The IHI Triple Aim is a framework developed by the Institute for Healthcare Improvement that describes an approach to optimizing health system performance. It is IHI's belief that new designs must be developed to simultaneously pursue three dimensions, which we call the "Triple Aim":

- Improving the patient experience of care (including quality and satisfaction);
- Improving the health of populations; and
- Reducing the per capita cost of health care.

Why the Triple Aim?

The US health care system is the most costly in the world, accounting for 17% of the gross domestic product with estimates that percentage will grow to nearly 20% by 2020. [Source: National Healthcare Expenditure Projections, 2010-2020. Centers for Medicare and Medicaid Services, Office of the Actuary.] At the same time, countries with health systems that out-perform the US are also under pressure to derive greater value for the resources devoted to their health care systems. Aging populations and increased longevity, coupled with chronic health problems, have become a global challenge, putting new demands on medical and social services.

Approach

In most health care settings today, no one is accountable for all three dimensions of the IHI Triple Aim. For the health of our communities, for the health of our school systems, and for the health of all our patients, we need to address all three of the Triple Aim dimensions at the same time.

Because the IHI Triple Aim entails ambitious improvement at all levels of the system, we advocate a systematic approach to change. Based on six phases of pilot testing with over 100 organizations around the world, IHI recommends a change process that includes: identification of target populations; definition of system aims and measures; development of a portfolio of project work that is sufficiently strong to move system-level results, and rapid testing and scale up that is adapted to local needs and conditions.

IHI believes that to do this work effectively, it's important to harness a range of community determinants of health, empower individuals and families, substantially broaden the role and impact of primary care and other community based services, and assure a seamless journey through the whole system of care throughout a person's life.

In the US environment many areas of health reform can be furthered and strengthened by Triple Aim thinking, including: accountable care organizations (ACOs), bundled payments, and other innovative financing approaches; new models of primary care, such as patient-centered medical homes; sanctions for avoidable events, such as hospital readmissions or infections; and the integration of information technology.

Concept Design

IHI's innovation team developed a concept design and described an initial set of components of a system that would fulfill the IHI Triple Aim. The five components are listed below, and a more detailed list can be found in the Concept Design document.

- Focus on individuals and families
- Redesign of primary care services and structures
- Population health management
- Cost control platform
- System integration and execution

Benefits to an Approach in Line with the IHI Triple Aim

Organizations and communities that attain the Triple Aim will have healthier populations, in part because of new designs that better identify problems and solutions further upstream and outside of acute health care. Patients can expect less complex and much more coordinated care and the burden of illness will decrease. Importantly, stabilizing or reducing the per capita cost of care for populations will give businesses the opportunity to be more competitive, lessen the pressure on publicly funded health care budgets, and provide communities with more flexibility to invest in activities, such as schools and the lived environment, that increase the vitality and economic wellbeing of their inhabitants.

Access more information at: https://www.ihi.org/engage/initiatives/tripleaim/pages/default.aspx