

# The biggest **elephants in the room** & **light bulb moments** in health care's **drive toward value**

Key insights from Advisory Board's 2021 Cross-Industry Value Summit

As part of its ongoing research on value and evidence, Advisory Board convened 30 leaders from across the health care ecosystem for a series of discussions designed to unpack the tensions between population health and patient centricity. During the conversations, participants were encouraged to speak candidly about tough issues by explicitly acknowledging the “elephants in the room” and codifying their “light bulb moments.” Below are a few of the most compelling elephants and light bulbs shared during the discussion.

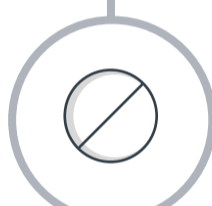


## What's the **elephant** in the room?

Frustrations or the things that go **unsaid**



“Whatever is **best for the patient** sounds nice in theory, but it's overly simplified, not always easy to assess, and not how decisions are made.”



“There is a false premise that ‘we’ are all **working to help patients**. Much of health care is very profit driven with quarterly earnings as the priority.”



“Very few people will acknowledge that cost is a **critical driver of access restrictions**—they think it's someone else's problem.”



“Life sciences have the least trust, yet they have to **generate the best evidence**.”



“Cost/cost effectiveness **assumes we're okay with people dying**. Dead people cost the health care system less.”



“We don't care about all patients. **We already make value-based decisions**.”



## What's your **light bulb** moment?

New insights, ideas, actions, or ways of thinking about value



“Jumpstarting the path to value will require real leadership from executives across the industry. They'll have to muster the courage to say, **‘The path toward value that we charted may not have been the right one.’**”



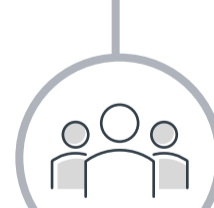
“Assessing **value at the population level** does not always mean that the answer will apply to each and every patient.”



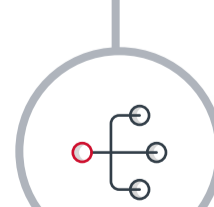
“Value in health care involves not only clinical aspects but also sociology, politics, economics, technological issues... **hence enormous complexity**.”



“Emotions are part of decision-making—yet **patient engagement and patient preferences** are sometimes an afterthought.”



“I like the **patient perspective** being brought into discussions of value. It does not happen frequently enough.”



“Trial and error doesn't work for anyone—**so why does it still lead?** What does it take to change?”