

# New York Department of Health DSRIP Annual Statewide Learning Symposium

Syracuse, NY  
September 20-22, 2016



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Greetings from East Tennessee

# Engaging Front-Line Providers

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Joel Hornberger, MHS  
Chief Strategy Officer  
Cherokee Health Systems  
September 22, 2016



“I don’t mind change, as long as it doesn’t affect me.”

*Anonymous Cherokee Physician,  
Somewhat Annoyed...*



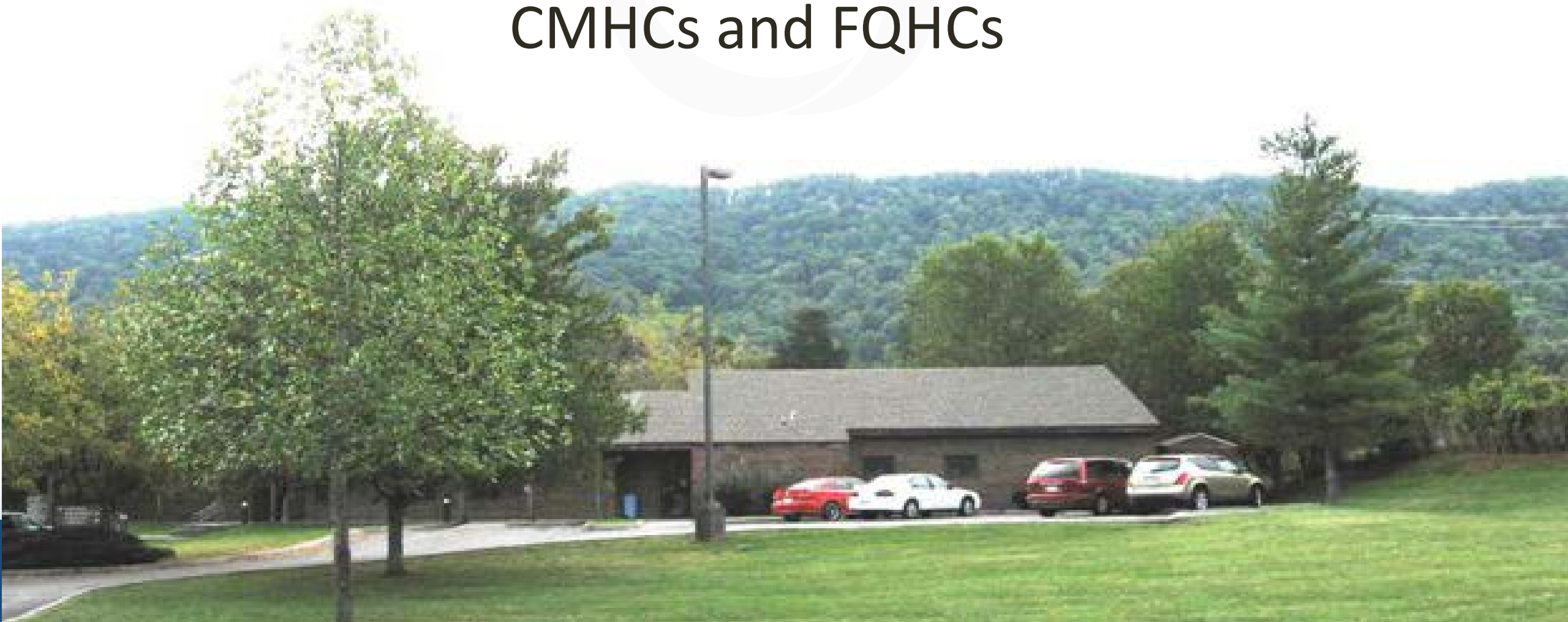
# *Cherokee Health Systems' Mission...*

To improve the quality of life  
for our patients through the blending of  
primary care and behavioral health.

*Together...Enhancing Life*



# Cherokee Health Systems: Merging the Missions of CMHCs and FQHCs



# Primary Service Area



# Cherokee Health Systems

## Last Year:

65,355 patients

488,762 Services

15,961 New Patients

46 Locations

**Number of Employees: 727**

## Provider Staff:

Psychologists - 50

Primary Care Physicians - 38

NP/PA (Primary Care) - 51

Community Workers - 39

Cardiologist - 1

Nephrologist - 1

Pharmacists - 12

Pharmacy Techs - 17

Psychiatrists - 9

NP (Psych) - 9

LCSWs - 67

Dentists - 2



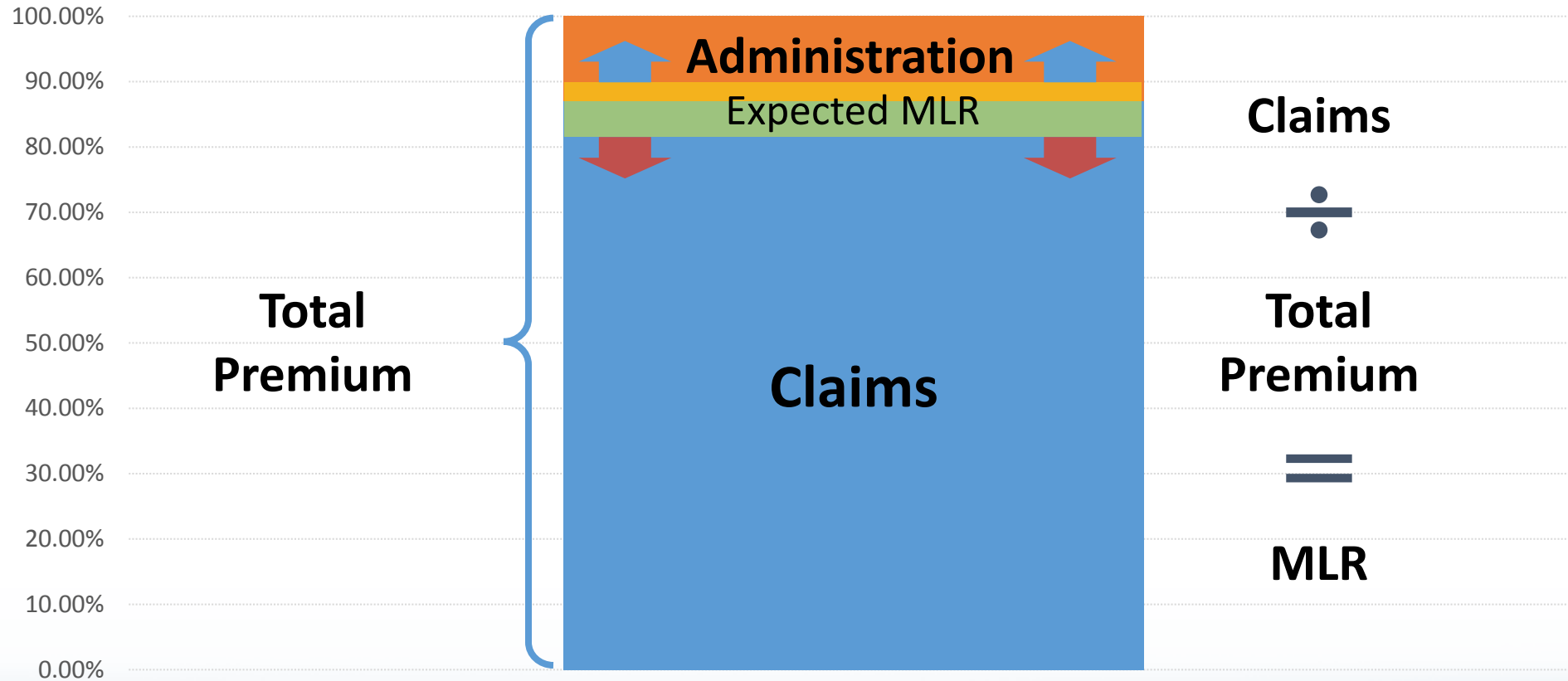


# P4P Quality Metrics

<u>Measure</u>	<u>NCQA 75th Percentile</u>	<u>TennCare Target</u>	<u>Proposed Target</u>
Childhood Immunization Status, Combo 10 (CIS 10)	38%	n/a	___%
Treatment for Children with Upper Respiratory Infection (URI)	90%	84%	___%
Breast Cancer Screening (BCS)	58%	55%	___%
Controlling High Blood Pressure (CBP)	63%	64%	___%
Diabetic HbA1C Testing (CDC HbA1C)	87%	n/a	___%
Diabetic LDL-C Screening (CDC LDL)	81%	n/a	___%
Postpartum Care / Visits (PPC)	71%	71%	___%
Follow up Visit Within 7 Days of Discharge from Acute MH Admission	69%	n/a	___%
Antidepressant Medication Management -Acute Phase, First 60 Days	56%	n/a	___%
Follow-Up Care for Children Prescribed ADHD Medication	46%	n/a	___%



# Medical Loss Ratio – Risk Sharing



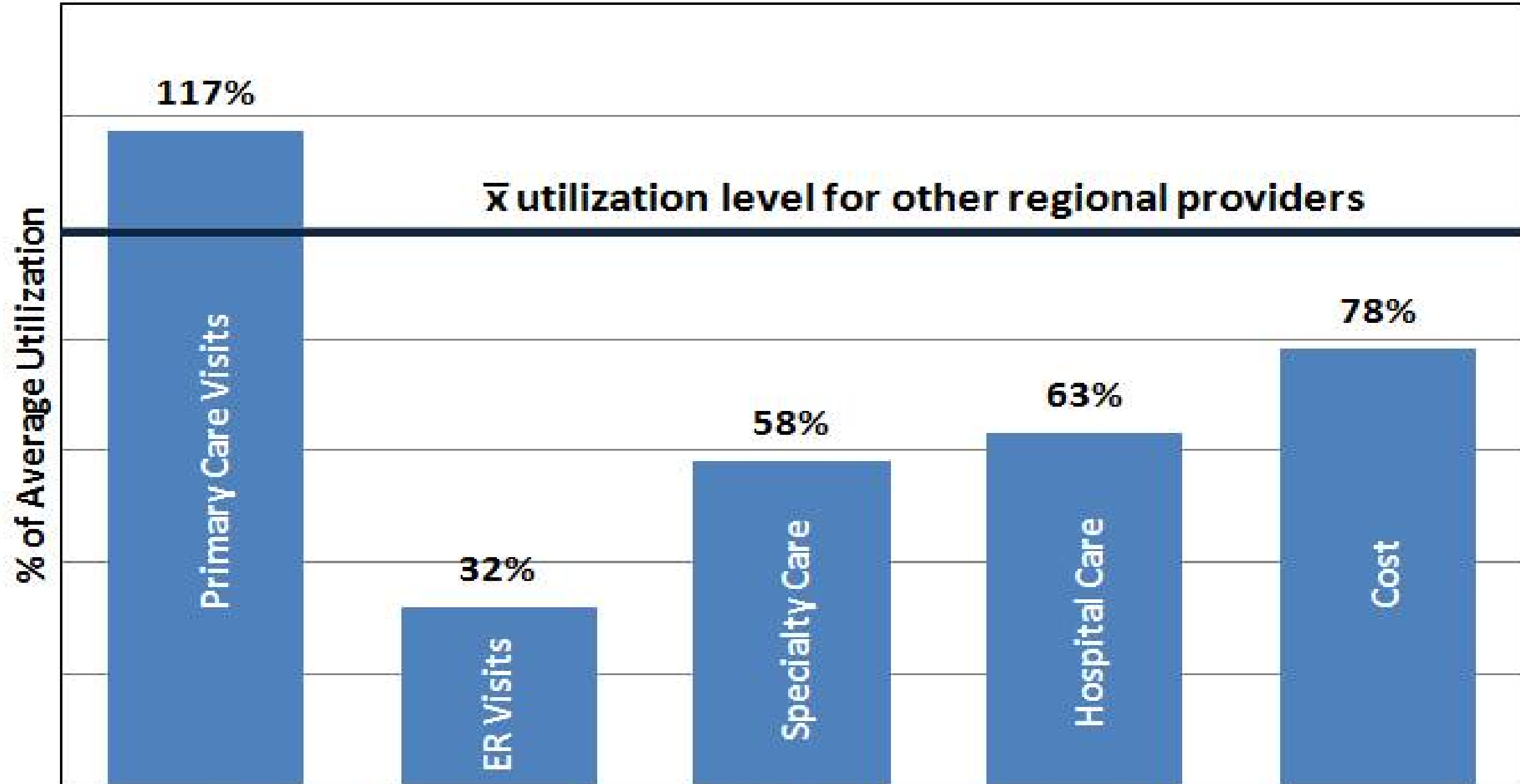
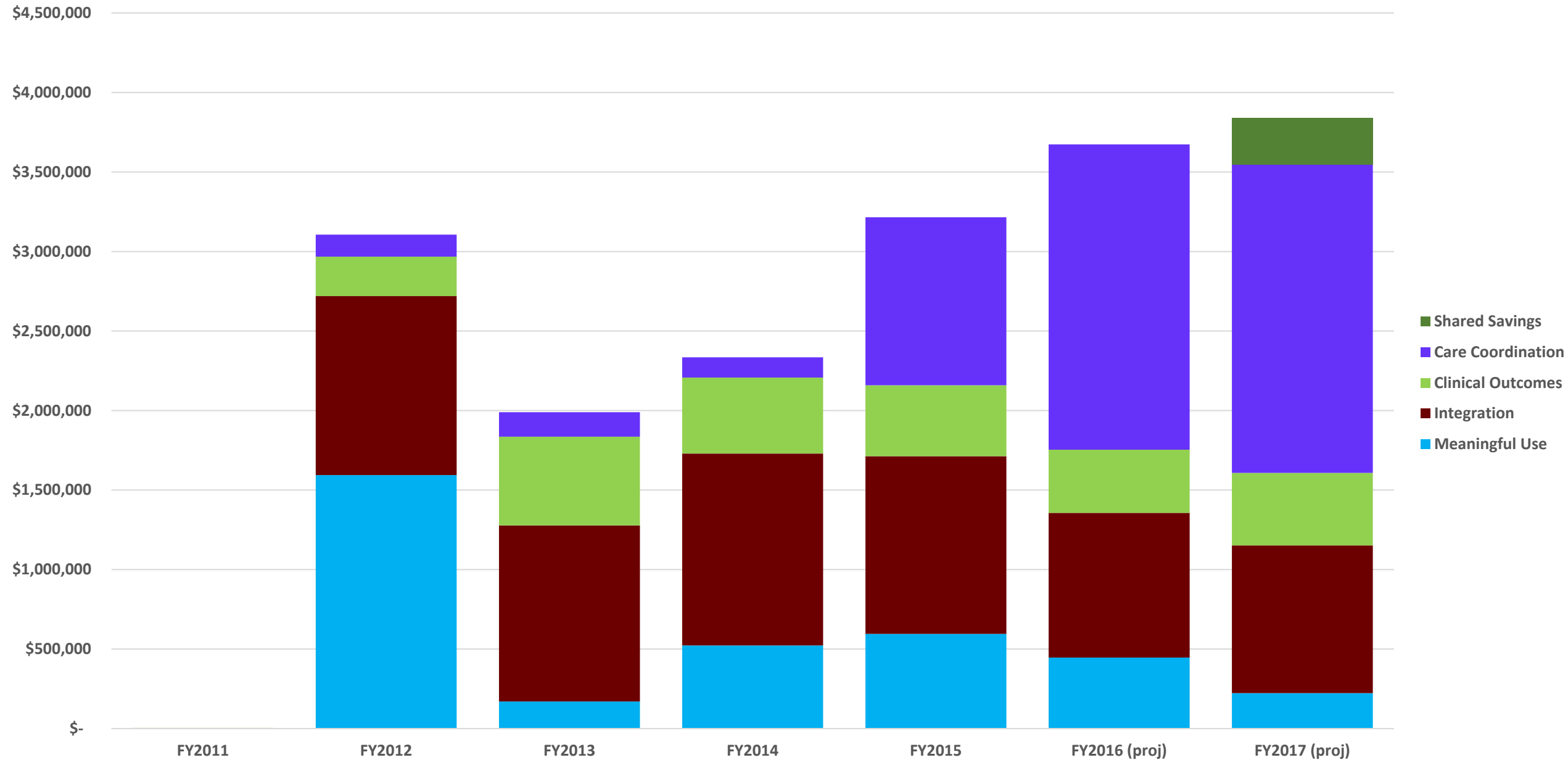


Figure 1: Comparison of CHS utilization with regional providers

# Cherokee Health Systems

## Value-Based Performance Revenue



# We want change to be like this...



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# But it's really like this!

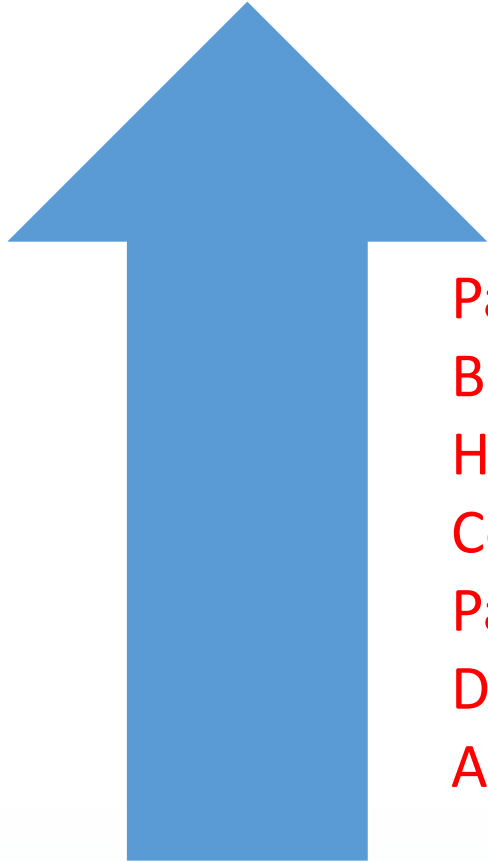


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# The Reality of Primary Care



Patient Panel Size  
Behavioral Comorbidity  
Health Complexity  
Coordination Demands  
Payer Requirements  
Documentation Demands  
Accountability/Need for Data

Time  
Resources  
Reimbursement



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# Engaging Front Line Providers

## Four Strategies to Drive Engagement

- Corporate Culture
  - Technology
  - Leadership
- Employee Experience





# What does “engagement” look like?

- Employees are attracted to their work  
 (“I want to do this!”)
- Employees are inspired by their work  
 (“What I’m doing is really important!”)
- Employees are passionate about their work  
 (“I love what I’m doing!”)



## Heard in the halls...

- Mary, FNP - “People with diabetes were losing limbs because I wasn’t there.”
- Mike, MD – “God wanted me here and I want to be here. It’s where I belong.”
- Jenn – “I’m doing what I’m really good at.”

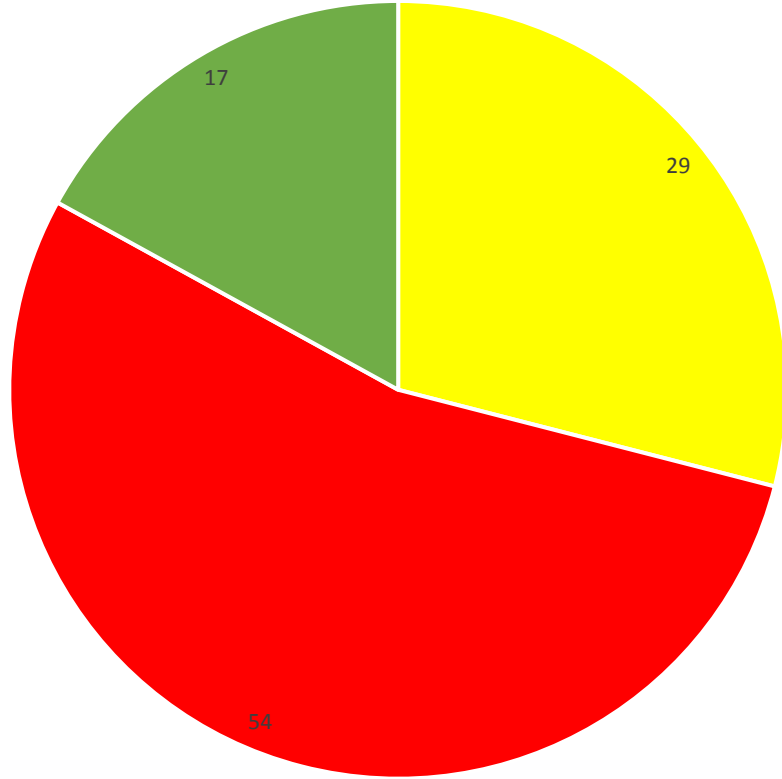


## Also heard in the hall...

- “No one listens to me.”
- “Our pay is way below market.”
- “I really don’t like my new boss.”



# US Workforce Employment Engagement



Actively Engaged Not Engaged Actively Disengaged



# Why is engagement so important?

- People matter.
- When employees “check out,” bad things happen:
  - Reduced quality
  - Reduced productivity
  - Reduced creativity



# Why is engagement so important?

- Turnover is costly.
  - One (1) Physician FTE
    - Lost revenue = \$990,034
    - Recruitment costs = \$61,200
    - Annual start-up costs = \$211,063
    - Total = \$1,262,297

- [www.fiercehealthcare.com](http://www.fiercehealthcare.com)



# Engagement through Culture



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# Corporate Culture

- Passion for Mission
- Passion for Patients
- Care model drives everything
  - Risk-taking is encouraged





# Culture

- “Failure” is an opportunity
- Fast, Imperfect Implementation/“Ready-Fire-Aim”
  - Adjust quickly/try something new (PDSA)
- Teams are not just a group of individuals who happen to be working together



# Culture

- “We go where the grass is browner”
- “We can’t let down the community”
- “Do the right thing and the money will follow”
- “We will make an impact that matters”



# Culture drives hiring and staffing

## The Right People:

- Are committed to excellence/quality
- Enjoy change
- Attentive to details, but see the big picture
- Are flexible and willing to try new ideas
- Want to make a difference
- Enjoy working in teams
- Are excellent communicators
- Are computer literate
- Have a sense of humor

## The Wrong people are:

- Resistant to change
- Negative
- Inflexible
- Risk-averse
- Protective of “their” turf
- Defenders of the status quo
- Mercenaries



# Engagement through Technology



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# Patient Dashboard

*Purpose – To ensure the interdisciplinary team has a comprehensive “snap shot” of the patient’s treatment needs and plan*

- Care Team
- Self Management Goals
- Care Coordination
- Diagnoses
- Vaccines
- Referrals
- Medications
- Patient Education
- Hospital ER/Admissions
- Point of Care (Guidelines)
- Gaps in Care
- Labs
- Vital Signs
- Allergies
- Portal Enrollment Status



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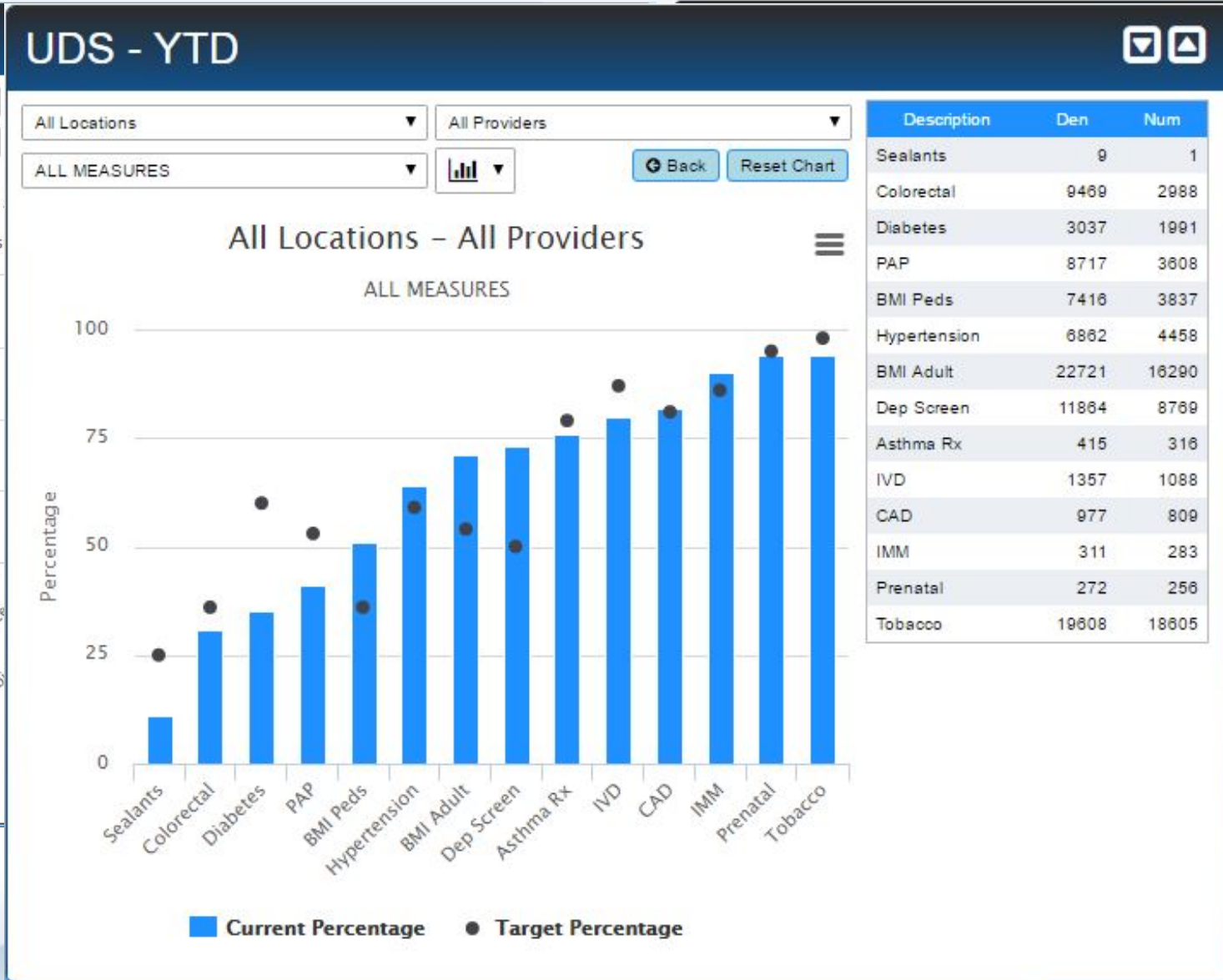
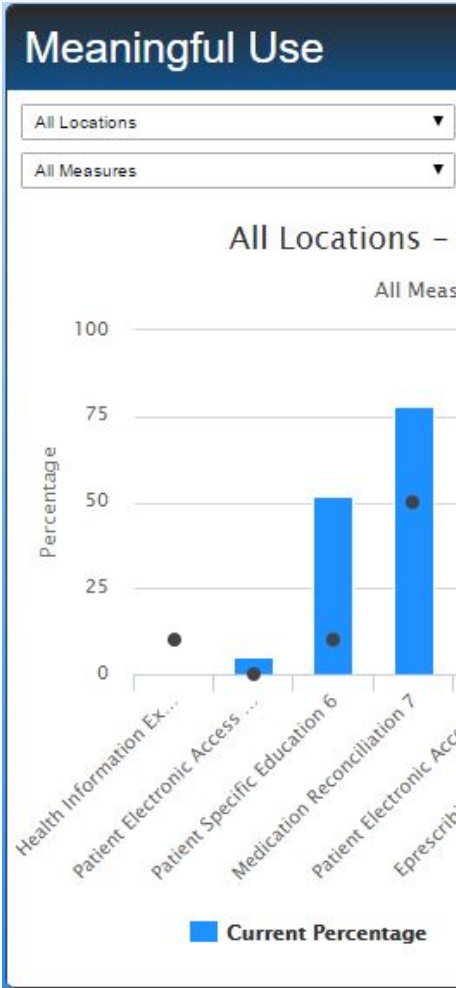


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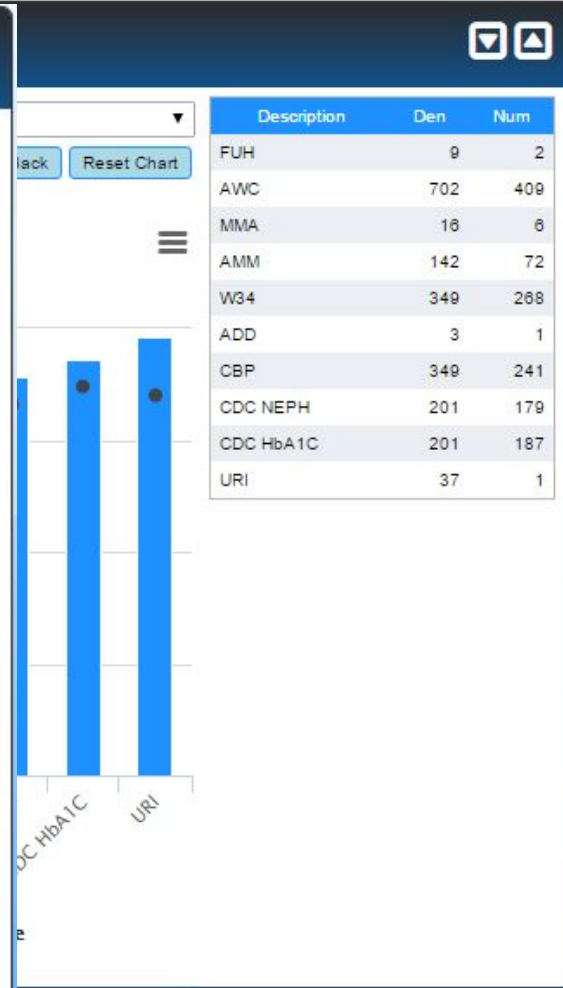
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# CHS Real-Time Interactive Dashboard



Description	Den	Num
Sealants	9	1
Colorectal	9469	2988
Diabetes	3037	1991
PAP	8717	3608
BMI Peds	7416	3837
Hypertension	6862	4458
BMI Adult	22721	16290
Dep Screen	11864	8769
Asthma Rx	415	316
IVD	1357	1088
CAD	977	809
IMM	311	283
Prenatal	272	256
Tobacco	19608	18605



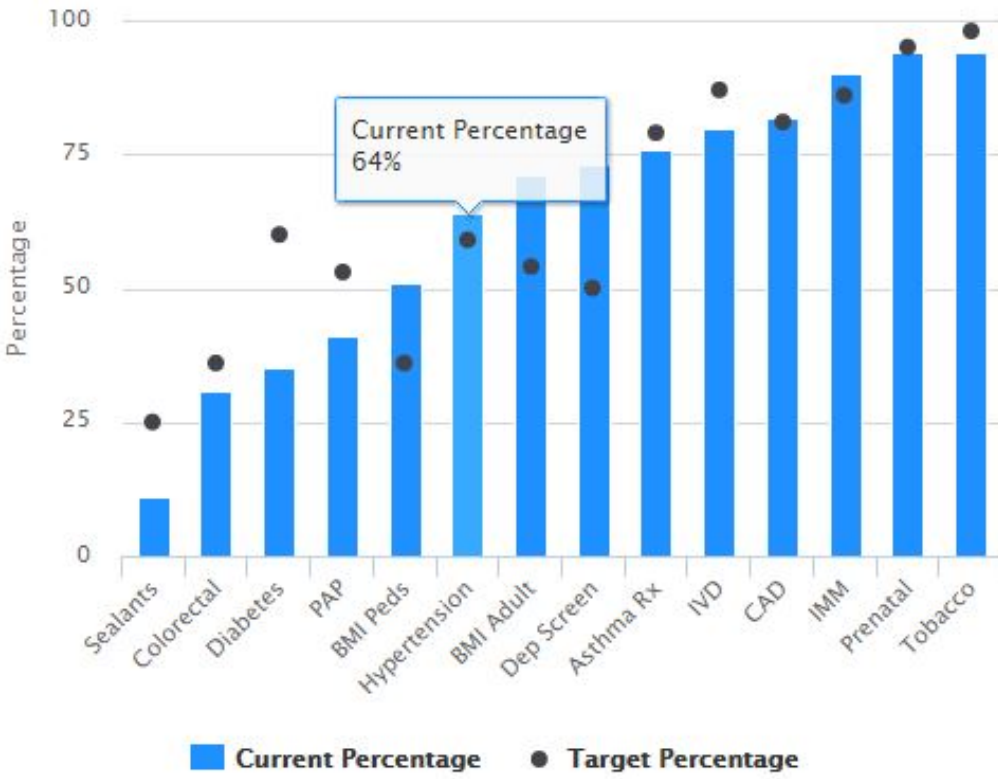


All Locations ▼ All Providers ▼

ALL MEASURES ▼  ▼ Back Reset Chart

All Locations - All Providers

ALL MEASURES



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# CHS Real-Time Interactive Dashboard





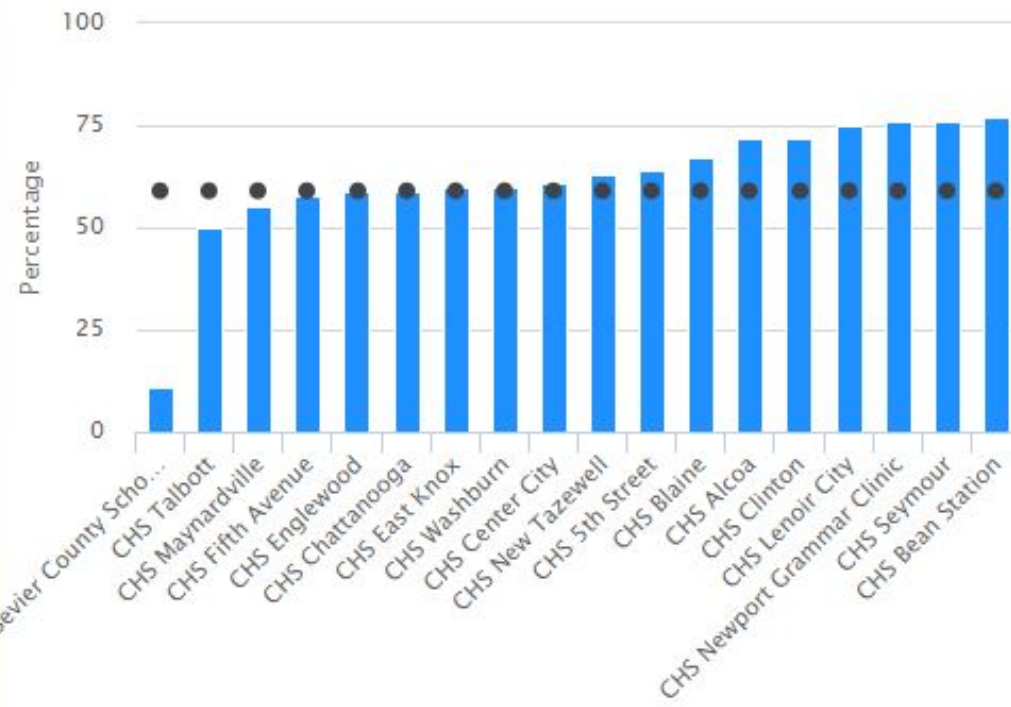
All Locations All Providers

HYPERTENSION

Back Reset Chart

All Locations - All Providers

HYPERTENSION

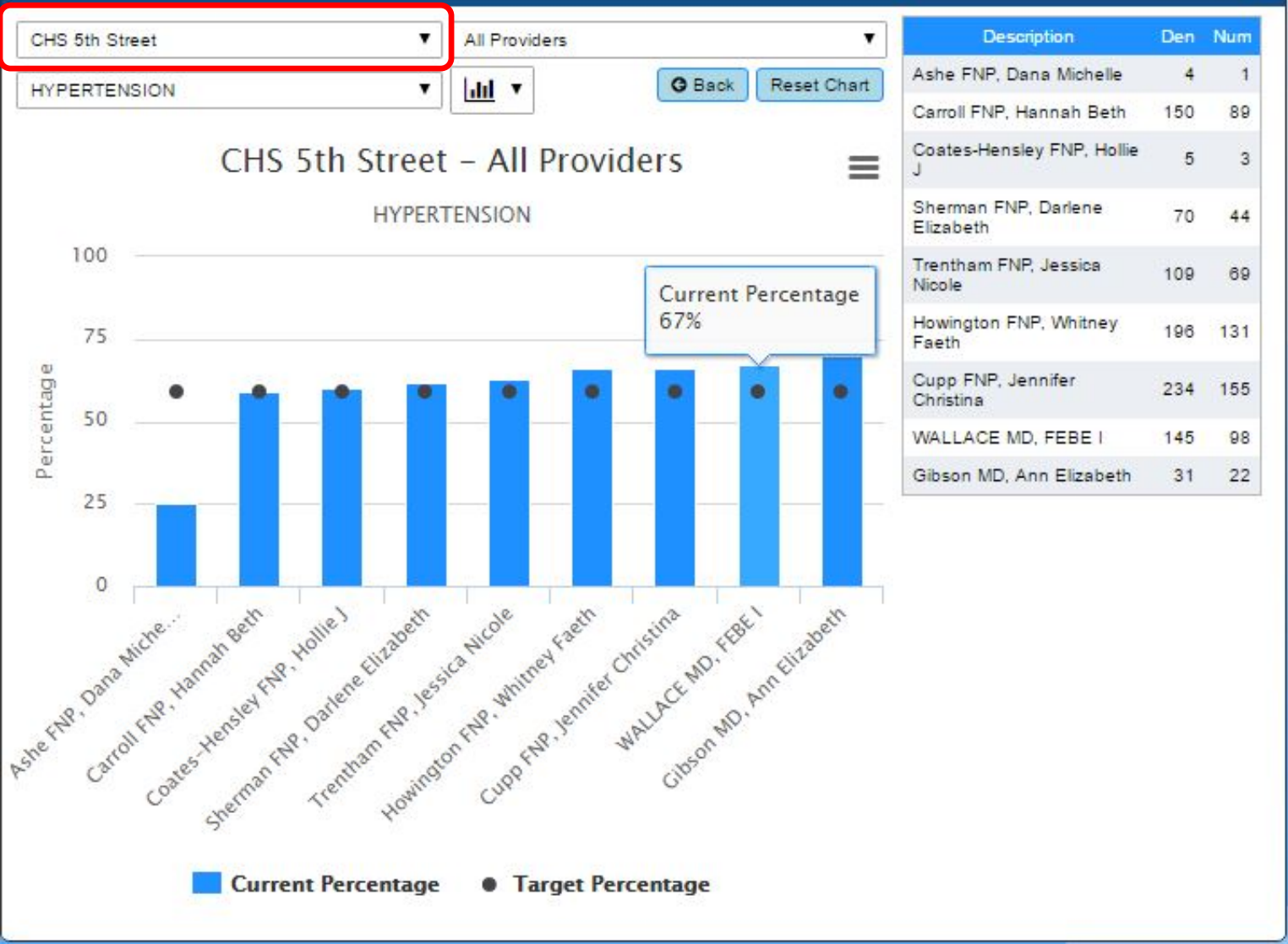


Description	Den	Num
Sevier County School Clinics	9	1
CHS Talbott	4	2
CHS Maynardville	669	373
CHS Fifth Avenue	391	227
CHS Englewood	227	136
CHS Chattanooga	361	216
CHS East Knox	401	244
CHS Washburn	185	111
CHS Center City	1166	713
CHS New Tazewell	297	190
CHS 5th Street	944	612
CHS Blaine	343	232
CHS Alcoa	485	350
CHS Clinton	119	86
CHS Lenoir City	371	281
CHS Newport Grammar Clinic	25	19
CHS Seymour	449	342
CHS Bean Station	416	323

# CHS Real-Time Interactive Dashboard







# CHS Real-Time Interactive Dashboard

A photograph taken from the driver's perspective inside a vehicle. The rearview mirror is the central focus, reflecting a wide, flat landscape covered in snow. In the distance, a single cow is visible in the field. The sky is a mix of blue and purple, suggesting a sunset or sunrise. The text "CHS HEDIS/UDS METRICS" is superimposed in large, bold, black letters across the center of the mirror's reflection. The foreground shows a blurred view of the actual landscape through the rear window, with a fence line and a utility pole visible.

**CHS HEDIS/UDS METRICS**

# Clinical Decision Support Tools (embedded in the EHR)



# Technology

- Cherokee's value-based contracts require us to understand our patients' complexity and engage them in the office and the community
- Cherokee's clinical model is built on a bio-psycho-social platform
- We needed to develop our own bio-psycho-social algorithm (BPSA) to assess complexity and determine resources and provider panels



# Technology

- BPSA
  - Weighted Medical Diagnoses
  - Weighted Psychological Diagnoses (Mental health and substance abuse)
  - Weighted Social Determinants
    - Homelessness
    - English as a second language
    - Social isolation
    - Food insecurity
    - Transportation issues
    - Prescription accessibility
    - Etc.



Rank	MRN	Bio	Psy	Soc	Total Score	Last MED DOS	Last BH DOS	Financial Class
1	100	11	24	12	47	20150616	20140311	Medicaid
2	200	18	7	17	42	20150630	20150413	Medicaid
3	300	15	19	5	39	20150605	20150511	Medicaid
4	400	10	19	10	39	20150624	20150225	Medicare
5	500	14	18	6	38	20150421	20150709	Medicaid
6	600	14	17	7	38	20150417	20120927	Medicare
7	700	11	11	15	37	20090323	20150420	Medicaid
8	800	11	17	9	37	20150618	20140206	Medicare
9	900	16	13	8	37	20120313	20121108	Medicaid
10	1000	11	17	9	37	20141104	20140925	Medicare



# 20 Most Complex PCP Panels

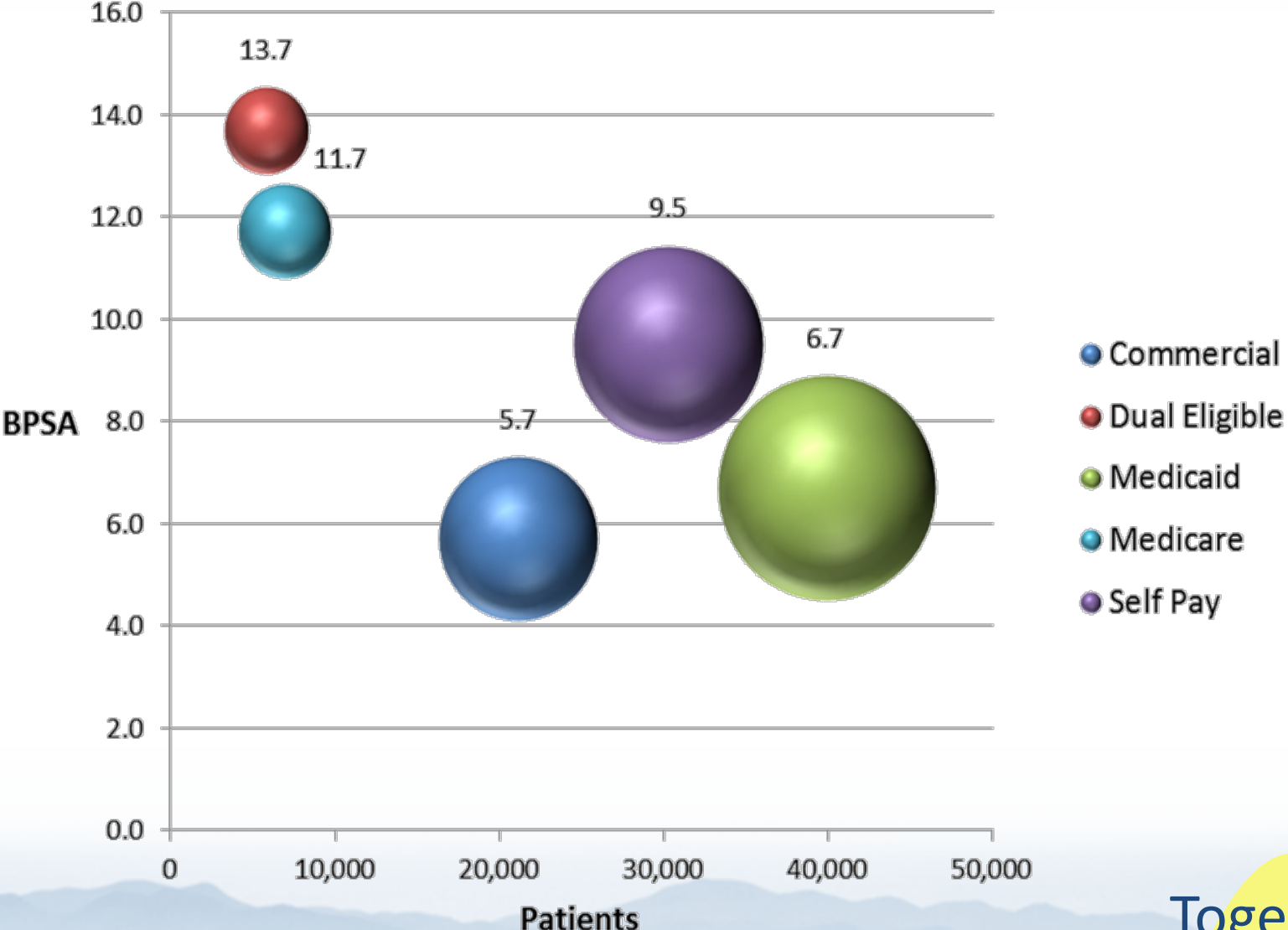
(by assigned MCO members)

Rank	Provider	Pts	Avg Score
1	100	501	40.1
2	200	1,698	39.2
3	300	26	38.6
4	400	13	38.5
5	500	1,490	37.6
6	600	1,175	36.8
7	700	1,501	34.4
8	800	7	33.9
9	900	921	32.0
10	1000	1,476	32.0

Rank	Provider	Pts	Avg Score
11	1100	954	30.4
12	1200	445	30.1
13	1300	1,387	29.1
14	1400	4	27.5
15	1500	829	25.9
16	1600	902	25.2
17	1700	1,633	24.8
18	1800	413	24.5
19	1900	914	23.8
20	2000	851	23.1

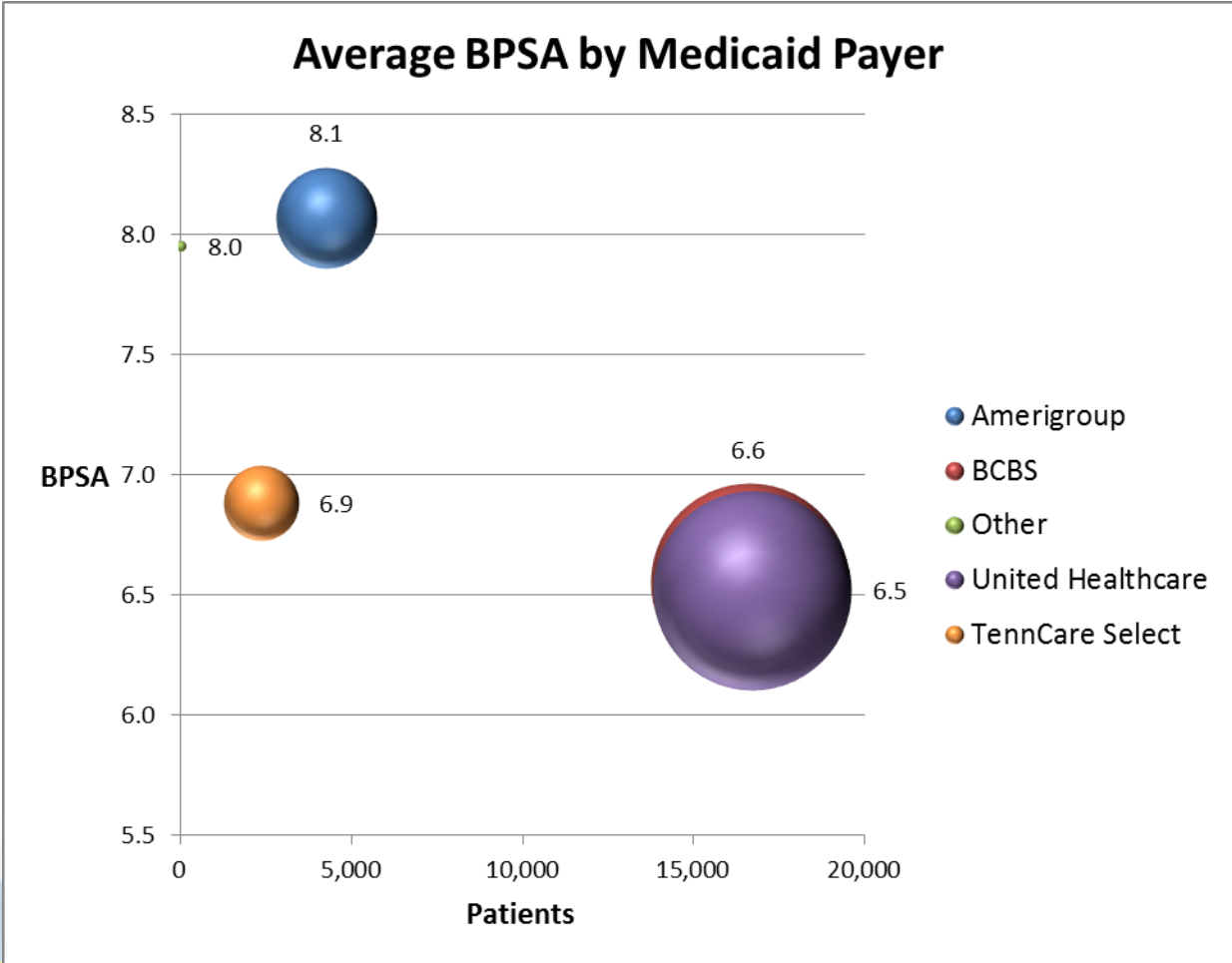


# Average BPSA by Financial Class





# BPSA Results: CHS Active Patients by MEDICAID Payer



# Next steps -Validation

- **Construct Validity** – BHC/CHC hand scoring
- **Concurrent Validity** – correlation with outcome data
- **Predictive Validity** – with receipt of more comprehensive and mature claims data (TennCare data)



# Engagement through Leadership



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ACHIEVING YOUR WILDLY  
IMPORTANT GOALS



# The 4 Disciplines of Execution



CHRIS McCHESNEY

SEAN COVEY

THE NEW YORK TIMES BESTSELLING AUTHOR

JIM HULING

FOREWORD BY CLAYTON CHRISTENSEN



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# The Problem of Execution (Engagement?)

- Almost universal challenges with execution
- Only 15% of employees could name even one organizational goal.
- Only 51% of employees could say they were passionate about the goals of the organization.
- 81% of employees said they were not held accountable for regular progress on the goals.
- 87% of employees said they had no clear idea what they should be doing to achieve the goal.

International Study of hundreds of businesses and government agencies by Covey, et.al.

# Bottom Line...

- Employees weren't sure what the company goals were
- Employees weren't committed to the goals if they did know them
- Employees didn't know what actions they should take to achieve the goals
- Employees weren't held accountable for achieving the goals.



# To Engage Employees Leadership Needs to

- Clarify and communicate the Organizational Vision –
  - The Vision needs to be something “big” for people to invest in it personally, be inspired by it, be enthusiastic about it and be committed to it
  - People NEED to understand how they contribute to it (personally)
  - Frame: “A great cause that only we can accomplish”
- Focus on BHAGs - Big Hairy Audacious Goals or WIGs – Wildly Important Goals.
  - Goals and Strategies that have the greatest impact.
  - Focus on 1 – 3 BIG things. No more. “You can’t boil the ocean.”
  - The more new things you try, the less you accomplish.



# To Engage Employees Leadership Needs to

- Set reasonable time lines. We are notorious for underestimating how much time our goals will take.
- Help manage the “whirlwind” (the urgency of our day jobs).
- Prioritize. There will always be more good ideas than we have time to do.
- Connect. Personal connections with the “boss” matter to employees.
- Encourage. Especially during difficult times.
- Coach -- Praise and correct. Accountability for results.





# Engagement through Employee Experience



# Employee Experience

- **The Ultimate Question** (*The Ultimate Question 2.0*, Fred Reichheld, 2011)
  - “On a scale of 0 to 10, with 0 being very unlikely and 10 being very likely, how likely are you to refer a friend or family member for employment at Cherokee Health Systems? (*quantitative* – tracked over time)
  - “What do we need to do in order to be a 10?” (*qualitative* – actionable items that can be worked on immediately)
- **CEO Advisory Committee**
  - One representative from each office who meet with the CEO quarterly to discuss issues and solutions



# Employee Experience

- **Balint Groups**

- A Balint group is a group of physicians or other clinicians who meet regularly and present clinical cases in order to better understand the clinician-patient relationship
- Focus is on enhancing the clinician's ability to connect with and care for the patient (not just the “right” answer to medical problems)
- New and different ideas about the physician's feelings and experiences with their patients (honest, respectful, supportive and divergent)
- Group usually has two leaders, often a physician and a psychologist
- Group cohesion, trust and “connectedness” develop over time
- Content is confidential



# Employee Experience

- Open-Door Policy
- The Update (with paychecks)
- Listening Tours
  - HR travels to each office – individual meetings
  - CEO and CSO travel to each office – group meetings
  - “The Good, The Bad and The Ugly”
  - Identify solutions; incorporate into strategic plan
  - Feedback loop on results/progress/challenges



# Questions



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