



Inverting the pyramid

Enhancing primary care to deliver new model of care in Saudi Arabia

September 2020



Research across many healthcare systems identified an almost universal paradox between the critical strategic role assigned to the primary care system and its relative lack of investment, importance, or influence.* In short, leaders in healthcare saw primary care as key to the transformation they wanted to make across the health system but did not allow it to be strong enough to achieve this. A strong and enhanced primary care system where citizens are able to access healthcare with a wide range of services in the community can enhance both the patient experience but also allow for local innovation and design, delivering actionable insights to manage the health of the population.

The development of enhanced primary care is a multi-organisational and interprofessional endeavour that requires a diverse workforce, enthusiastically engaged around a shared vision of transforming the way health and care are delivered, keeping the person at the centre of care delivery.

Population Health Management (PHM) can and should be the force that binds collective understanding of the needs and behaviours of the population across organisations starting with the building block of enhanced primary care driving an integrated approach to delivery of pathways articulated by the Model of Care. KPMG and Optum bring a wealth of experience in primary care development and population health management.

What do we mean by enhanced primary care?

Enhanced primary care helps integrate the provision of care and direct patients to the most cost-efficient channels, making hospitals a 'last resort.' Primary care facilities can be the start of integrated care clusters within which patients could seamlessly flow between home, virtual, primary, hospital and long-term health services. The system has the potential to facilitate dramatic changes in care pathways and increased collaboration between provider

organizations and is the natural delivery channel for the model of care pillars.

KPMG's participatory approach to developing a high performing enhanced primary care system is aimed at long-term, systemic behavioural change. A recent report, *The paradox of primary care*, included the following findings and recommendations:

1. Identifying the design principles of enhanced care. We selected four design principles as a starting point for thinking about what patients, caregivers and communities' value most from primary care: **Access and Continuity; Patients and Populations; Information and Outcomes; and Management and Accountability.** These principles are open to be discussed, challenged and adapted to inform Saudi Arabia's journey to a primary care centered system and deliver population health management.
2. Develop enough specificity around the delivery models as set out in the model of care.
3. Create incentives, measurements, contracts and rules of behaviour, blending global and local expertise.

* KPMG International, *The Paradox of Primary Care* (2016); Starfield et al, *Contribution of Primary Care to Health Systems and Health*, *Milbank Q.* 83(3): 457–502 (2005); World Health Organization (WHO), *Declaration of Alma Ata*, *International Conference on Primary Health Care*, Alma Ata, USSR (1978)

In addition to the design principles, Optum has identified seven core interventions that need to be in place to deliver successful enhanced primary care services:



Out of hospital care

Increase community services, proactive anticipatory care using PHM, increased used of digital technology.



Enhanced access to urgent care

Improving responsiveness, flexible teams supporting urgent response and recovery.



Support transition between secondary and primary care

Reducing delays through enhanced integration, proactive support for people following discharge.



Right medicines, right time

Clinical pharmacist based in primary care, supporting medication adherence and self-management.



Enhancing prevention

Addressing behaviours and encouraging self-care.



Supporting people to age well

Early detection of frailty, complexity and dementia, case management support.



Care quality and outcomes

Reducing variations in outcomes, shorter waits for planned care.

Putting these core interventions into practice requires:



Actionable insight to drive decisions.



The ability to quantify the impact that any interventions implemented will have.

Typical steps for quantifying the impacts of interventions:



Develop an unmitigated projection of demand for health and care services for a defined population.



Identify services and population segments which are impactable.



Assess the potential impact of new interventions or benefits package adjustments against unmitigated activity volumes.



Build mitigated spend projections off the mitigated activity volumes.



Compare the relative impact on spend of each new intervention.



Decide which interventions to implement.



Monitor the actual impact as results materialise.



An integrated primary care and community workforce.



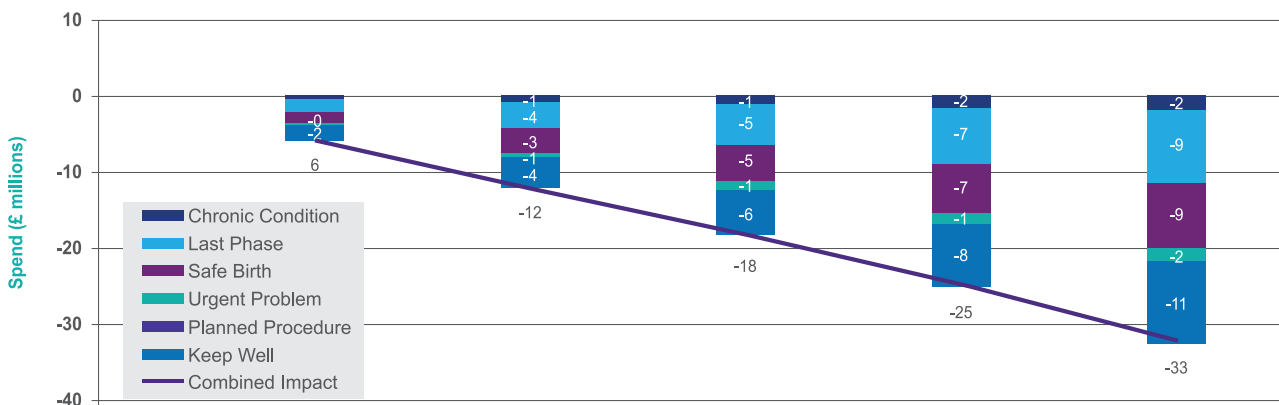
Patient engagement and communication at the heart of delivery transformation.

Working with a health system in the UK, Optum developed a mitigated projection of potential savings over a 10-year period if these interventions were applied across the entire health system. In this case, because demographics matter, the system covered a population of just over a million people with a high number of young people (0 – 14 years old) and lower-than-average number of people over 75. The system partnership included all acute, primary, community and local authority providers serving this population.

The design principles that Optum and KPMG have developed around enhanced primary care, along with their experience in implementing new models of care can be viewed by applying a patient lens to one of the pillars of the model of care.

The following table demonstrates the potential savings against the model of care pillars, what impact this would have overall and how this compares with the newly introduced model of care in Saudi Arabia.

Impact per intervention in the mitigated scenario



The examples below indicate the projected savings within the healthcare system when these interventions are applied.

Out of hospital care

9% decrease in accident and emergency attendances, 7% decrease in non-elective hospital admission, 2% increase in community care, 3% increase in social care.

Enhanced access to urgent care

3% decrease in accident and emergency attendances, 3% decrease in non-elective hospital admission, 11% increase in GP/primary care visits.

Support transition between secondary and primary care

5% decrease in accident and emergency attendances, 12% decrease in non-elective hospital admission, 5% increase in GP / primary care visit, 8% increase in community care.

Supporting people to age well

7% decrease in accident and emergency attendances, 12% decrease in in-patient and day case elective admissions, 13% increase in GP / primary care visit, 2% increase in social care.

Population Health Management supports Enhanced Primary Care

Population health management requires health and care systems to focus on patients rather than organisations, as illustrated in the example below.

A healthcare system that is focused on population health and wellbeing, with strong community teams that are built on thriving primary care services is the best foundation for a population health management approach.

When population health management model is applied, with its distinct population-centered approach and practical and innovative solutions to care delivery, patients become more empowered and practitioners can work on the top of their licenses - maximizing their professional expertise. This way, it also provides fertile grounds for innovation in healthcare provision and fosters collaboration as budgets are integrated and care coordinated around a patient rather than the system.

Abdullah is a 42-year-old man, high BMI, with a family history of diabetes and a stressful job.

- At an employment medical one year ago, he was found to have high blood pressure, high cholesterol and borderline Hba1c.
- His older brother, a smoker, was diagnosed with diabetes two years ago.
- He lives in an extended family setting with his brother, his three children and as his parents.

The Primary Care Practice applies Optum's risk stratification tool across their population and when applied to Abdullah generated the following outcomes:

- The tool identified that Abdullah is at risk of diabetes and cardiovascular events and he is invited into the practice for a check with his wellbeing coordinator. Checks confirm that he has diabetes, hyperlipidaemia and high blood pressure.
- Abdullah is referred to the hospital outreach diabetes clinic, based within the primary care facility, where he sees the diabetologist and diabetes nurse. He begins therapy and starts a structured education programme.
- He is also offered digital support tools for care and case management that have been developed locally by the practice using KPMG's primary care design principles and Optum's analytic capabilities.
- This anticipatory care approach lowers Abdullah's risk profile and prevents a potential catastrophic event from occurring.

This approach demonstrates that:

- Through applying risk stratification techniques, the practitioners were able to reach out to him proactively and begin to manage his care successfully to prevent complications.
- An enhanced capability at the primary care level using innovative solutions and extended expertise allowed him to be treated at one place close to where he lives, granting him a better patient experience.
- His long-term risk was reduced thereby leading to a proactive population health management approach.

Changing models, changing behaviors

Reflecting on the speed of change, we could agree that the global pandemic has been a force for change and transformation to individuals, systems and countries. Healthcare systems have been able to achieve in weeks what they would have done in years otherwise.

When implementing population health management, there are a few instrumental indicators for its success. First of all, how it is used to change the behavior of the workforce at the system level and secondly how it empowers the patient to manage their own lives with the introduction of wearables and access to electronic medical records. Technology and data management are merely an enabler to a holistic, integrated and person-centered system.

Primary care is the key driver for population health management where change is cascaded bottom-up. This change starts with regaining the confidence of patients with more traction at the primary care level. The seamless flow of data across the different layers of the system, with robust referrals, interoperable and integrated information technology. Thus, data can be put in use to elevate quality, access to care and reduce cost.

Implementing the new model of care is not possible without change, managing this change resides in the heart of healthcare transformation. KPMG and Optum have a complementary approach to implementing enhanced primary care across the healthcare ecosystem.

Authors:



Dr. Niti Pall
Global Medical
Director, KPMG



Kate Howie
Chief Nurse & Director of
Clinical Solutions, Optum UK



Samar Nassar
Healthcare Director,
KPMG in Saudi Arabia

Further reading



**The paradox of
primary care**
How Saudi Arabia can
leapfrog world class
primary care systems



**The essence of
extended care**
The next level in implementing
healthcare transformation in
Saudi Arabia

KPMG consists of an international network of member firms providing Audit, Tax, and Advisory services to local, national, and multinational organizations. Currently, it employs 207,000 people in member firms in 154 countries. KPMG has been active in Saudi Arabia since 1992, an early commitment and focus on quality that have been the fundament for our accumulated industry experience. Over the last five years, significant investments in the Saudi firm have led a current workforce of nearly 1,300 people in the Kingdom – a mix of local experience and international expertise from within the global network.

Optum, part of the UnitedHealth Group, is a health services and innovation company on a mission to help people live healthier lives and to help make the health system work better for everyone. Optum is powering modern healthcare by connecting and serving the whole health system across 150 countries. We combine cutting-edge technology, the world's largest healthcare database and vast expertise to improve health care delivery, quality and efficiency. Through our reach, we are revolutionizing healthcare serving more than 100,000 physicians, practices and other healthcare facilities, and 127 million individual consumers.

The information contained herein is of a general nature and is not intended to address the circumstances of any particular individual or entity. Although we endeavor to provide accurate and timely information, there can be no guarantee that such information is accurate as of the date it is received or that it will continue to be accurate in the future. No one should act on such information without appropriate professional advice after a thorough examination of the particular situation.

© 2020 KPMG Al Fozan & Partners Certified Public Accountants, a registered company in the Kingdom of Saudi Arabia, and a non-partner member firm of the KPMG network of independent firms affiliated with KPMG International Cooperative, a Swiss entity. All rights reserved. The KPMG name, logo are registered trademarks or trademarks of KPMG International.

Optum® is a registered trademark of Optum, Inc. in the U.S. and other jurisdictions. All other brand or product names are the property of their respective owners. Because we are continuously improving our products and services, Optum reserves the right to change specifications without prior notice. Optum is an equal opportunity employer. © 2020 Optum, Inc. All rights reserved.