The Health Industry Forum was established to develop practical, actionable strategies to improve the quality and effectiveness of the U.S. healthcare system. Based at Brandeis University, The Forum is recognized as a unique organization where leading industry and public policy officials work together to address challenging issues facing the U.S. healthcare system. Our priority areas include:

- **Increasing the effectiveness of healthcare systems.** Promoting innovative programs and policies for driving health system change through payment reform, benefit design, consumer incentives, and performance measurement.

- **Improving evidence for decision makers.** Improving clinical data collection, funding and organizing comparative effectiveness research. Assessing the effectiveness of health care reform initiatives.

- **Establishing incentives for innovation and affordability.** Developing business models and public policies to accelerate adoption of high value activities and generate additional evidence for products and practices of uncertain value.

**Activities:**

- **Forums.** The Health Industry Forum holds small interactive meetings focused on clarifying the real issues in divisive policy debates and developing consensus on options for moving forward. Our invitation-only Forums are well attended by senior health care business leaders, government officials, and academic researchers.

- **Research.** The Forum funds health service research projects to provide insight into the design of innovative health care management programs.

- **Policy development.** The Forum convenes small multi-stakeholder workgroups to identify priorities, conduct analyses, and develop policy options in the areas of effectiveness, evidence and innovation.

**Charter Members:** Aetna Inc., EmblemHealth Inc., Johnson & Johnson, and Kaiser Permanente.

**Members:** America’s Health Insurance Plans, Blue Cross Blue Shield of Massachusetts, Boston Scientific, Cigna, Geisinger Health Plan, National Pharmaceutical Council, and Premier Inc.
Recent Forums

2020

Technology-Enabled Alternative Care Delivery Models: What’s Real and What’s Not? (Fall 2020)
The Forum will explore the potential for developing scalable new delivery models that could substantially improve outcomes and consumer experience at a considerably lower price point than traditional fee-for-service medicine. It includes four panels that will discuss: 1) reimagining primary care; 2) consumer-focused technology-enabled specialty care solutions; 3) new acute care models focused on hospital avoidance/substitution; and 4) scalable approaches to addressing social determinants of health. These solutions are being developed both outside of and within traditional care delivery models. A key issue is whether payers will support these solutions through more robust alternative payment models and whether the models themselves can be effectively scaled beyond niche offerings.

Princeton Conference XXVII: Health Policy in an Era of Disruption (Nov 18-20)

2019

The Trump Administration’s Efforts to Reduce Drug Spending: How Will They Change the Landscape? (April 10)

Princeton Conference XXVI: Will Federalism Improve the U.S. Health Care System? (May 21-23)

2018

Can New Industry Partnerships Reshape the US Healthcare System? (Dec 5)

Paying for the Next Generation of Innovative Therapies (June 13)

Princeton Conference XXV: Navigating Uncertainty in the U.S. Health Care System (May 22-24)

Health Care Cost Control: What is the Path Forward? (Co-Sponsored by National Pharmaceutical Council, March 14)

2017

Can Technology and Delivery Model Innovation Lead to Meaningful Reductions in Healthcare Spending? (Oct 18)


The Future of Medicare Advantage (March 31)

The 2016 Election: How Will It Affect the US Health Care Industry? (February 27)
2016
*Future Scenarios for US Physician Practices Under MACRA* (October 20)

*Outcome-Based Contracts for Pharmaceuticals: Opportunities and Challenges* (Senior Policy Roundtable September 8)


*Home-Based Healthcare in the 21st Century* (March 17)

*The Implementation of Hospital Global Budgets in Maryland* (Senior Policy Roundtable March 1)

2015
*Healthcare Consolidation: Winners, Losers and Policy Implications* (November 9)

*The Future of Pharmaceutical Benefit Management* (June 9)

*Princeton Conference XXII: Challenges Facing the US Health System* (May 12 –14)

*Comprehensive Health Payment Reform: What Will it Take to Get There?* (April 2)

*The Recent Deceleration in Health Spending: Is it for Real?* (Senior Policy Roundtable January 21)

2014
*Tiered and Limited Network Health Insurance Plans: Balancing Access And Affordability* (October 30)

*The Evolution of Accountable Care Under Medicare* (June 3)

*Princeton Conference XXI The Changing Health Care Landscape* (May 13 – 14)

*The Future of Post-Acute Care Under Value-Based Payment* (March 18)

*What’s Next for the CMS Innovation Center?* (Senior Policy Roundtable, January 28)

2013
*Designing Affordable Health Insurance Products: The Role of Purchasers, Payers, Providers and Policy* (October 31)

2013 (cont.)
20th Princeton Conference: States’ Role in Health Care: Options For Improving Access, Quality and Lowering the Cost of Care (May 22-23)

The Future of the American Hospital (March)

Post-Election Outlook for the Health Care Industry (Senior Policy Roundtable, January)

2012
Building the Components of Accountable Care: What Do Physicians, Hospitals and Insurers Need to Do Differently? (Co-Sponsored by Kaiser Permanente Institute for Health Policy, the Council of Accountable Physician Practices and Brandeis University, October)

Molecular Diagnostics and Companion Therapies: Partnerships, Payment and Evidence Development (Co-Sponsored by The National Pharmaceutical Council, July)

States’ Role in Health Care Reform: Possibilities to Improve Access and Quality (Co-sponsored by The Council on Health Care Economics May)

Reducing Waste in the US Health Care System: Addressing Political and Technical Barriers (April)

2011
How Will Deficit Reduction Impact the Health Care System? (November)

Advancing Comparative Effectiveness Research under Health Care Reform (Co-Sponsored by The National Pharmaceutical Council, October)

The Evolution of State Health Insurance Exchanges (Co-Sponsored by The Kaiser Permanente Institute for Health Policy, July)

Episode Payment: Private Innovation and Opportunities for Medicare - Special Meeting on Episode Payment Features with CMMI Chief Rick Gilfillan (May)

Where Do We Go From Here? The Future of Health Reform (Co-sponsored by The Council on Health Care Economics May)

Accountable Care Organization Development: Policy Meets Reality (March)

Accelerating Innovation in Health Care Payment and Delivery: A Conversation with CMMI Chief Rick Gilfillan (Senior Policy Roundtable, February)
2010

**Accountable Care Organizations: Implications for Consumers** (Co-Sponsored by the Aetna Foundation and America’s Health Insurance Plans, October)

**Strategies for Optimizing Secondary Use of Data Through Health Information Exchange** (Senior Policy Roundtable, September)

**Advancing Electronic Health Records Adoption and Meaningful Use** (Co-sponsored by Health Affairs, August)

**How Can the Private Sector Advance Meaningful Use?** (Senior Policy Roundtable, July)

**Shaping Convergent Strategies in Comparative Effectiveness Research** (Co-Sponsored by the National Pharmaceutical Council, America’s Health Insurance Plans, Blue Cross Blue Shield Association, June)

**Examining End of Life Care: Creating Sensible Policies for Patients, Providers, and Payers** (Co-Sponsored by The Council on Health Care Economics, May)

**Building Accountable Care Organizations** (Co-sponsored by Aetna Inc. and Kaiser Permanente Institute for Health Policy, April)

**Jump Starting the Medicare Innovation Center** (Senior Policy Roundtable, January)