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Commentary

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The Value of a Multi-Stakeholder Regional Collaborative

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It is a time of structural change in healthcare in California and around the country. Every stakeholder is confronting massive forces that are transforming the healthcare system. Implementation of the Affordable Care Act is a major factor driving change, but other forces contribute to the dynamic nature of the California healthcare marketplace. They include industry consolidation, clinical integration, increased transparency, reimbursement changes, federal state and local budget pressures, and increased emphasis on value purchasing.

Against this backdrop of supercharged change, the Berkeley Forum brought together key leaders of health systems, health plans and medical groups, along with Federal and State government leaders and regulators to help develop a vision and an action plan for the state's healthcare delivery system.

The Berkeley Forum provided an opportunity for these leaders of multiple sectors to meet and discuss the future of healthcare in the state. I was honored to serve as a consultant to the Forum and act as facilitator of the meetings.

From that perspective I would offer five observations on how to unlock the value of multi-stakeholder regional collaborative efforts.

- **Seek Out Senior Leaders and Multiple Perspectives.** The Berkeley Forum deliberately sought the active participation of CEOs or the most senior officials in the case of public sector leaders. Stakeholders included health plans, medical groups and hospital and health system CEOs as well as government officials. While each of the stakeholder groups had their own sophisticated trade groups representing their sectoral interests, the Forum provided an opportunity for them to discuss industry-wide issues from multiple perspectives. (Important statewide groups such as the Integrated Healthcare

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Association bring together multiple stakeholder perspectives focused on improving and advancing integrated–coordinated care and every effort was made to ensure the Forum’s efforts were not duplicative.)

- Create a Neutral Space with Objective Data. The Forum was convened through the auspices of the University of California, Berkeley’s School of Public Health and the Forum’s work was funded through financial contributions to the University by the private sector participating organizations. These factors helped create a neutral space. An academic team at Berkeley led by Dr. Stephen Shortell and Dr. Richard Scheffler provided the scholarship and research capability to support the Forum discussions.
- Define Participants, but Recognize it is Tricky. A key question for the Forum was who to include? The primary focus was on bringing leaders from the private sector delivery system and health plan marketplace together with state and federal officials. Participation could have been expanded to include more safety net providers and academic medical centers and this year the UC medical centers and the University of Southern California (USC) medical center will participate. A key stakeholder missing in my view was private purchasers, particularly large self-insured employers, a group I would strongly recommend including for any region seeking to replicate this type of effort. (It should be noted that Forum staff did make great efforts to debrief with these groups and keep them informed of the process.) Finally, all multi-stakeholder groups of this sort struggle to represent the “consumer” perspective. The Forum did not attempt to recruit consumer representatives but was mindful of the consumer perspective and drew on public opinion research in the course of preparing background materials and briefing papers.
- Call for Statesmanship and Common Ground. The Forum tried to avoid issues that could have bogged down discussion and were the subject of significant marketplace or policy dialogue. For example, the Covered California exchange was in set-up mode and all actors were actively engaged with the process as marketplace participants or through their respective trade associations or own public affairs efforts. The group decided the Forum did not need to duplicate those efforts. Instead, the group identified issues such as the conversion of payment away from fee for service, the role of palliative care and the increase in physical activity as key areas of opportunity.
- Respect Anti-Trust Sensitivities. From the outset the Forum participants insisted on making sure the discussions were conducted in a manner that was above reproach from any anti-trust concerns. The Forum retained expert legal counsel to attend all meetings and review all documents and briefing papers to ensure that discussions met appropriate legal standards.

Overall, the Forum provided participants with a unique opportunity to engage in discussion and develop a research foundation on critical issues for California Healthcare. Bringing together senior leaders in structured sessions supported by high quality research can significantly advance the quality of public policymaking and foster dialogue and collaboration among key stakeholders.