

Healthcare Transformation

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Welcome Editorial: Seize the Moment



Stephen K. Klasko, MD, MBA

would love to say that the idea for this Journal began with some academic grandiose plan in mind, but that would be a lie, and I certainly do not want the first sentence of the first edition of *Healthcare Transformation* to be untrue. It actually began at a Philadelphia Eagles game as I took the Uber down to the stadium, gathered the tickets I had bought on an internet site with one click and sat down in my seat. It hit me right then and there. How come everything I have taken for granted in all other parts of my life still eludes us in healthcare? I can do all my shopping, traveling, and even ordering of reserved seats for the new Star Wars movie six weeks in advance, but if the Eagles give me a stomach ache or a rash, my unscheduled care options are much more limited.

This time, I figured I would solve the dilemma by ordering a beer. Now, I said to myself, at least stadium vending is as bad as healthcare in making it hard for consumers. And there it was. Just as I was about to get up, climb over the twenty people between me and the aisle, and miss a set of downs so that I could stand in line, I suddenly get a text message on my cell phone. "If you don't want to miss a play," it said, "download this app and make a food and beverage purchase directly from your seat without missing a down." And so I did.

I slept badly that night ... the beer and the Eagles' loss didn't help ... nor did the dream/nightmare I had that went something like this: What if we lived in an alternate universe in which everything ran like healthcare? What if the alt-Uber made you fill out the same forms before you ordered a ride each time? Or the alt-Amex sent you undecipherable bills? Or the alt-gmail would not let you communicate with anyone unless you had the same computer? It was a bad dream ... and when I awoke, I made a commitment that not only did I not want to live in that alt-universe, but the real challenge was in how to create a different alternate future where healthcare runs like one of those cool Silicon Valley companies.

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So I called the people who now are on our masthead as editors and editorial board members, and every one of us recognized the obvious—as **Buckminster Fuller** said, “You never change things by fighting the existing reality. To change something, build a new model that makes the existing model obsolete.”

So, welcome to the new model of healthcare. Of course, we don’t know exactly what it is yet, but we do know this: Optimistic revolutions start with ideas, so that those of us who (1) recognize that we are unprepared for the future, (2) understand that we will need a whole different level of service and skill sets if we hope to have an optimistic future, and (3) don’t believe a miracle is going to just occur have a resource to share our ideas, successes, and even transformative failures (which any entrepreneur would say teaches you more than successes).

In this edition alone, you will hear from **Aneesh Chopra**, the first chief technology officer under **President**

Obama, who took on the similar challenge of dragging government services into the future, and at the same time from **Jack Welch**, who has taken his expertise in creating leaders and built an educational platform for physicians and other healthcare professionals to obtain a “real life MBA . . . and a real MBA.” You will have the opportunity to hear from experts on whether telehealth is a technology waiting for a purpose or the “Uber of unscheduled care.” You will be challenged by our first peer-accepted articles, ranging from systems approaches to healthcare to retail medicine. And since we are transforming, our online editions will give you plenty of opportunities to discuss topics through various sites and link to other related transformers.

If you’ve gotten this far, you are one of us. “Us” includes physicians, nurses, pharmacists, healthcare professionals, pharma and medical device employees and executives, insurers and retail pharmacies, who want to be more optimistic about the future than the past. People who want to realize what will be obvi-

ous 10 years from now and do it today. People who want to change the DNA of healthcare by focusing on the customers and students of the future instead of compromising and assuming we can continue to teach students and treat patients the way we did in the past. And most importantly, people who do not want to be outdone by stadium beer vendor app developers. We look forward to seizing the moment with you together.

We launch this journal fully knowing that 2016 will be a significant year for healthcare policy. Each presidential candidate will offer detailed statements of where he or she intends to take national planning for the payment and provision of care. We will reflect those debates in articles during 2016, and will solicit your views and expertise as the national debate develops.

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