

New York Department of Health DSRIP Annual Statewide Learning Symposium

Syracuse, NY | September 20-22, 2016



Engaging Front-Line Providers

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

	NCQA 75th	TennCare	Proposed
<u>Measure</u>	<u>Percentile</u>	Target	Target
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





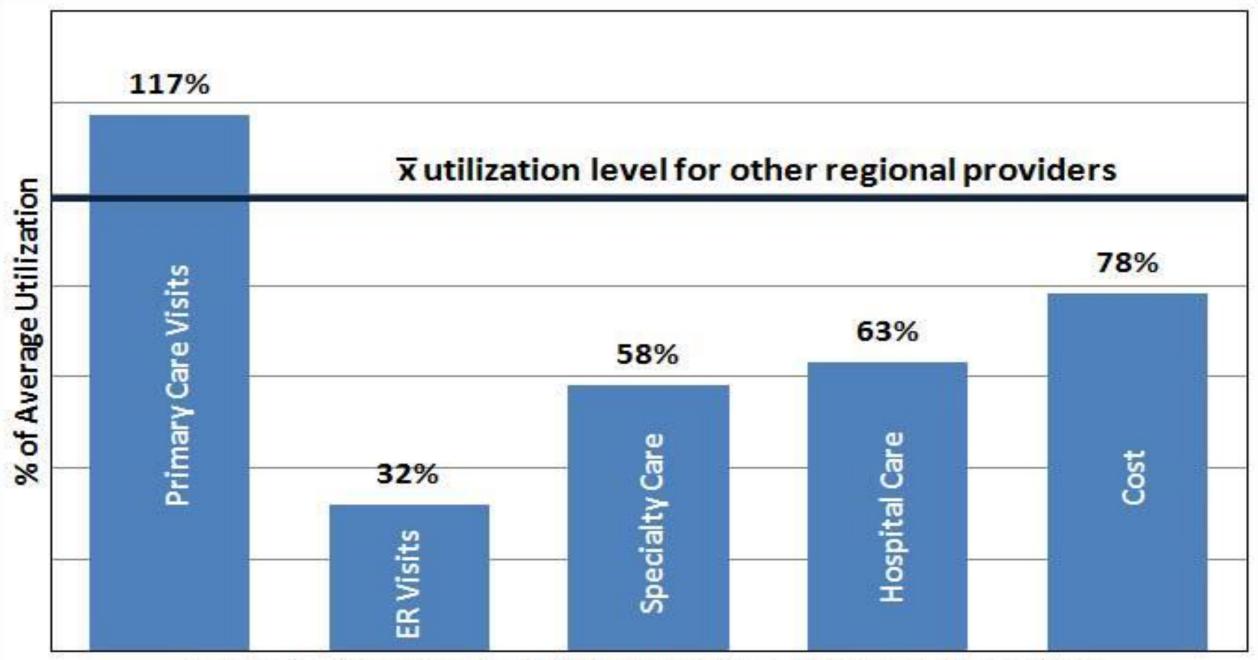
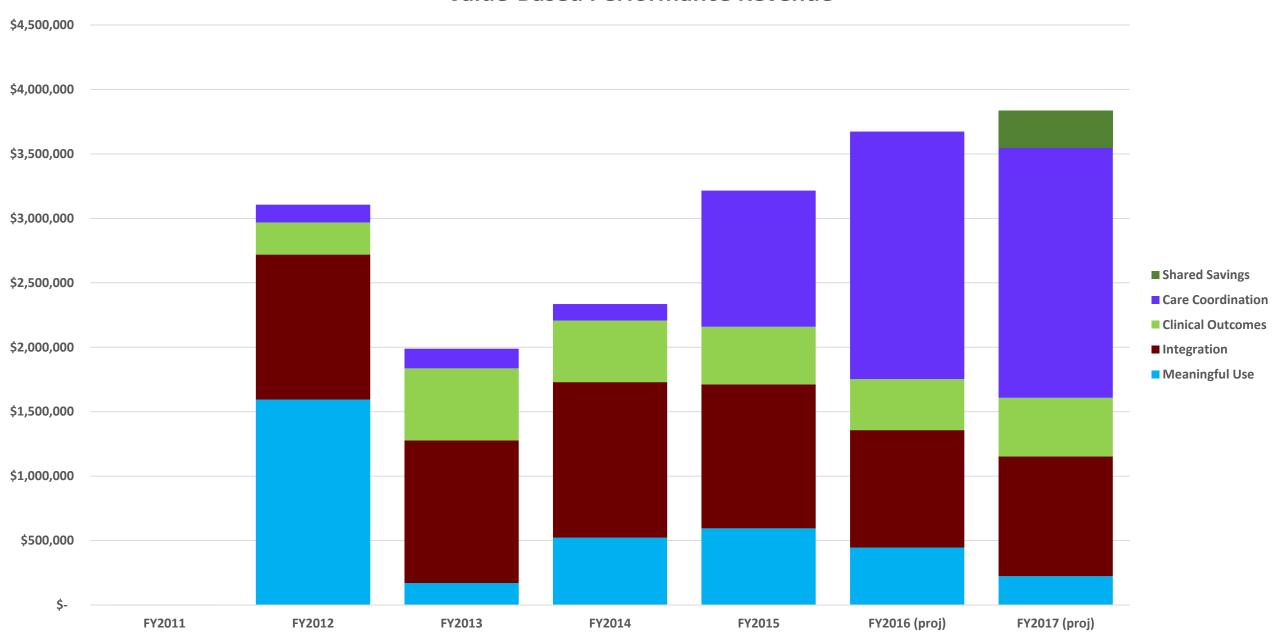


Figure 1: Comparison of CHS utilization with regional providers

Cherokee Health Systems

Value-Based Performance Revenue



We want change to be like this...







But it's really like this!



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



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!")
 Together...

ENHANCING LIFE



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."

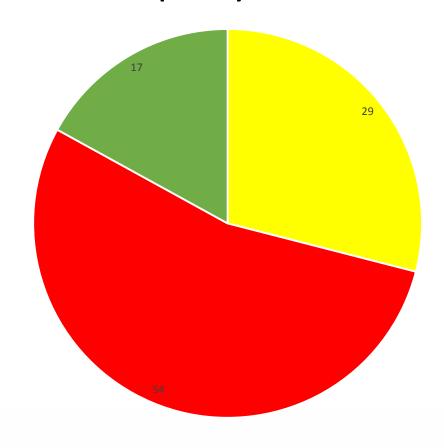
"Our pay is way below market."

"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





Engagement through Culture





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





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





CHS Real-Time Interactive Dashboard

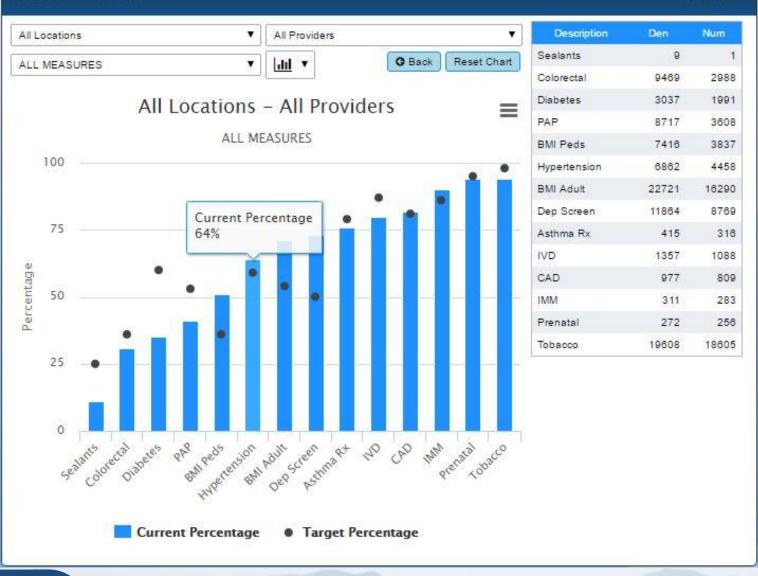


www.cherokeehealth.com
© Cherokee Health Systems 2016

ENHANCING LIFE

UDS - YTD





CHS Real-Time Interactive Dashboard



UDS - YTD Description Den Num All Providers All Locations Sevier County School @ Back Reset Chart 9 HYPERTENSION dil CHS Talbott All Locations - All Providers CHS Maynardville 669 373 CHS Fifth Avenue 391 227 HYPERTENSION CHS Englewood 227 136 100 CHS Chattanooga 361 216 CHS East Knox 401 244 CHS Washburn 185 Percentage CHS Center City 1166 CHS New Tazewell 297 190 CHS 5th Street 944 612 CHS Blaine 343 25 CHS Alcoa 485 350 CHS Clinton 119 CHS Chartanoosa CH5 New Tatemen CHS FRY Avenue CHS Englewood CHS Center City CHS SIN Street CHS Maynardyille CHS East knot CHS WaShburn CHS Alcoa CHS Lenoir City 371 281 CHS Newport Grammar 25 19 CHS Seymour 449 342 416 323 CHS Bean Station

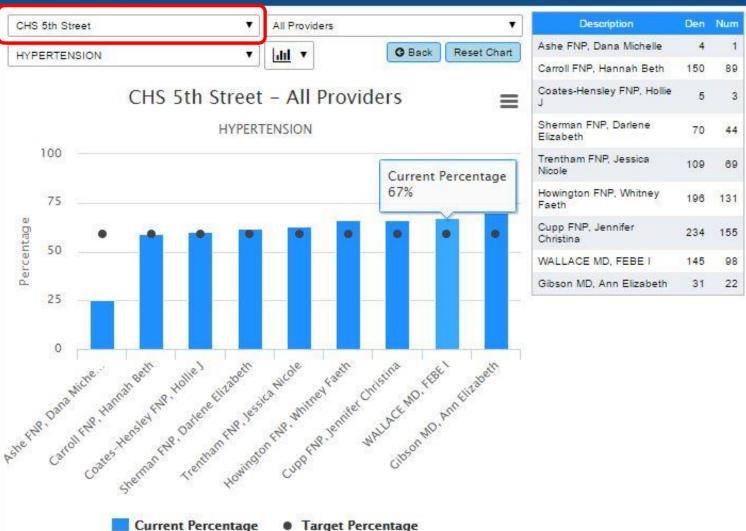
Target Percentage

CHS Real-Time Interactive Dashboard



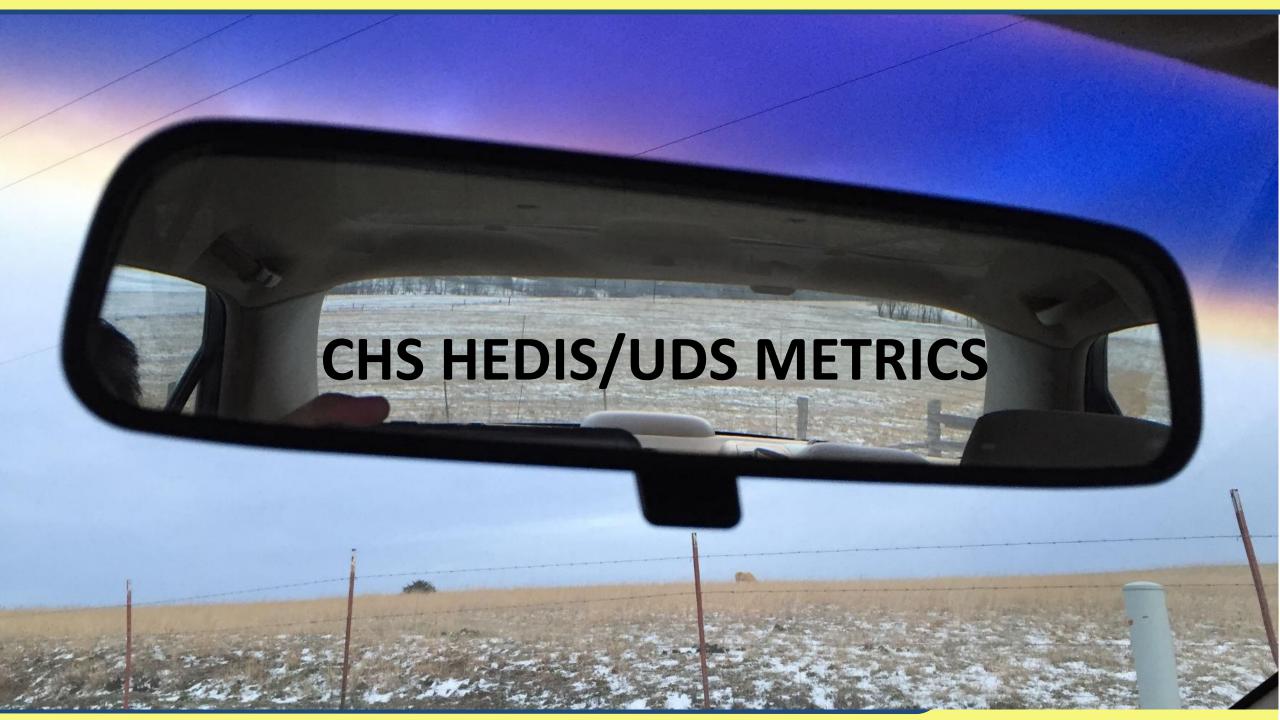
Current Percentage

UDS - YTD □ △



CHS Real-Time Interactive Dashboard







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-psychosocial 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

ENHANCING LIFE

20 Most Complex PCP Panels

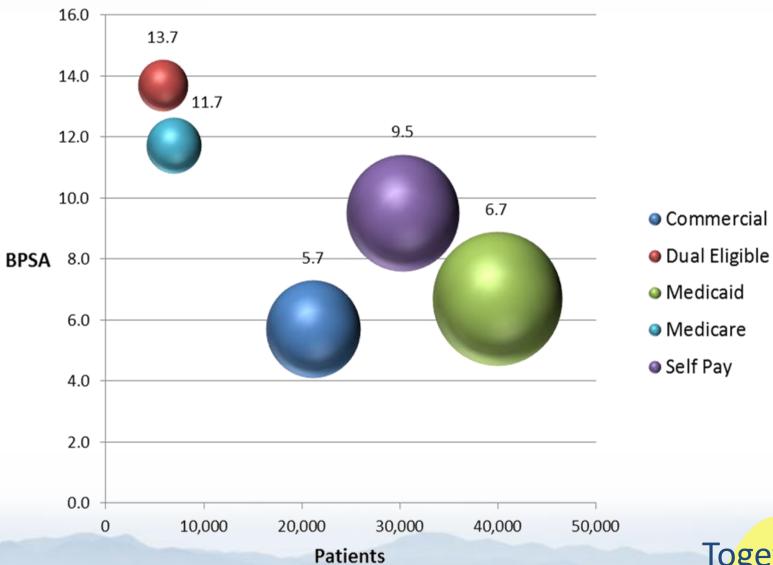
(by assigned MCO members)

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



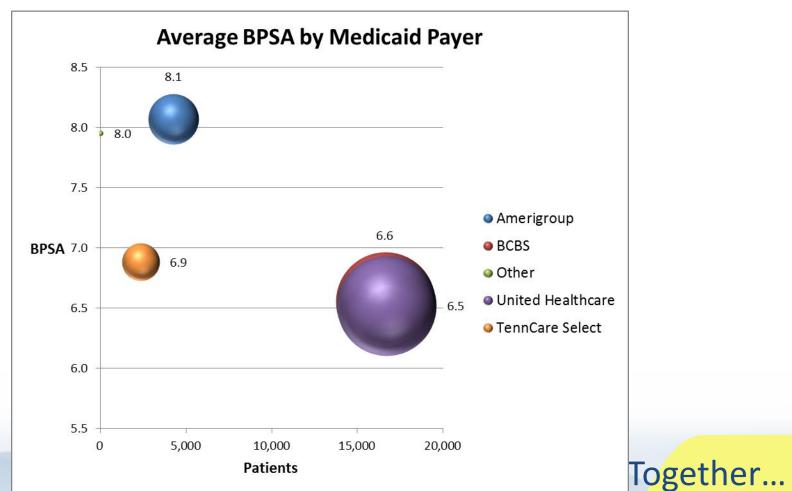
Average BPSA by Financial Class





Together...
ENHANCING LIFE

BPSA Results: CHS Active Patients by MEDICAID Payer



ENHANCING LIFE



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





ACHIEVING YOUR WILDLY IMPORTANT GOALS

The The Wall Street Journal Disciplines Cof Line Wall Street Journal Disciplines Execution



CHRIS McCHESNEY

SEAN COVEY

THE NEW YORK TIMES BESTSELLING AUTHOR

JIM HULING

FOREWORD BY CLAYTON CHRISTENSEN

Together...

ENHANCING LIFE



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. Together...

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

