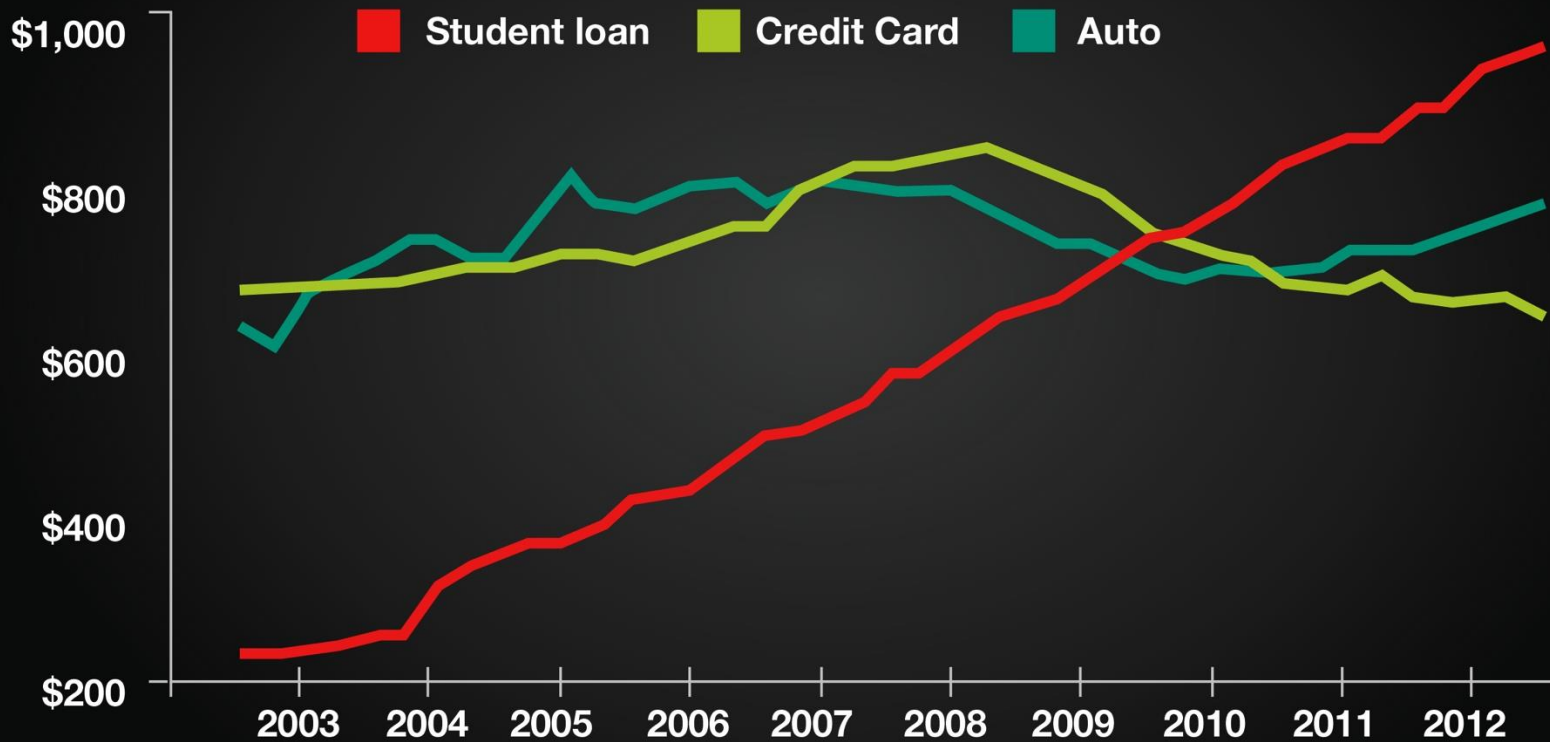
CPI, cumulative % change since 1990



Sources: BLS Moody's Analytics

Maxed Out

Total debt held by borrowers



Source: Federal Reserve Bank of New York

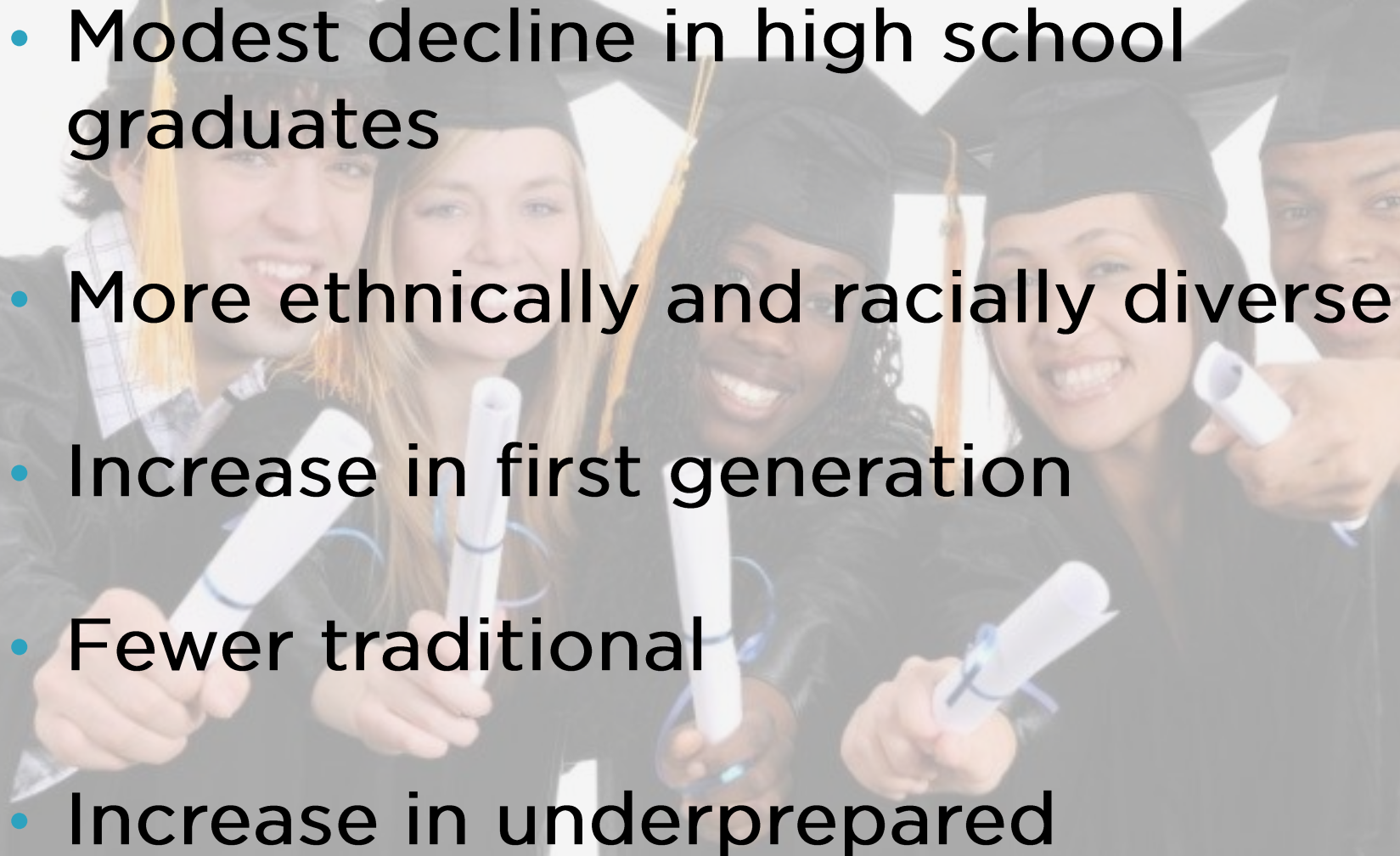
COLLEGE COSTS

IT'S A BILL!





Changing Demographics

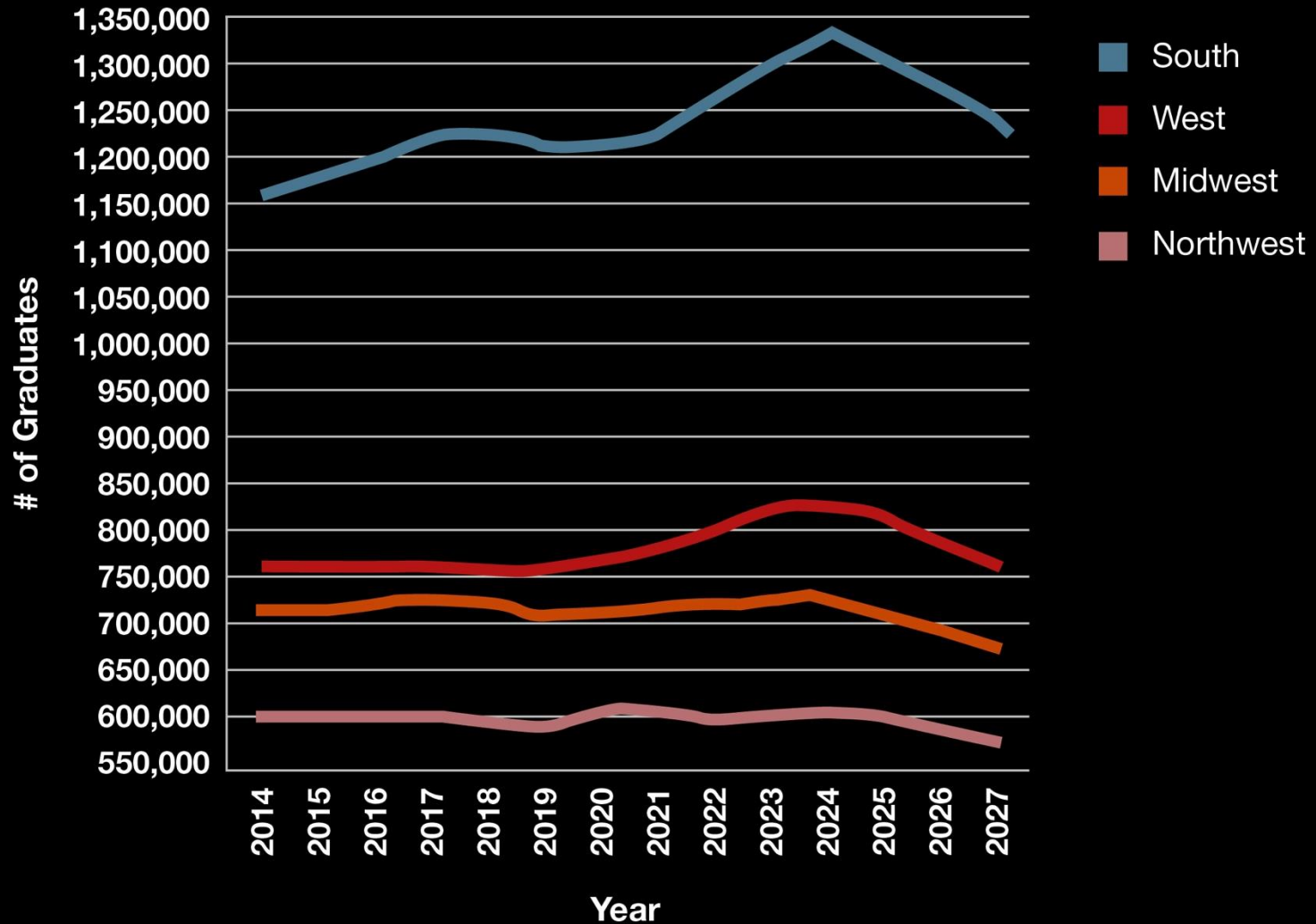
- Modest decline in high school graduates
 - More ethnically and racially diverse
 - Increase in first generation
 - Fewer traditional
 - Increase in underprepared
- 
- A group of five diverse high school graduates in black caps and gowns, smiling and holding rolled-up diplomas. The graduates include a young man on the left, a young woman, a young woman of African descent, a young woman of Asian descent, and a young man on the right. The background is a plain, light color.

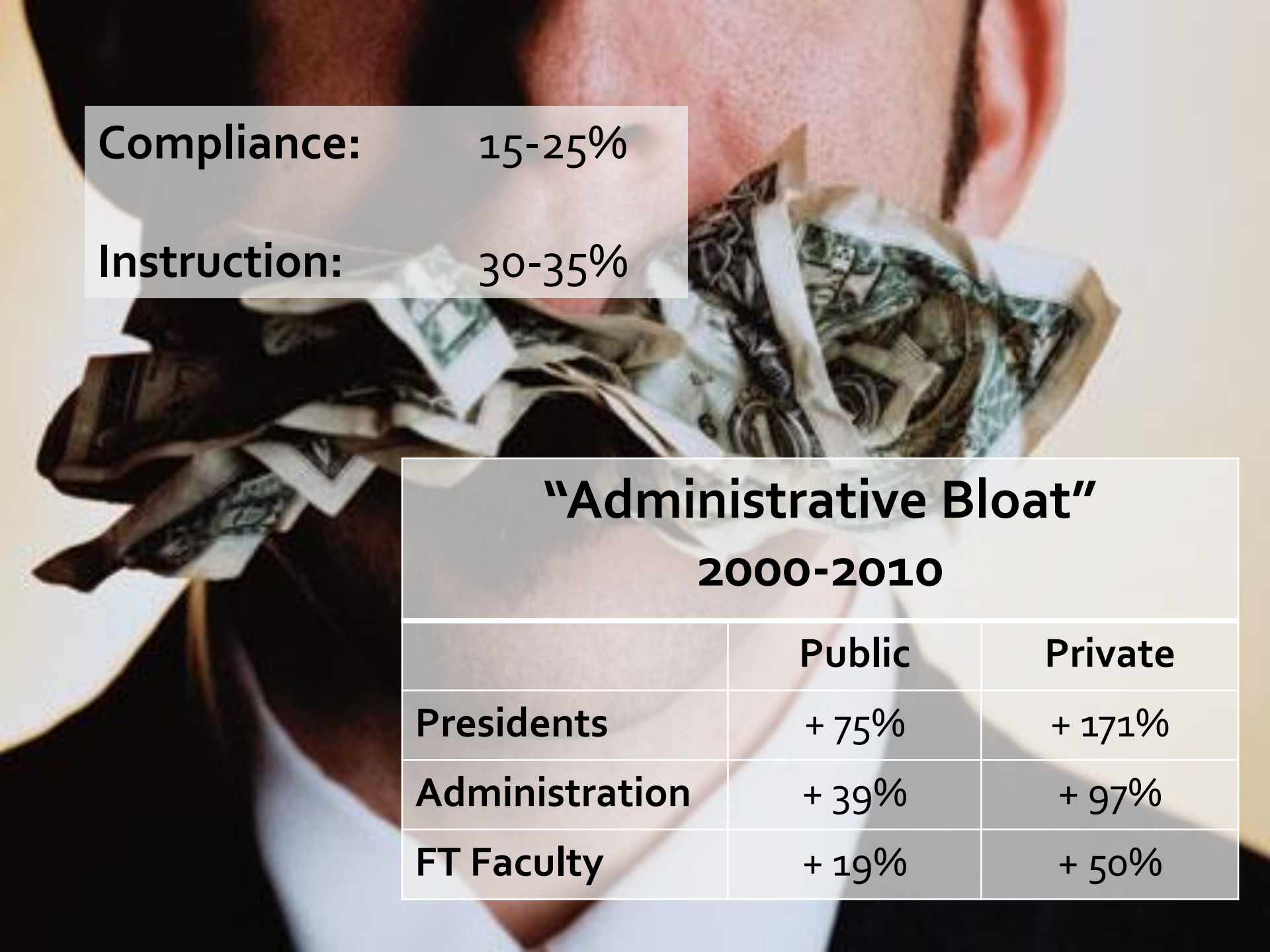
DIFFERENTIATED UNIVERSITY

		ACADEMIC OFFERING	STUDENT SUPPORTS	SERVICES/EXPERIENCES
24%	ASPIRING ACADEMICS	4-Year Experience; Research Opportunities	Academic Advising; Opportunities to Build Graduate School Resume	Research Assistant/ Teaching Assistant Positions
11%	COMING OF AGE	4-Year; Residential Experience	Wide Range Academic Options and Extracurricular Activities	Social Culture; Sports Teams
18%	CAREER STARTERS	3-Year Degree Program; Experiential Learning Opportunities	Job Placement Assistance	Co-op Program
21%	CAREER ACCELERATORS	Competency-Based Credit	Success Coaching	Experiential Learning Opportunities
18%	INDUSTRY SWITCHERS	Online/Hybrid Programs	Career Counseling	Industry Relationships
8%	ACADEMIC WANDERERS	Weekend and Evening Schedules	Academic Advising	Job Placement Assistance

U.S. Department of Education, 2014, Digest of Education Statistics 2013.

High School Graduates By Region





Compliance: 15-25%

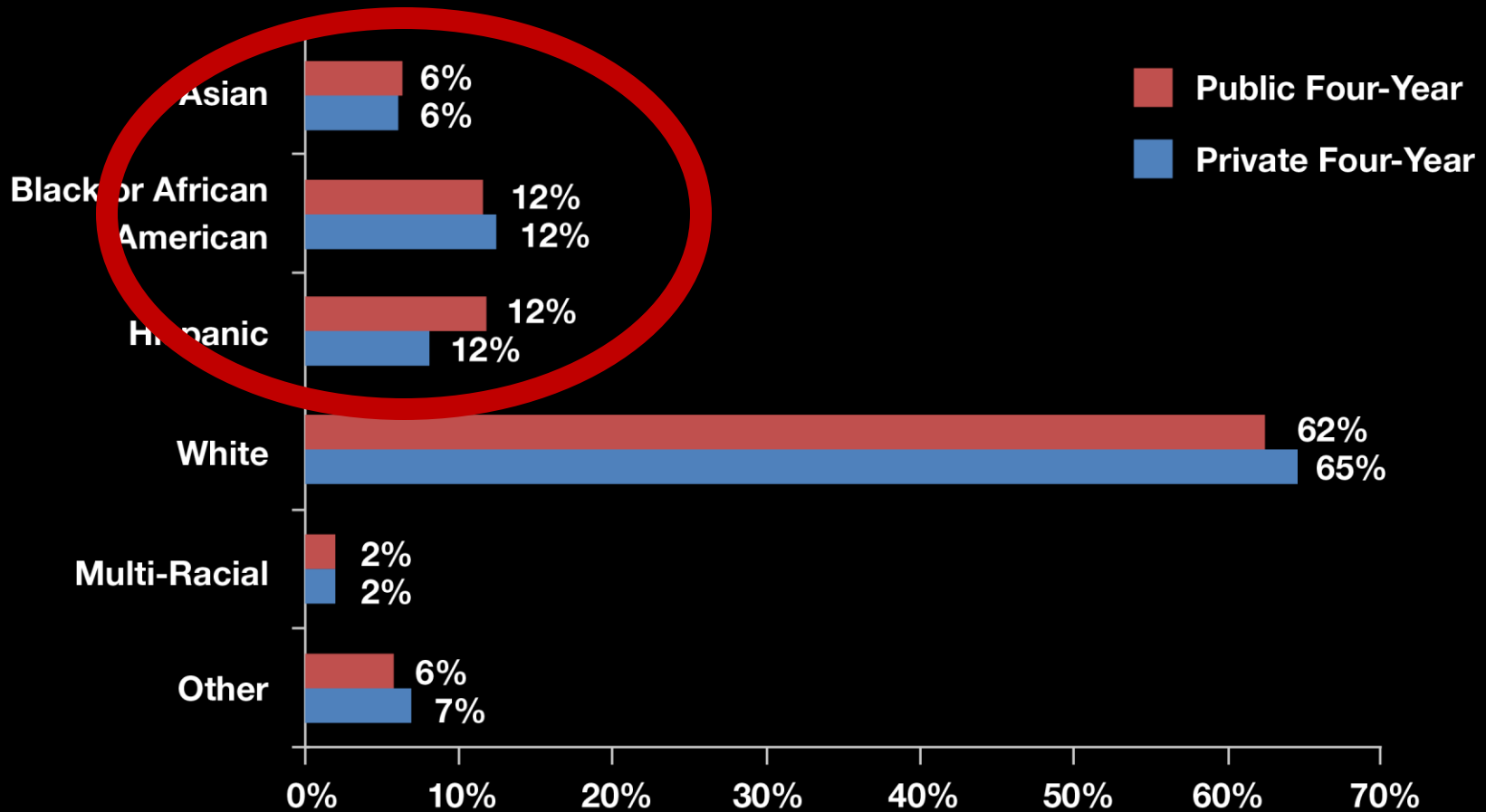
Instruction: 30-35%

“Administrative Bloat”

2000-2010

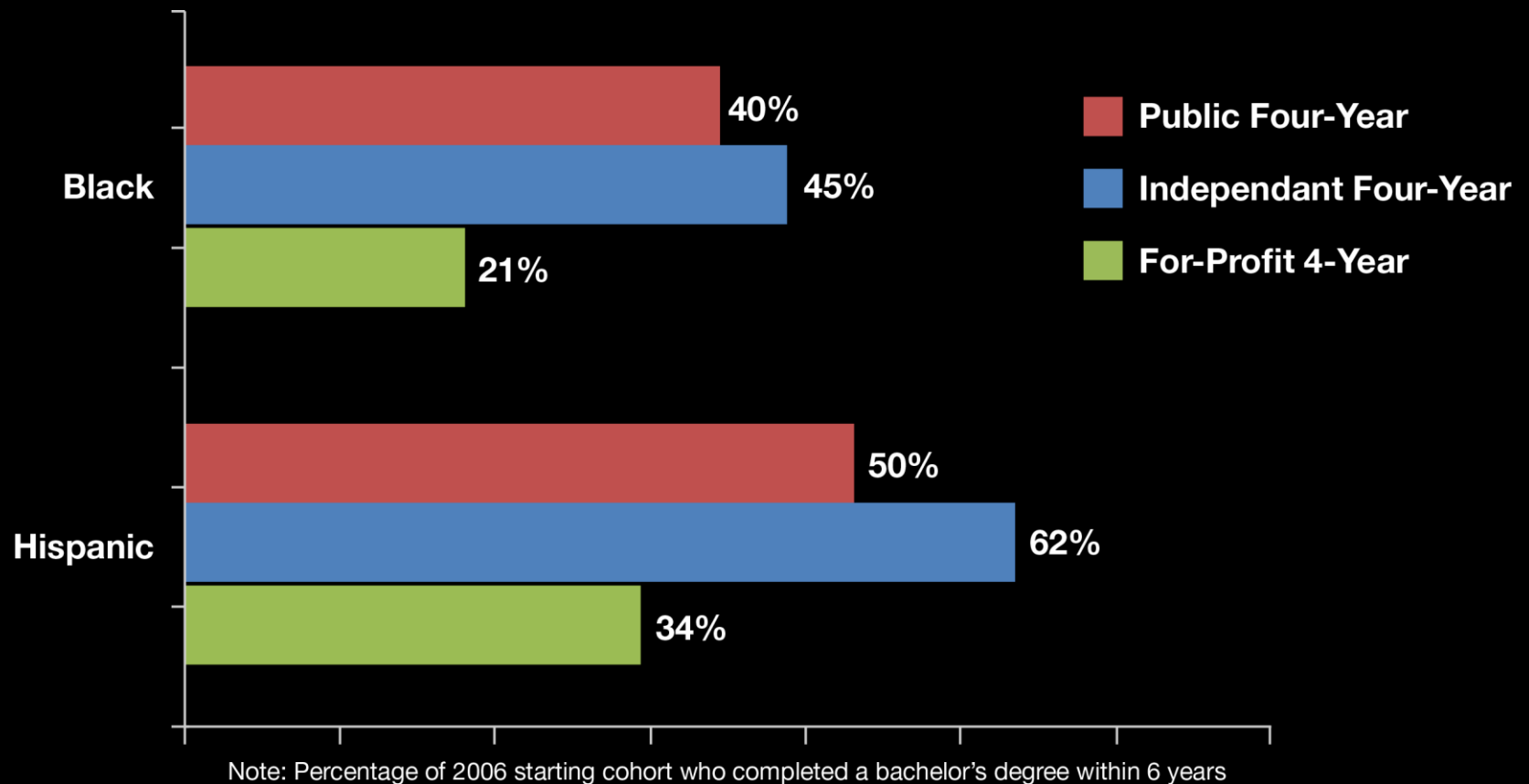
	Public	Private
Presidents	+ 75%	+ 171%
Administration	+ 39%	+ 97%
FT Faculty	+ 19%	+ 50%

Total Enrollment by Race and Ethnicity, Fall 2011



Source: U.S. Department of Education, Condition of Education: 2013, Table 268

Students of Color Graduation Rates





**Rating College
Good/Excellent**

40%: Public

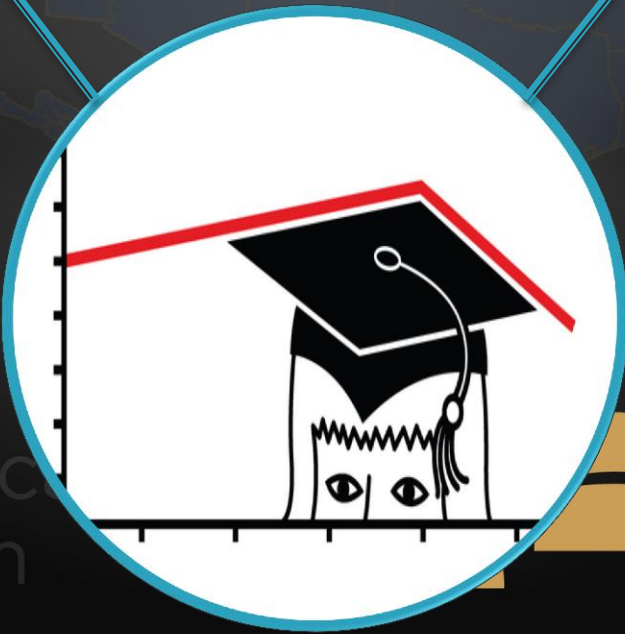
31%: Faculty

76%: Presidents

Value Gap



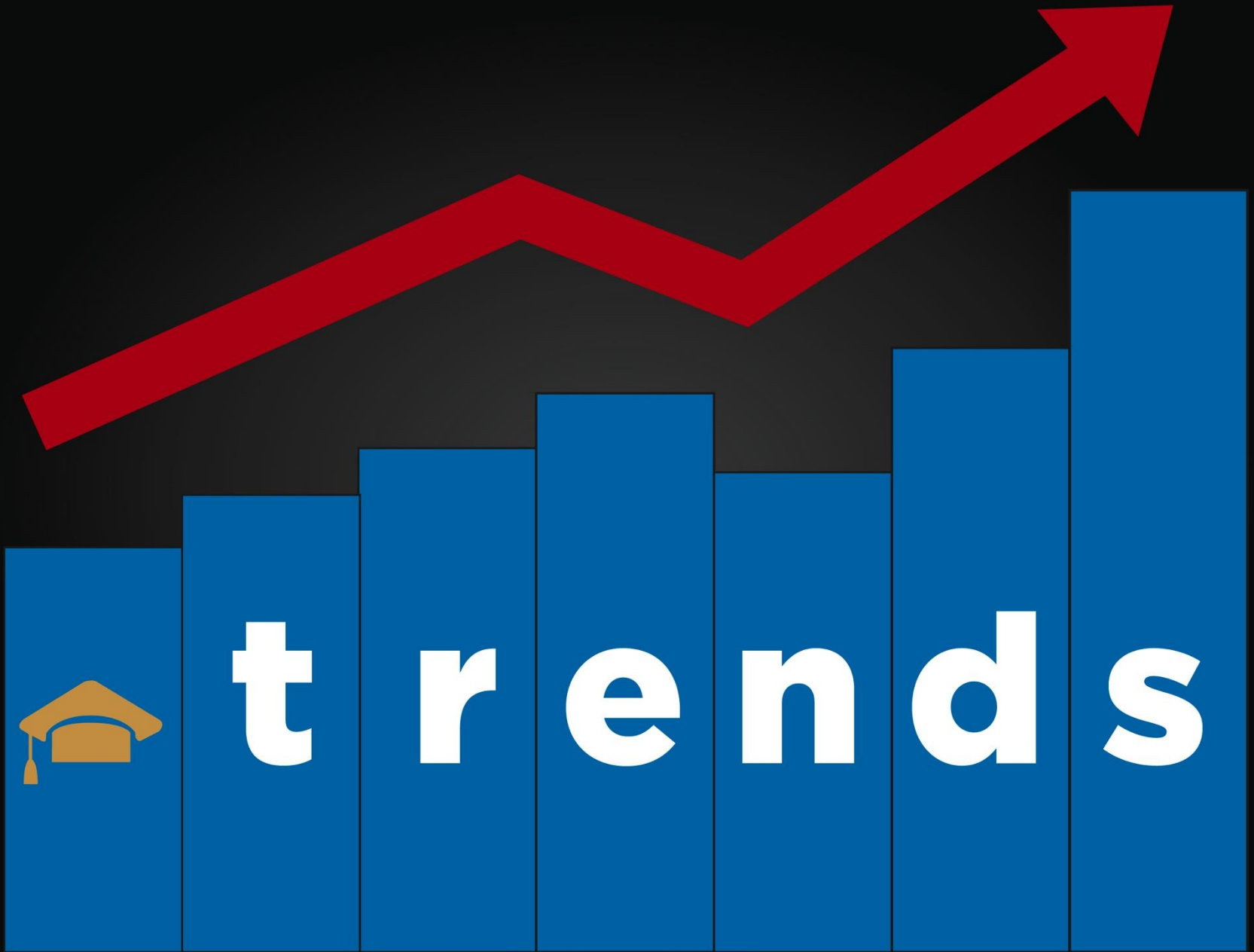
**ACCESS
DENIED**



Higher
Education
Reform



Healthcare
Reform



Trends in Higher Education

- Online & Blended Learning
- Shift to Learning Outcomes
- Modular & Flexible Curricula
- Competency-Based Curricula
- Mass Open Online Courses (MOOC)



Healthcare
Reform



Higher
Education
Reform

Trends in Higher Education

- Universities as 'Clearinghouse' for Degrees
- Rise in Partnerships & Affiliations
- Shift from Traditional Campus to 'Learn Anywhere'
- Changing Student Demographics
- Unbundling of Services
- Different Metrics for Success



Healthcare
Reform



Higher
Education
Reform

Institutions at Risk



Tuition discounting more than 35%



Enrollment under 1000



Less than 10% operating budget to technology



Majority of faculty do not hold terminal degrees



Student default rate above 5%



Tuition dependency greater than 85%



Debt service over 10% of operating budget



No complete online program has been developed



Financial sanction with accreditor



Ave tuition increase greater than 8% for 5 years



Higher Education Reform

Martin & Samels (2009)

Healthcare Reform

TIME FOR
CHANGE



TIME FOR
CHANGE





SCU 2.0



Traditional Universities

**25% of Institutions will
Close or Merge
in 10-15 yrs**

Christensen & Horn, 2013



Mergers to Double
6 per yr

↑ to 15
Annually

“Small College Closures
to Triple by 2017”

MOODY'S

Small College
Revenue ↓ \$100

10-yr Ave
5 per yr

Moody's Investors Service (2015)

Rising Cost

Resort-like Amenities

Increased Regulations

Athletics

Latest Technologies

Resource Rigidity

Compensation

Public Support & Control

Inconsistent Quality

Teaching Assistants

Antiquated
Curricula & Delivery

Low Teaching Loads
for Research

Diminishing Access & Disparities

Student Indebtedness

Return on Investment

Affordability



Rising Cost

Resort-like Amenities

Increased Regulations

Athletics

Latest Technologies

Resource Rigidity

Compensation

Public Support & Control

Inconsistent Quality

Teaching Assistants

Antiquated
Curricula & Delivery

Low Teaching Loads
for Research

Diminishing Access & Disparities

Student Indebtedness

Return on Investment

Affordability



We are not “encumbered” like
many traditional Universities

Nimble





Integrative
Medicine brings
together science
and nature



Challenges

- Medical Internships & Residencies
 - Privately funded / Limited number
- Policy
 - Limited to modality / Reducing scope
 - Diminishes whole-person care
- Research
 - Limited \$ / RCT / Efficacy Studies
 - Whole-systems research



Healthcare



Higher
Education

Challenges

- Health Plan Coverage
 - Annual limits on visits or \$
 - Limited Exam & Management codes
- Regulatory Practice Constraints
 - Not in all states / Scope restrictions
- Language
 - Specific to profession
 - Communication limitations for team



Healthcare



Higher
Education

Challenges

- Small Independent Colleges
 - Many single focused
 - Inherent risk of the 'business'
- Compliance
 - Increasing cost
 - Poor benchmarking data
- Fundraising
 - Poor infrastructure / little experience



Healthcare



Higher
Education

**Implications
for
Practice & Education**

Practice Implications

- Focus on Value Agenda
- Expand an Integrated Practice Units Strategy
- Codify evidence-based algorithms
- Early and continued participation in innovative payment models



Healthcare



Higher
Education

Practice Implications

- Build partnerships and affiliations
- Integrate seamlessly with Health System
 - Preventive low risk care / Pain
- Reach out to industry
- Join and support “Integrative Healthcare” Organizations
- Consider specialty boards &/or residencies



Healthcare



Higher
Education

Education Implications

- Adjust quickly to the changing environment
- Innovative programming
- Build curricula/delivery around the “science of learning”
- Curricula that are module, flexible, & competency based



Healthcare



Higher
Education

Education Implications

- Shift to more experiential learning
 - Certify/Acknowledge student experiences
- Less seat time / More applied learning
- Blended learning (flip classroom)
 - High tech / High touch



Healthcare



Higher
Education

Education Implications

- Facilitate more collaborative practice experiences
- Interprofessional education (IPE)
- Consider partners, consortiums, university systems, or mergers
- Shift fundraising away from institution towards tuition relief



Healthcare



Higher
Education

Education Implications

- Need support from regulators
 - Federal
 - State
 - Accrediting & testing agencies



Healthcare



Higher
Education



Los Angeles College of Chiropractic
College of Eastern Medicine
College of Science and Integrative Health
SCU Health System



SCU will be recognized as the premier evidence-based integrative healthcare university.

What do we do at SCU?

We deliver patient-focused
integrative healthcare

Provide student-centered
interprofessional education



Healthcare



Higher
Education



Source: Michael Porter, Thomas Lee. "The Strategy That Will Fix Health Care." Harvard Business Review. October 2013.

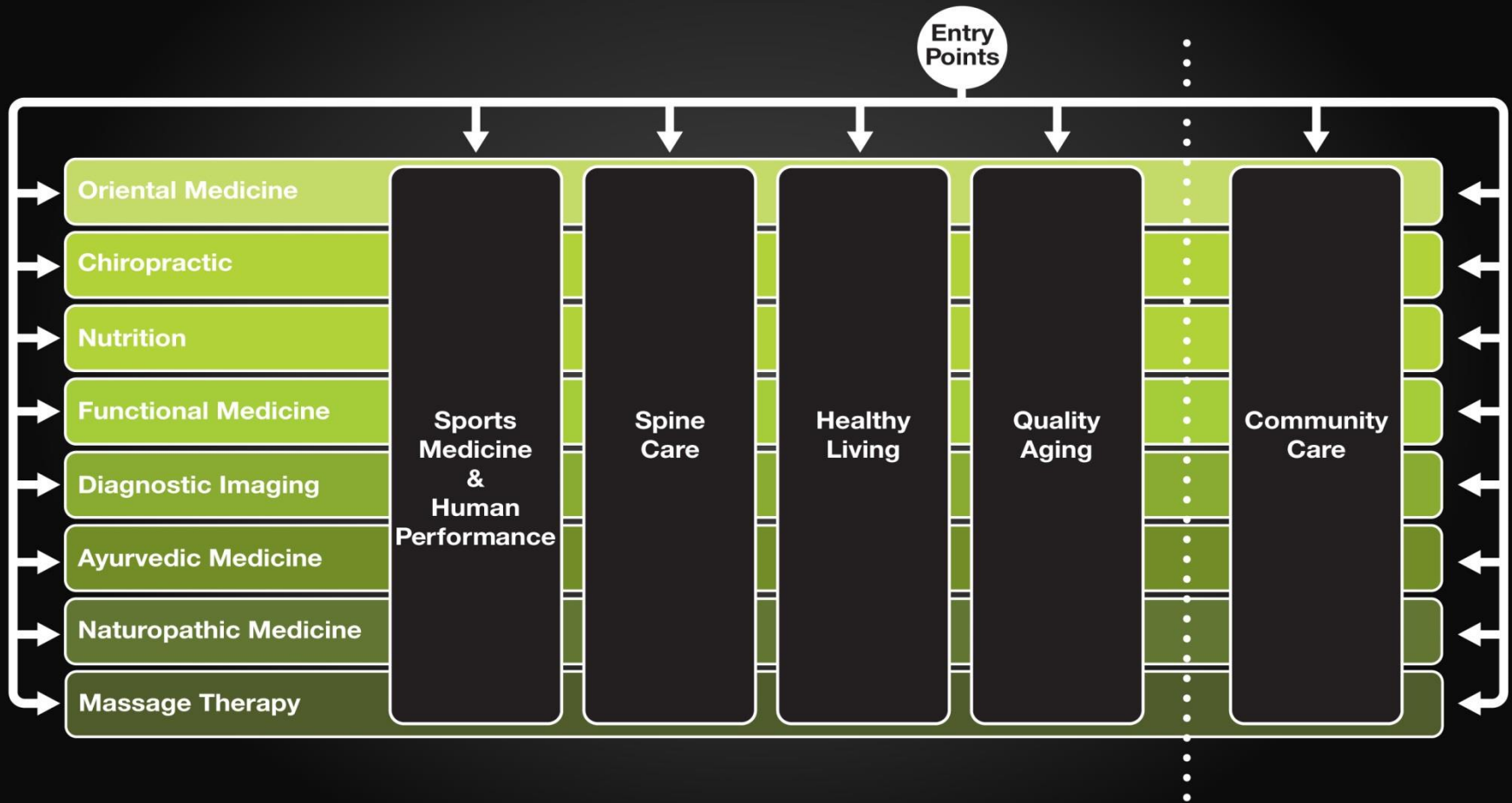


Healthcare



Higher
Education

An Integrated Clinical Experience



Non-Traditional Holistic & Natural Health Professions

Traditional Medical & Allied Health Professions

DAOM

DC

PhD

ND

Ayur.

Nutr.

Emerging
Professions

MD

DO

DNP

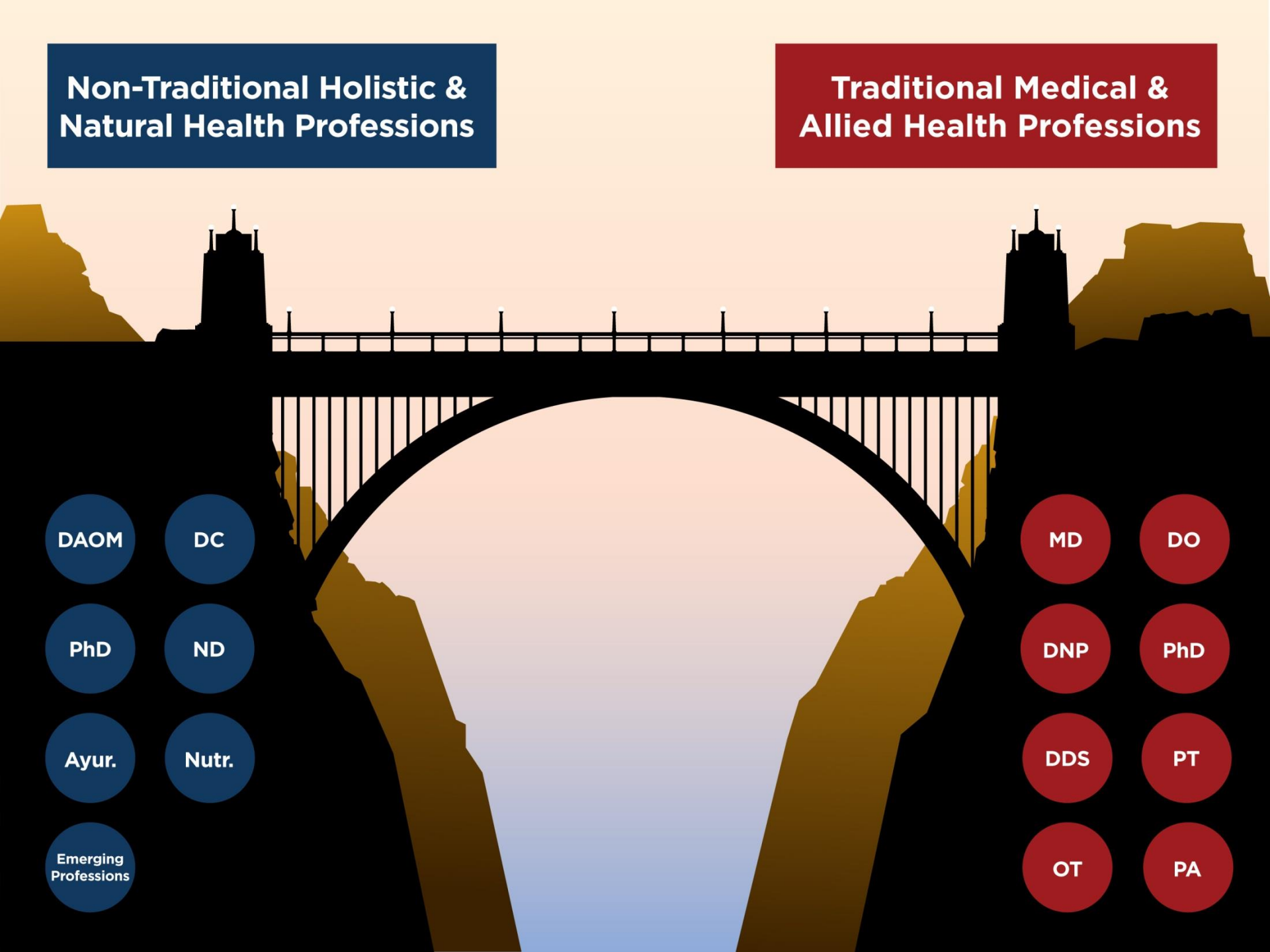
PhD

DDS

PT

OT

PA



Doctor of
Chiropractic

Doctor of
Naturopathic
Medicine

Core Curriculum

Basic Sciences
Diagnosis
Core Nutrition
Ethics
Information Literacy
Environmental Medicine
Collaborative Internships

Doctor of
Acupuncture
& Oriental
Medicine

Master's of
Physician
Assistant

Competencies for Integrative Practice

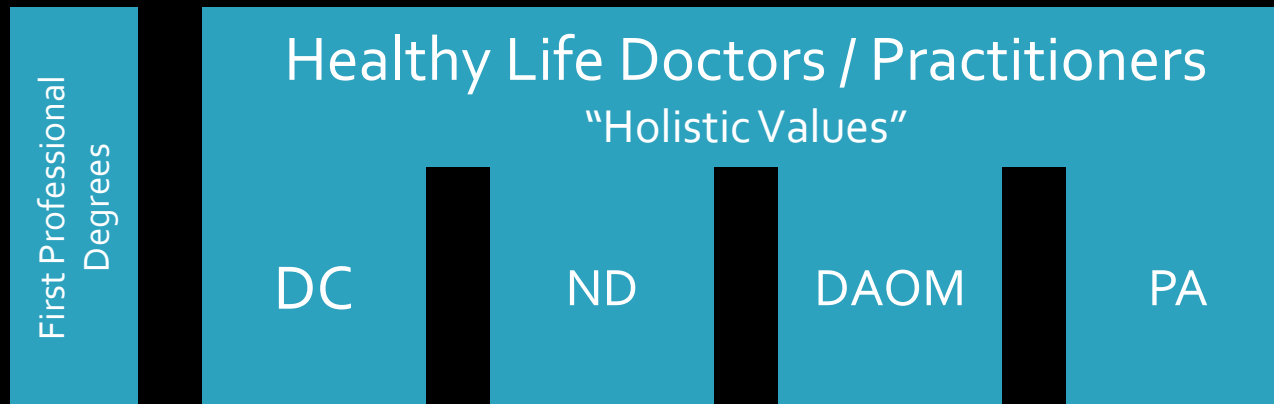
1. Values & Ethics for IP Practice
2. Roles & Responsibilities
3. Interprofessional Communication
4. Teams & Teamwork
5. Evidenced-Based Healthcare
6. Institutional Culture & Practice

Integrated Educational Model



Residencies
Diplomates
Fellowships
Certifications
Certificates

Practice-Ready Integrative Healthcare Graduates



...are healing-oriented practitioners that account for the whole person (Mind & Body), including all aspects of lifestyle. They emphasize therapeutic relationships & make use of all appropriate therapies, both conventional & complementary (1).

Integrative Healthcare Programs at SCU



1. Modified from Andrew Weil, MD

Additional SCU Strategies

- Aligning and supporting ACIM (ACCAHC) & AIHM
- Deploring resources towards whole-system and policy research
- Cultivating partnerships & affiliations
- Engaging in local, state, and national policy advocacy movements



Healthcare



Higher
Education

Additional SCU Strategies

- Meeting the needs of the future student demographics
- Creating curricula that are module, flexible, & competency-based
- Shifting to more internships & experiential learning opportunities
- Providing students choices in curriculum



Healthcare



Higher
Education



Thank You!

