

Part 1: Magellan Open Vision Exchange (MOVE) 2016 Recap

The room at the inaugural Magellan Open Vision Exchange (MOVE) this past March was a sight to see. Filled with a buzz of energy and openness to think differently, Magellan executives, clients and partners gathered in shared pursuit of a better, more efficient healthcare experience of tomorrow. Collectively, the leaders in the room had impact over the healthcare experience for a significant portion of America. Yet, the focus of the conversation was clearly in how to pivot care to be more accessible and effective, one person at a time.

Help One, Help Many

The event kicked off with stories from Mick Ebeling, CEO of [Not Impossible Labs](#), whose commitment to changing the lives of a few individuals has sparked a few of the most [impactful innovations in healthcare](#). From his entrée into healthcare innovation with the [eyewriter](#), helping a graffiti artist paralyzed by ALS to create art again using his eyes, to [Project Daniel](#), a 3D prosthetic printing process that started with the goal of creating an arm for a Sudanese boy, he challenged the group to “recognize an absurdity” and then to “just commit to figuring it out.”

Neither an engineer nor a healthcare expert, his “open source” method for creating healthcare inventions turned heads. He demonstrated a commitment to designing a solution through the eyes of the individual suffering, which made all the difference in his ability to impact lives. He reminded us that he did not have all of the answers -far from it. But asserted that a key point to breaking the mold was to think of challenges as “[not impossible.](#)” He reminded us that it would be very difficult to name something that is possible today

that wasn't at one point thought of as impossible.

Healthcare as an Experience

Our client presentations continued to emphasize applications of human-centered innovation in healthcare, sharing approaches grounded in first understanding the behaviors that drive and influence healthcare experience. Key takeaways included:

- Remembering that the [most common reasons for a hospital stay](#) are the more common ailments of mankind, from childbirth to respiratory and circulatory conditions, [musculoskeletal conditions](#) and mood disorders. While emphasis is often placed on advancement in rarer, more specialized conditions, a significant portion of patients can be impacted by anticipating the needs for more routine healthcare experiences.
- Listening to what's working, and what's not, disease state by disease state. From [crowdsourcing feedback from patients](#) to understand what helped them get better, to creating focused innovation platforms within organizations to spawn creative solutions unencumbered by traditional perceived barriers, we learned of many approaches to closing gaps in the system.
- Speaking to people successfully living with their conditions provides tremendous perspective for recovery and chronic condition management programs. When the formula isn't as simple as issue identification + treatment = healthy, concepts like [peer support](#) become an opportunity to support living well with a physical, mental or emotional challenge by empowering the patient to learn to thrive through peer experience.
- Re-positioning healthcare leaders as "[chief experimenters.](#)" It was underscored that healthcare leaders today can't simply focus on making decisions, they must design and enable experiments to truly push the healthcare experience forward.

Stay tuned for Part 2 of our event recap.

Looking for more information about MOVE, our gathering of healthcare innovators and thought leaders? [View media and request an invitation to our January 2017 event.](#) For questions, contact mediarelations@magellanhealth.com.