

BIAC ACTIVITY UPDATE

HEALTH CARE TASK FORCE

January – July 2011

ABOUT BIAC

The Business and Industry Advisory Committee to the OECD (BIAC) was constituted in March 1962 as an independent organization officially recognized by the OECD as being representative of business and industry. BIAC's members include the industrial and employers' organizations in the OECD Member countries as well as a number of observers and associate expert group members.

In the framework of its consultative status with the OECD, BIAC's role is to keep the OECD informed of the private sector's response to different policy options. BIAC offers business and industry an excellent opportunity to participate in inter-governmental discussions on policy issues, thus giving the business community a chance to shape the development of long-term policies in OECD countries.

The OECD work on health care is intended to provide governments with the analytical basis to develop health care policies that are both effective and economically efficient. This work includes health care performance reviews, data collection, projections, as well as policy analysis in different areas related to health. The BIAC Task Force on Health Care Policy contributes to the broad range of OECD activities to ensure that business considerations are adequately reflected.

This report provides an update on the main activities of the BIAC Task Force during the first half of 2011 as well as a short overview of future OECD events.

BIAC SECRETARIAT

For further information, please contact:

- **Hanni Rosenbaum,**
Senior Policy Manager
rosenbaum@biac.org
- **Salette Bellavoine,** Assistant
bellavoine@biac.org

Phone: 33 1 42 30 09 60

Visit our website www.biac.org

BIAC TASK FORCE LEADERSHIP

CHAIR:

Ms. Nicole Denjoy
Secretary General, COCIR



VICE CHAIRS:

Mr. James Anderson
GlaxoSmithKline (United Kingdom)

Dr. Hasan Kus, MD
Anadolu Medical Center (Turkey)

Dott. Alberta Sciachi
Italian Association of Private Hospitalisation
(Italy)

Ms. Kalliopi Spyridaki
SAS (United States)

COMMITTEE ACTIVITIES IN 2010

BIAC co-sponsors OECD's 50th anniversary event on health reform

To celebrate 50 years of health reform, the OECD and BIAC hosted a one-day high-level conference on 22nd June that focused on addressing the challenges of ageing and multiple morbidities. Organized on the occasion of the 50th anniversary of the OECD, the conference brought together over 100 senior policymakers, business experts and academics.

Led by Ms. Nicole Denjoy, Chair of the BIAC Task Force on Health Care Policy, BIAC highlighted the business case for greater collaboration with governments to generate improved health outcomes and greater efficiency in the future.

Ms. Denjoy chaired the conference session that explored the overall challenge of ageing and multiple morbidities. Sanofi CEO Christopher Viehbacher, chaired the afternoon session on innovation, partnerships and multiple morbidities.

Business, as contributors to health budgets, employers of older workers, and providers of goods and services, has a vested interest in reducing the overall cost burden, while increasing efficiency and quality of health care. Close co-operation with governments will help incentivize the business community to make the necessary investments today that will yield the solutions needed for tomorrow.

Some of the areas needing modernizing, and where business can provide considerable expertise, include financing and payment systems, human resource policies, and innovation and partnership approaches; three of the major issues addressed during the conference.

The conference, which was formally co-sponsored by BIAC, provided an excellent opportunity to highlight BIAC's pro-active contribution to the OECD work on health care. In addition to providing two high-level session chairs and a strong delegation of business experts, BIAC facilitated and contributed two academic background papers

to the conference and hosted a cocktail to mark the anniversary event.



BIAC looks forward to future opportunities to provide business input to OECD work in the area of ageing.

For more on the OECD conference: www.oecd.org/health/50yearconference



Key business recommendations for meeting the challenges of ageing

In its submission to the OECD 50th anniversary conference, BIAC called upon the Organization to address active ageing as a horizontal priority for the OECD, in which the Health Committee, in addition to other parts of the OECD, should pay an active role.

Specifically related to health, BIAC recommended to:

- Encourage active ageing and address the complexities of managing multiple morbidities by seeking close cooperation and partnership with the private sector;
- Better manage costs by rewarding results and seeking ways to improve efficiencies;
- Consider medical workforce and skills strategies to support active ageing while aligning human resource policies to the new demographic realities;
- Foster innovation for health promotion, disease prevention and treatment as well as other innovative approaches that improve the lives of older citizens.

BIAC's submission to the conference can be found online: www.biac.org/policygrp/profile-health.htm

ICT for a smarter health and wellness future

A major BIAC delegation participated in the OECD/NSF workshop on "building a smarter health and wellness future", which was held in Washington on 15-16 February. Key issues discussed included the expanding needs of health and social systems, greater patient empowerment, opportunities provided by new smart models of care, and specific actions to build a smarter health and wellness future.

One of the key conclusions of the workshop was that portable technology and M-Health can deliver significant social benefits. These technologies can increase patient access to health services and information, patient empowerment and self-care and improve the way health professionals deliver health services, particularly for chronic disease prevention and management. The workshop outcomes point to the need for a multi-

stakeholder policy framework to create the conditions for sustainable and scalable M-Health and to accelerate innovation in this area.

Some of the issues raised by experts at the workshop are already taken forward by the project “ICT’s for a silver economy”, which aims to further explore how smart technologies can be leveraged to innovate services and address the challenges of ageing societies.

BIAC has also been involved in discussions on health ICT and privacy and has provided detailed comments on the occasion of the June consultation with the OECD Health Committee. The BIAC talking points for the consultation are available on our password-protected website (click [HERE](#)).

New work on the economics of prevention

Over the last few years, BIAC had been actively involved in OECD work on prevention, which resulted in a book on obesity and the economics of prevention, the main findings of which were presented to Health Ministers when they met in October 2010.

In December 2010, the OECD Health Committee approved the establishment of a new expert group on prevention. A first expert meeting took place on 31 March - 1 April, which was intended to collect comments on future work in the following areas: the prevention of harmful use of alcohol, enhancing OECD’s modeling capabilities, and early diagnosis of chronic diseases. BIAC provided initial comments on the issues of health literacy and the prevention of harmful alcohol use during the June consultation and will follow up with more detailed input over the coming weeks and months.

New work on pharmaceutical pricing and innovation

In 2008, the OECD Health Committee published its report on “Pharmaceutical Pricing Policies in a Global Market”, to which BIAC had actively contributed. Further to a proposal by the UK, the OECD is now considering new work in this area. The primary objective would be to document policies and experiences among OECD countries, especially on policies used by member countries to reward value and innovation in pharmaceutical pricing and reimbursement policies. The main output of the project is expected to be a comparative analysis of the value-based pricing policies adopted in a sample of selected countries.

During the June consultation with the OECD Health Committee, BIAC mentioned that in principle the proposed research could make a useful contribution and underlined its interest in being closely involved in the further development of the project.

Mental health

Mental disorders account for one of the largest and fastest growing categories of the burden of disease with which health systems must cope. Moreover, many mild to moderate mental disorders are under-diagnosed and untreated, meaning that a significant proportion of the population suffering from mental ill health remains hidden. Mental disorders also account for a significant share of health spending. Given the large burden of the disease and the variations in financing, delivery and outcomes, there is considerable interest in how to measure the performance of the mental health system in an objective way.

It is in light of these challenges that the OECD launched a new project in January 2011, which currently has two main work streams: (1) conducting reviews of evidence and best practices in key policy areas; and (2) building and applying a framework for assessing mental health system performance, particularly value-for-money. The report is expected to result in a publication on what makes a high-performing mental health system based on the evidence available. BIAAC will be actively involved in this project, providing input both from the perspective of implications for employers and solutions provided by specific industries.

Enabling innovation in biomedicine and health technology

While the OECD Health Committee is taking the lead in the area of health policy, health issues are being addressed in several OECD policy groups. The OECD Working Party on Biotechnology has carried out important work related to innovation in biomedicine, including on the following issues: health research infrastructures; intellectual property rights, collaborative mechanisms and knowledge markets; health research infrastructures; as well as on regulatory policies that affect the approval and uptake of new technologies and new business models for bringing health products to market. The 2010 synthesis report on biomedicine and health innovation provides a review of some of the main lessons and policy messages that have emerged from this significant body of work. Further work is envisaged in the areas of innovative governance and personalized medicine and global public health.

At the initiative of BIAAC experts, members of the Working Party on Biotechnology also participated in a meeting in June to discuss the possibility of using Alzheimer's disease as an integrated case study through which to

continue work in biomedicine and health innovation. In light of the significant health and economic impacts of the disease, it was suggested to convene a workshop to discuss and prioritize issues by which to approach innovative governance and biomedicine through the lens of Alzheimer's disease.

BIAAC brainstorming meeting on future priorities

At the last meeting of the BIAAC Task Force on Health Care in June, it was underlined that in addition to commenting on on-going OECD work, BIAAC should provide pro-active business input to the OECD on issues that are of importance to the business community.

Among others, the following topics were suggested for further consideration:

- What employers can do to proactively maintain a healthy and active workforce
- Business initiatives with regard to skills, education and health literacy
- Best practice examples of how innovation can contribute to better compliance

We would appreciate your input and comments on the above-mentioned proposals and would welcome any additional suggestions for topics you might have.

UPCOMING MEETINGS 2011

Please note that this is a provisional list and that some dates might be subject to change.

3-4 October 2011

National Health Account Experts

5-6 October 2011

OECD Health Data National Correspondents

17-18 November 2011

Health Care Quality Indicators Meeting

30 November 2011

BIAC TASK FORCE ON HEALTH CARE POLICY

1-2 December 2011

OECD Health Committee

Consultation on the first day

OECD PUBLICATIONS

Help wanted? Providing and paying for long-term care

As life expectancy increases, ever more people want help in order to be able to live their lives to the full for as long as possible. How will demographic and labor market trends affect the supply of family, friends and care workers available to the elderly? Will public finances be threatened by the future costs of care? What should be the balance between private responsibility and public support in care giving? This book addresses these and other important questions related to long-term care.

OECD Health Data 2011

OECD Health Data 2011, released on 30 June 2011, offers the most comprehensive source of comparable statistics on health and health systems across OECD countries. It is an essential tool for health researchers and policy advisors in governments, the private sector and the academic community, to carry out comparative analyses and draw lessons from international comparisons of diverse health care systems.

Valuation of Environment-Related health Risks for Children (published in January 2011)

Is the value of reducing environmental risk greater for children than for adults? If so, what does this mean for policy makers? This report, the final output of the Valuation of Environment-Related Health Impacts (VERHI) project, presents new research findings on these key environmental policy questions.

For further information on OECD health publications, please refer to the following link: <http://www.oecd.org/health/>

[Frequently Requested Data](#) – A selection of **key indicators** from OECD HEALTH DATA.