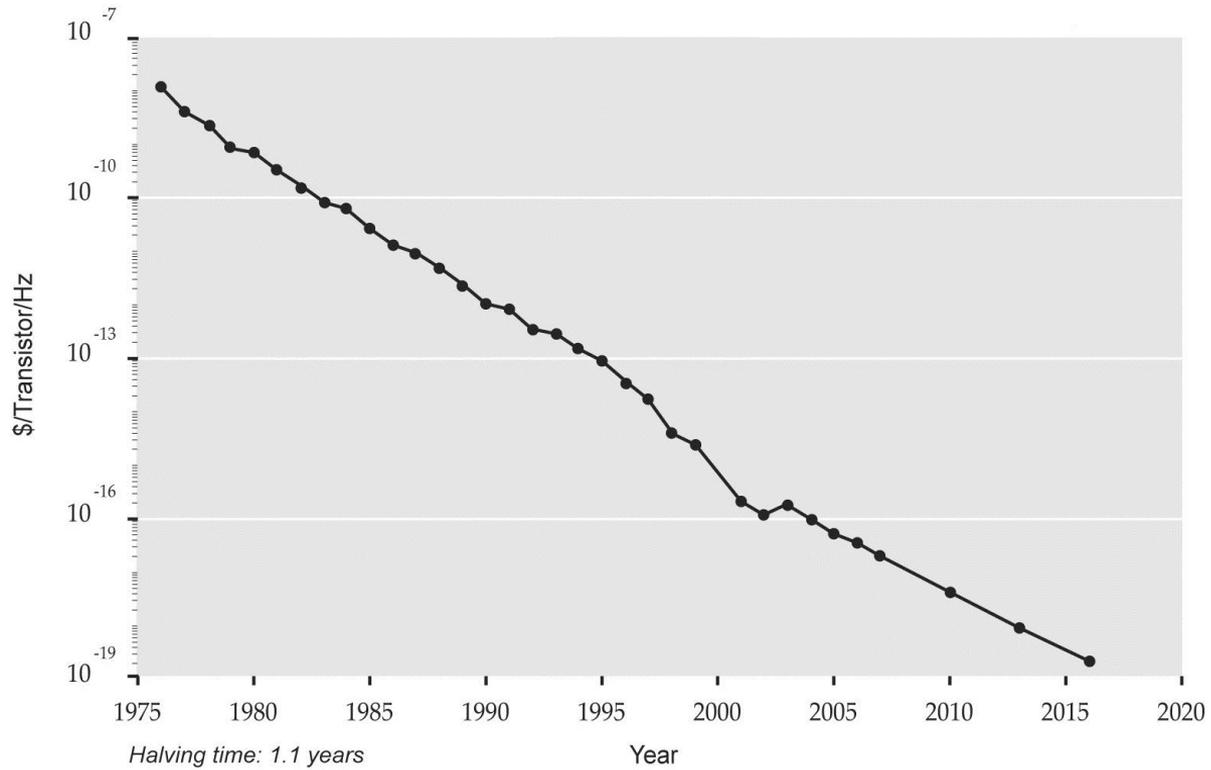
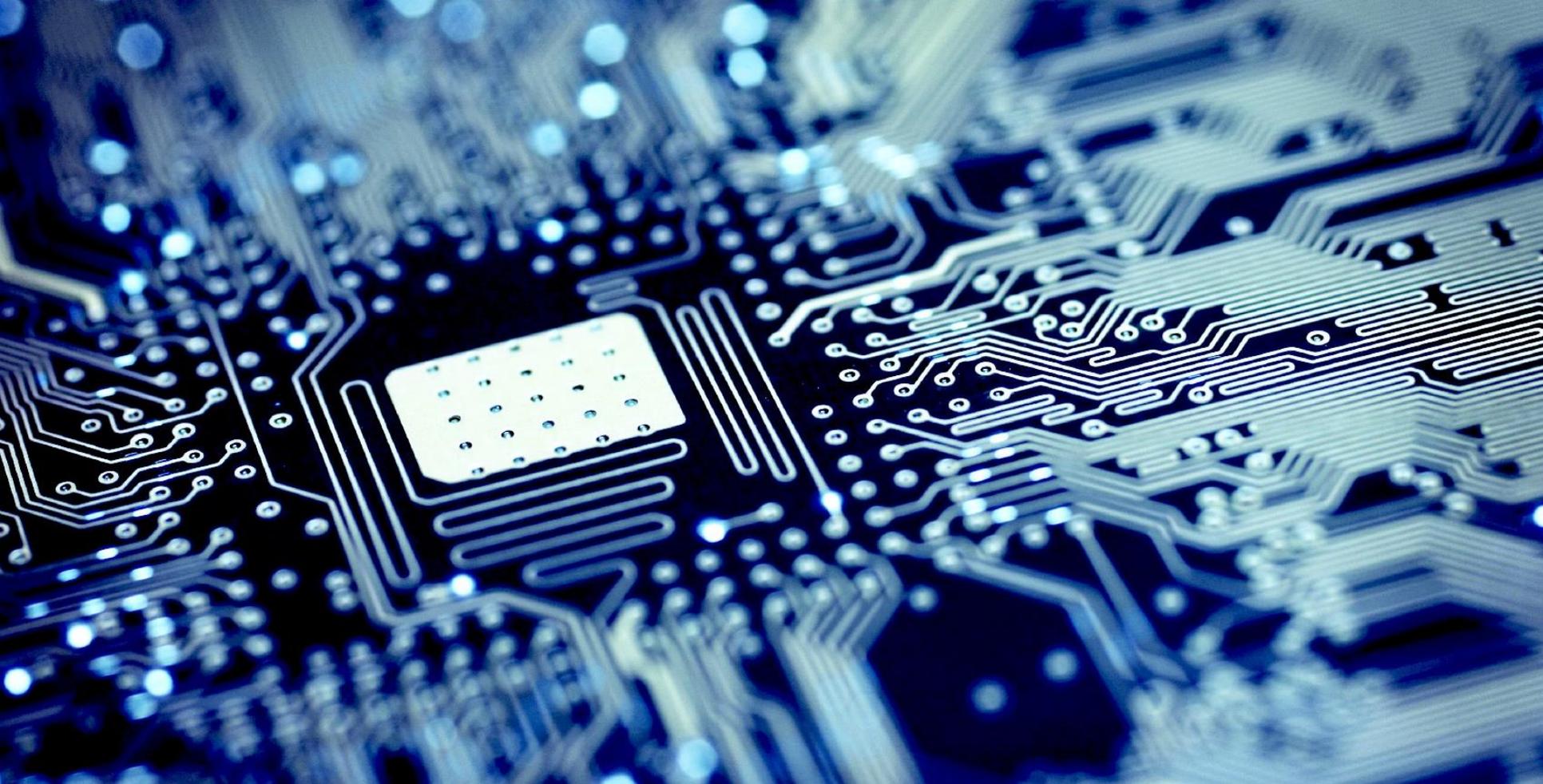


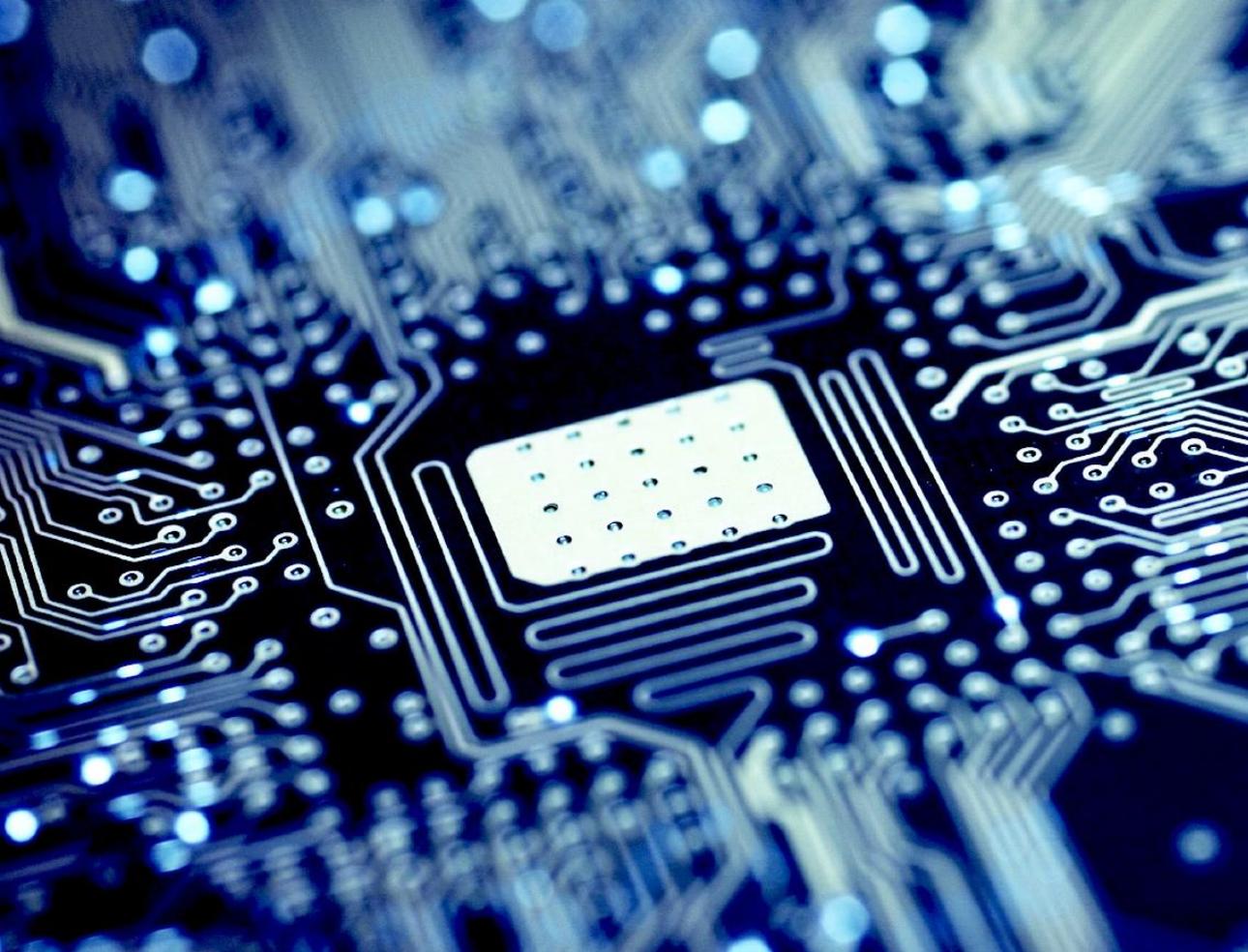


# Supporting Rapid-Cycle Health Innovation

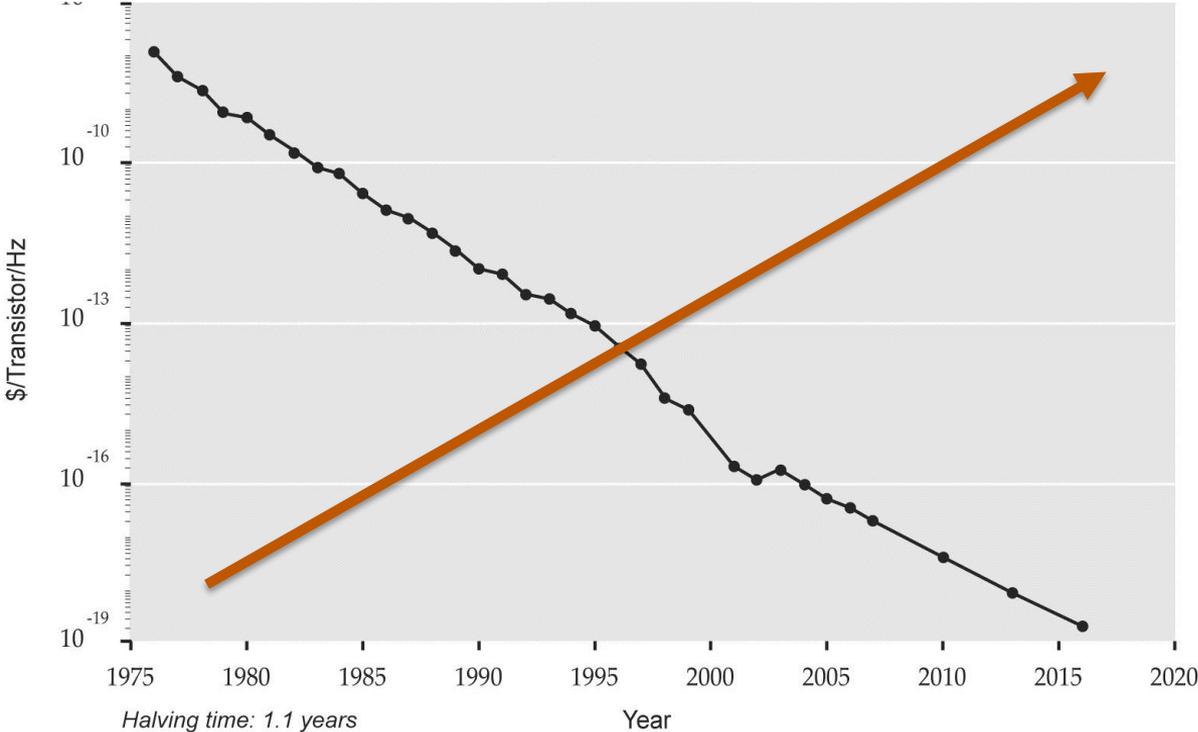
Clay Johnston, MD, PhD  
Dean, Dell Medical School







# Health Innovation is Like Moore's Law in Reverse



Broken

health system

# Broken healthcare delivery system



Invested in the status quo



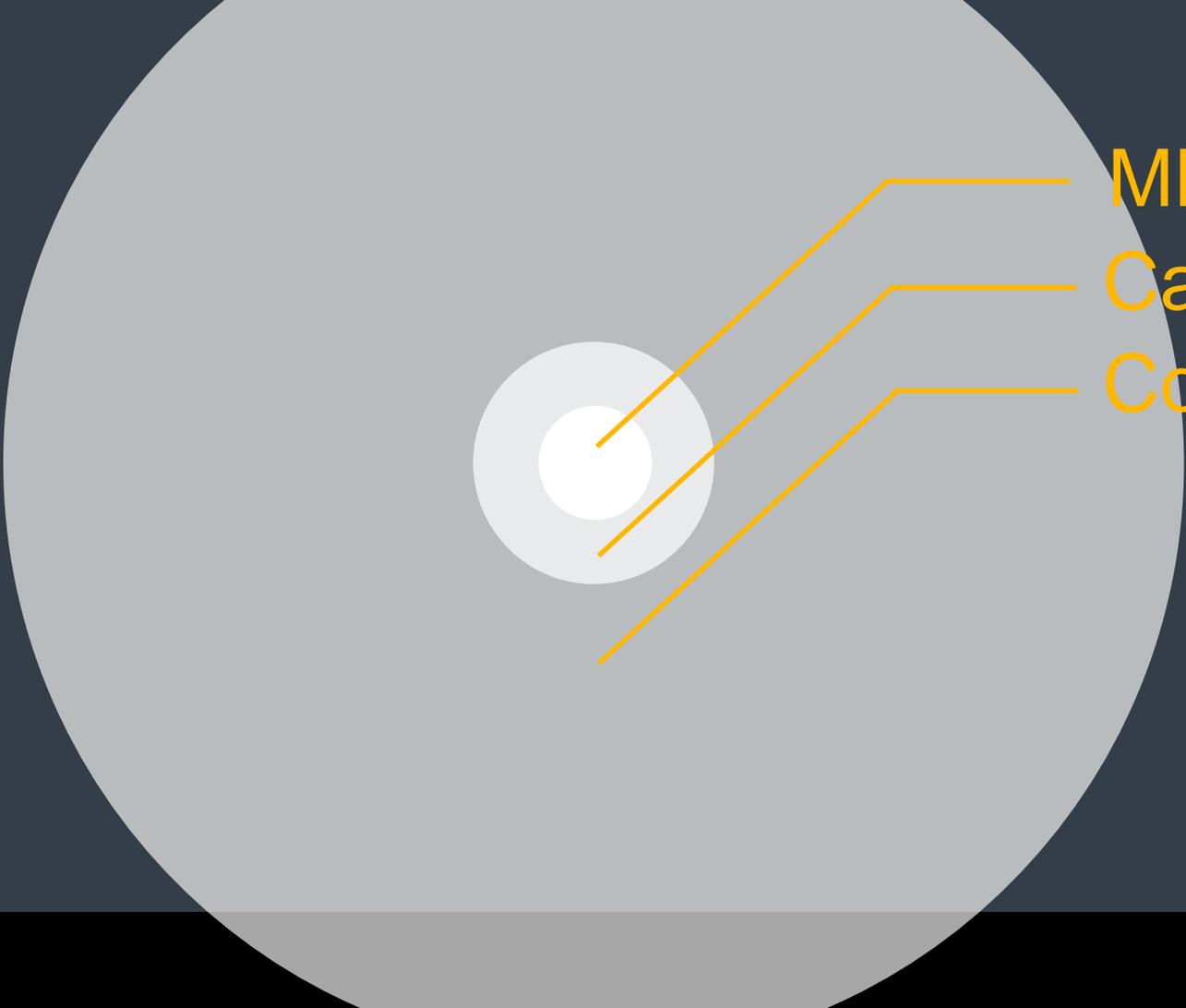
Doing more, rather than  
doing better

# Treating the sickest rather than promoting health

# Resistant to technology and other approaches to enhance efficiency

# Broken community health system





MDs + tools  
Care Settings  
Community

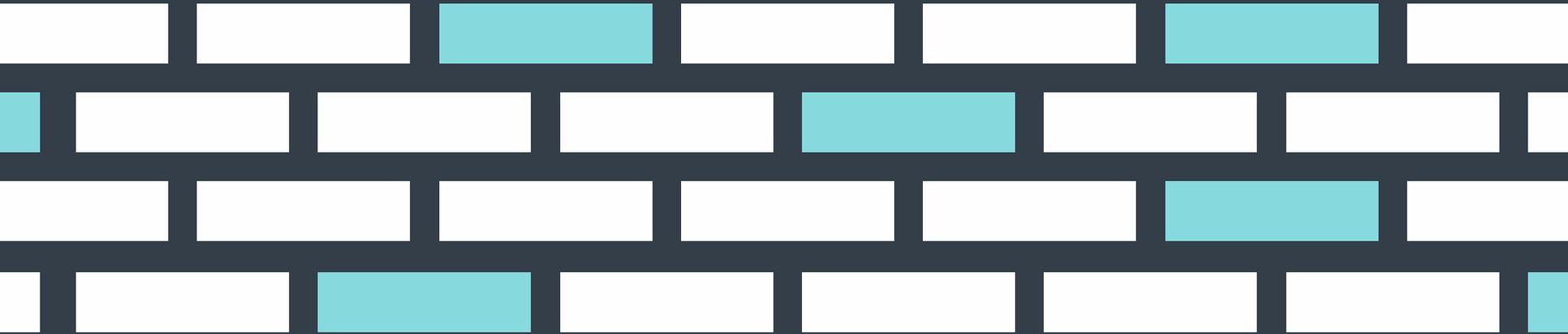


The University of Texas at Austin  
Dell Medical School

# Broken research system



# Research



# Care

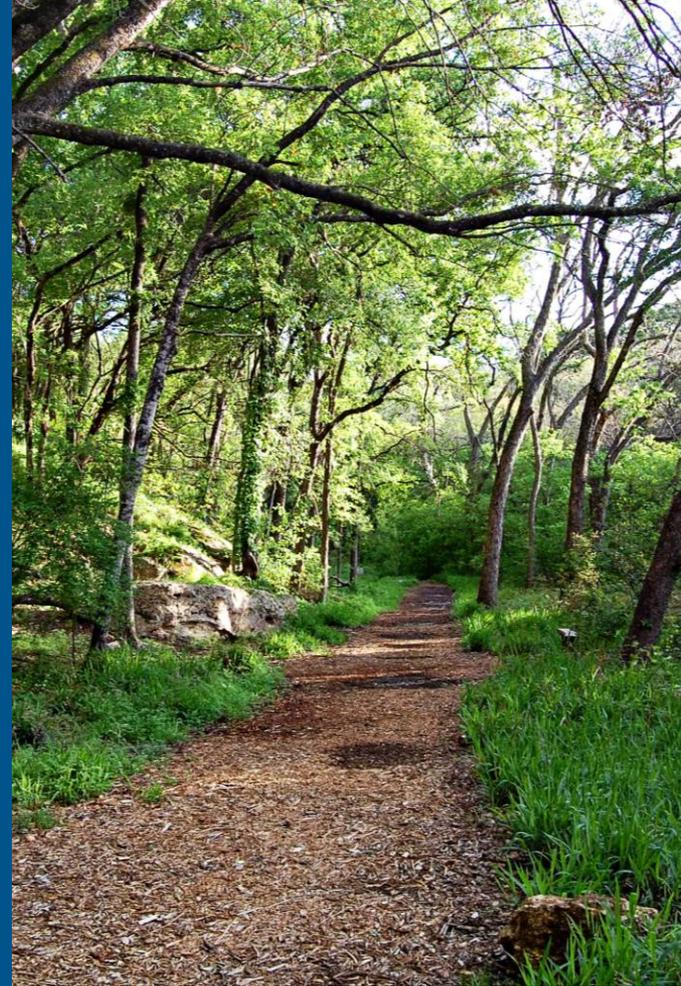
Rethink

Health Ecosystem

Can we  
create a better  
ecosystem  
for health  
innovation?



# What needs to happen



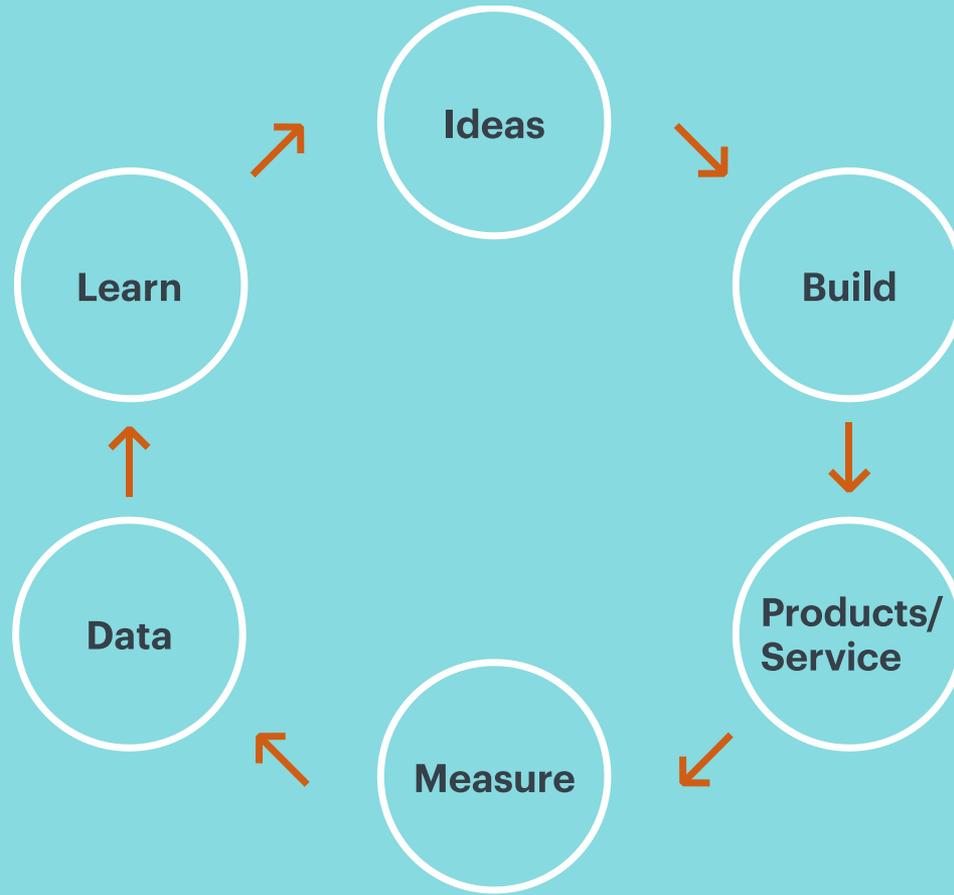
# Create funding streams based on health value

Go directly to payers

New partnerships with self-insured businesses, insurers, hospitals, local health districts and CMS

# Better data

Not just for prioritization, but also to assess impact on an ongoing basis



# Liberate entrepreneurs



# Isn't this just the DSRIP program?



# More questions

Are 5 year cycles the right length?

Are projects all they could be?

What happens when the 5 years are over?

If all the projects are truly successful, why don't we see dissemination?



# Crowd source ideas

Use payers, committed to ongoing funding for success, to select the winners

Allow proposers access to key  
expertise and entre to systems

Use new program funding like  
venture capital



Invest in data infrastructure and  
establish metrics of ROI in advance

Have the discipline to tear down  
under-performing programs and  
build up successful ones

We can accelerate  
health innovation

