



accenture

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Organizational Alignment & Communication

One Organization's Journey to Facilitate Transformational Change in Anticipation of Healthcare Reform

Introduction



- Shifts in the environment of health care create the burning platform necessary for many organizations to drive the changes necessary to take health care delivery to a significantly higher level of performance – **Top Quality Care at a Lower Cost.**
- This is a description of how one organization used a structured approach to Stakeholder Management & Communication to facilitate transformational change associated with development of a Clinically Integrated Accountable Care Organization.

The Situation

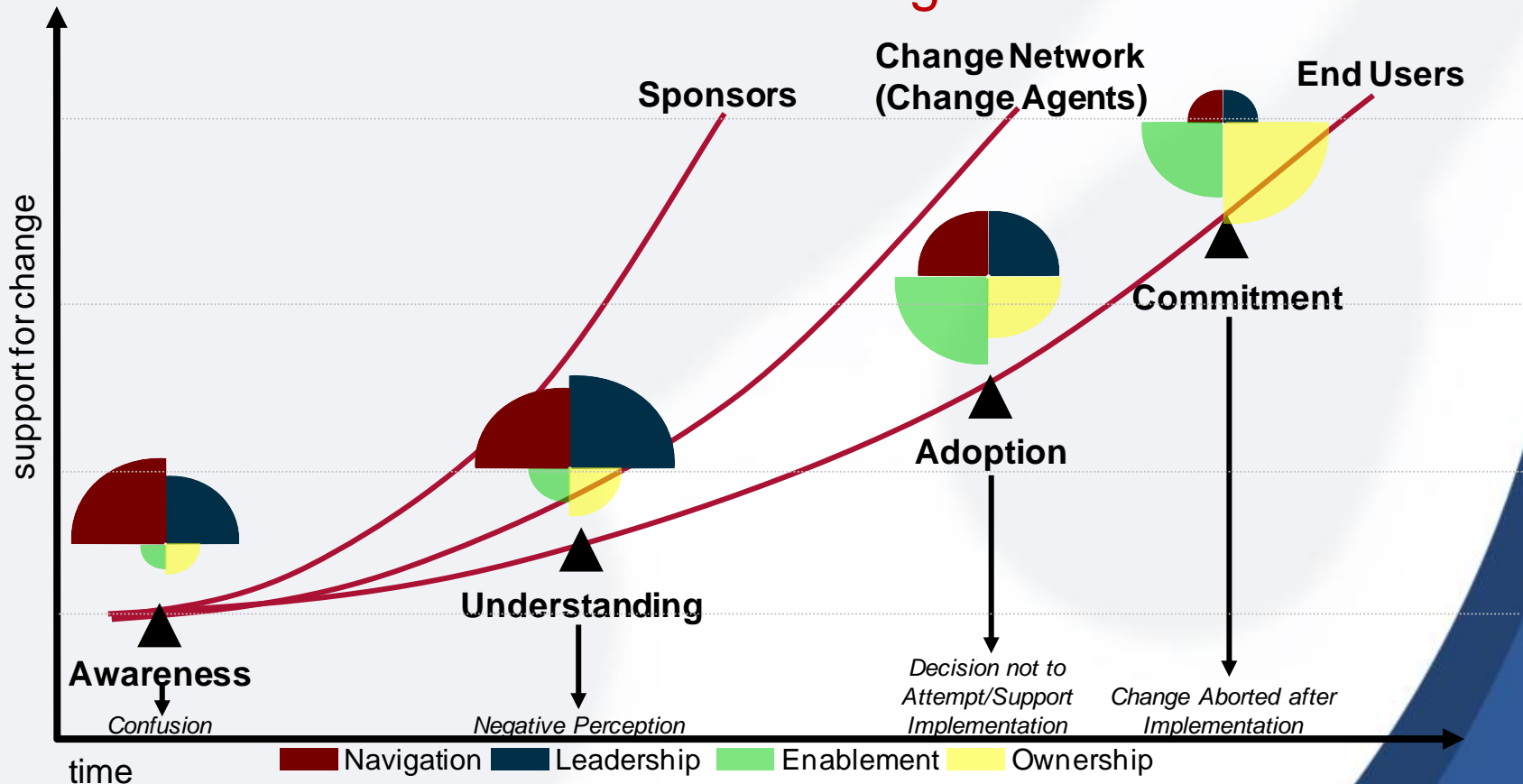


- **The Organization:**
 - IDN comprised of acute, primary, tertiary, quaternary & preventive care, regarded for excellence in research & education.
 - 6 hospitals, 2 nursing facilities, 32 multi-specialty ambulatory medical centers, 1,100 member medical group, 500,000 member health plan & full spectrum of Community Care Services
- **The Business Imperative:**
 - Pro-actively respond to changing market dynamics and drive enhancements to quality and value.
- **The Vision:**
 - Become the System that private practice, employed and group practice doctors want to practice in—for its quality leadership in creating an integrated clinical framework with a focus on patients first and an imperative for excellence, growth, collaboration, coordination and value.

The Goal



Prepare the organization and its stakeholders to be ready, willing, and able to operate effectively in the new environment at the right time



The Approach

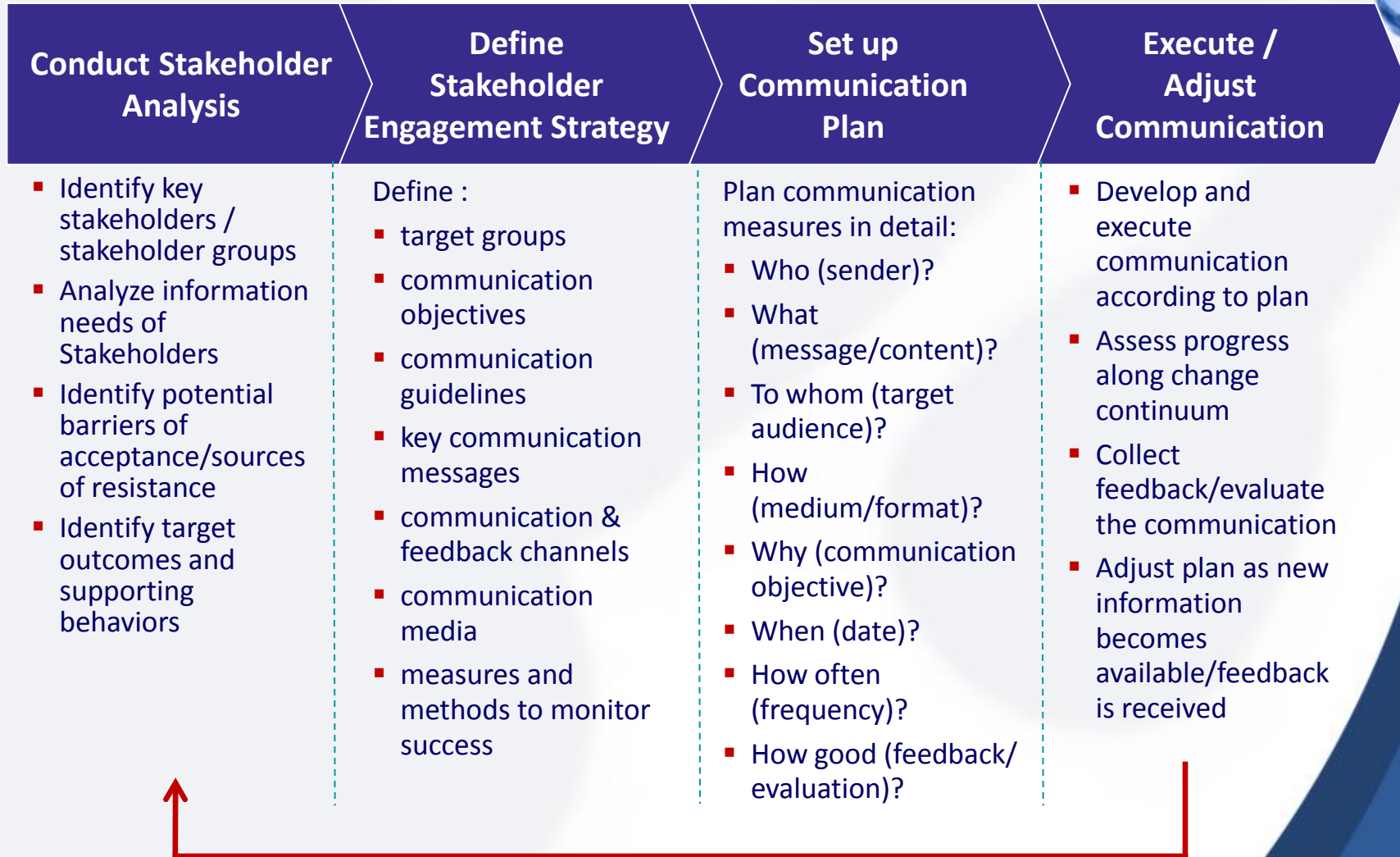
Organizational Alignment & Communication

- Articulate and drive the **activities and tasks to be performed at the organizational and individual level**, in support of defining and implementing the program
- Use a proactive and holistic approach to facilitate actions necessary to **prepare the organization and its stakeholders to be ready, willing, and able to operate effectively in the new environment at the right time**



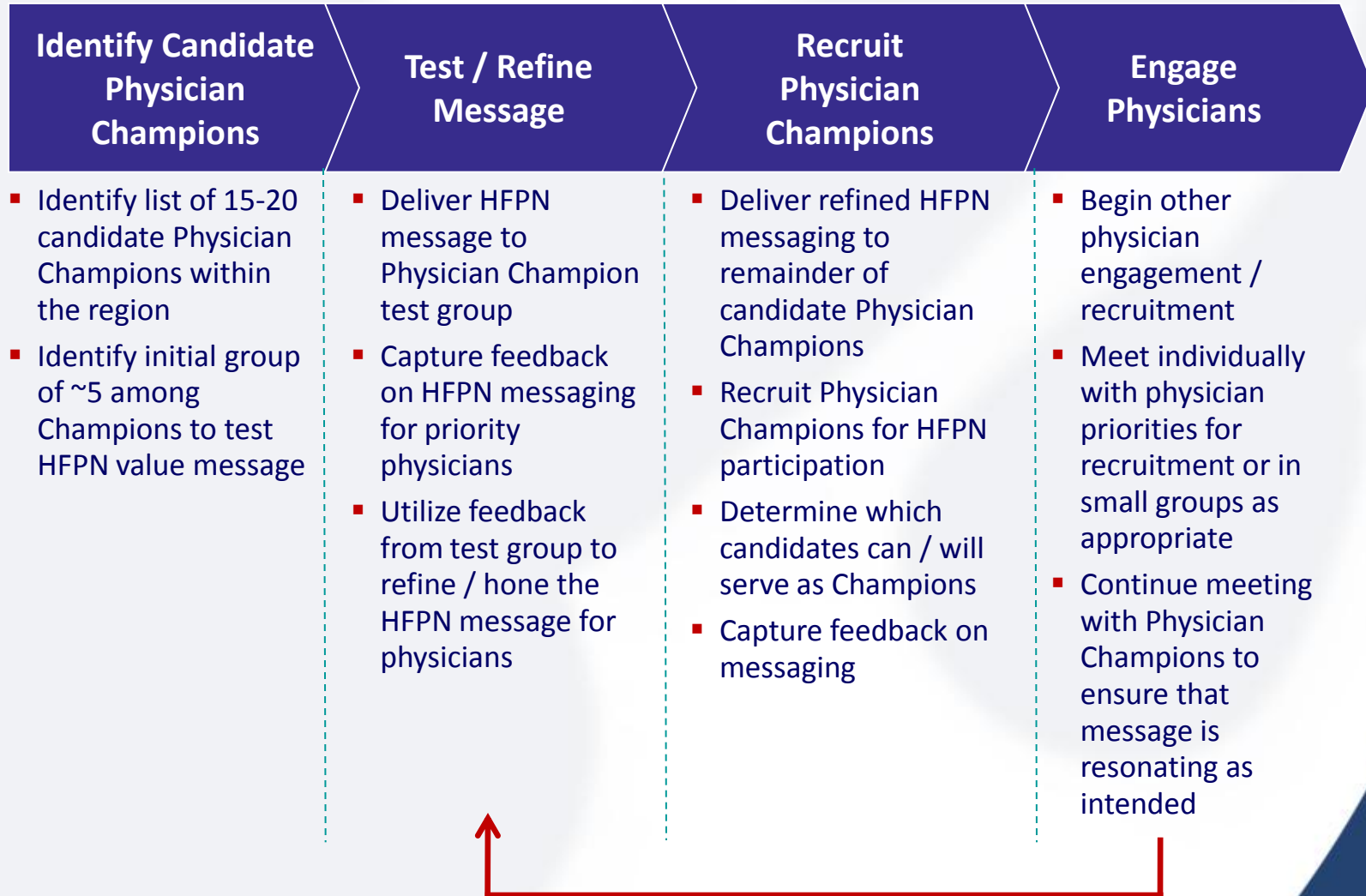
The Approach

Stakeholder Engagement / Management

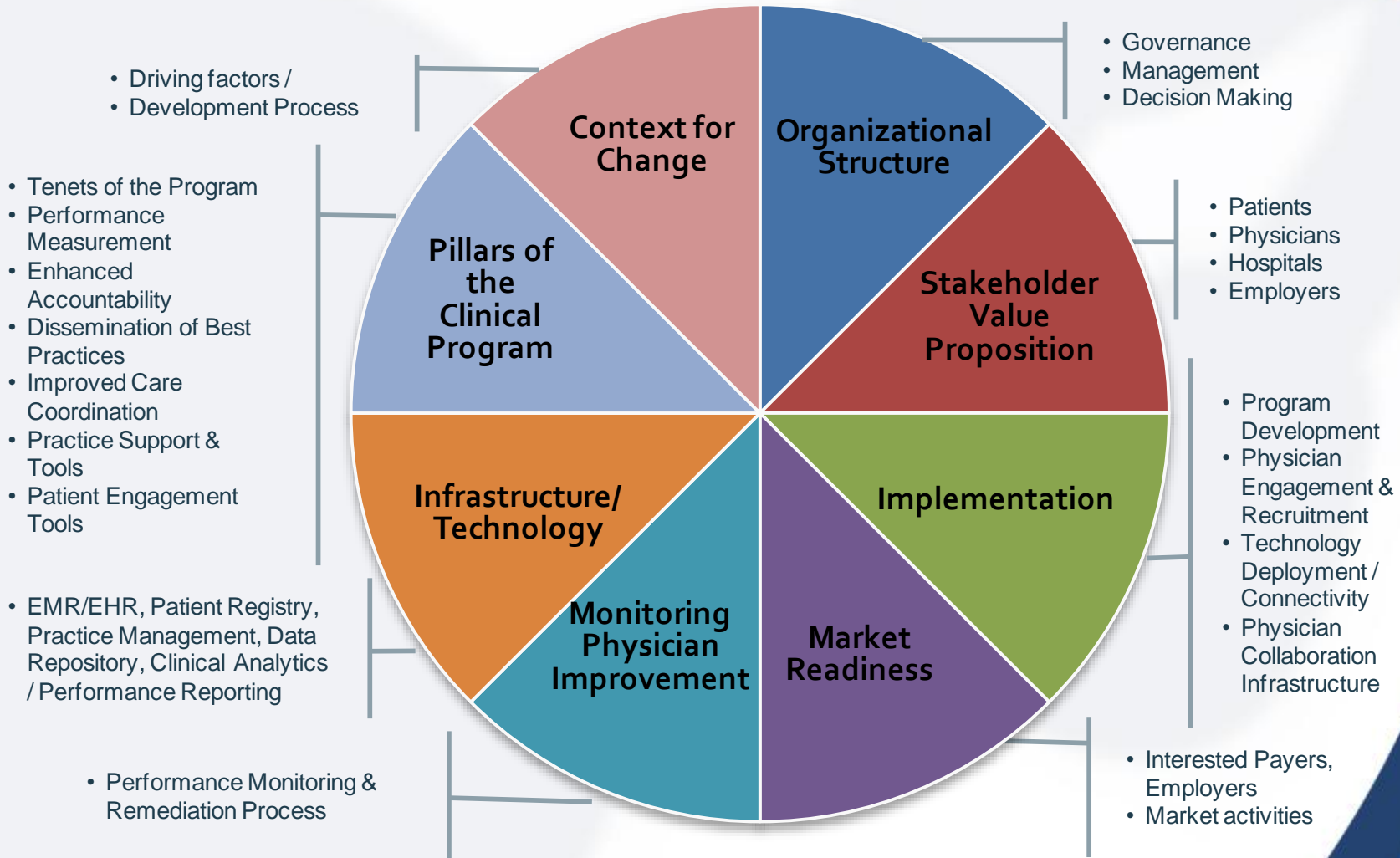


The Approach

Physician Engagement / Management



The Message – What, Why, How?



The Message – Value Statements



The Henry Ford Physician Network is an active and ongoing program developed to evaluate and modify practice patterns of our physician participants and create a high degree of interdependence and cooperation among its physicians to control costs and ensure quality.

Benefits for patients:

- Deliver higher value for their health care dollar
- Provide more effective care management and outreach from a trusted source, their physician
- Access to more reliable information to support their choice of health plans, physicians, hospitals

Benefits for employers:

- The ability to more effectively manage the health care costs of employees and their dependents through the purchase of better, more efficient health care services
- More reliable information to support conversion to consumer-driven health insurance products

Benefit for hospitals:

- Demonstrate their quality and efficiency
- Develop more collaborative relationship with their medical staff

Benefit for physicians:

- Demonstrate their quality and efficiency
- Choose the clinical measures against which they will be evaluated
- Engage in group contracting to properly align rewards with quality initiatives

The Message – Benefit Levers



	Business Lever	Target Impact
↑	Quality	<u>Improved clinical quality.</u> Consistent outcomes through integrated leading practice implementation.
↑	Community Impact	<u>Greater community impact</u> via more comprehensive physician network and increased access to patients. Significant opportunity to manage a greater population of patients towards measured quality results at key community hospitals.
↓	Cost	<u>Utilization efficiencies and cost savings.</u> Reduction in over-utilization of high cost services. Reduced duplication of services, coordinated investments in technology and support services.. Significant opportunities in ER, CT, nuclear cardiology. Margin increases on DRG reimbursement
↑	Speed-to-Value	<u>Clear first mover advantage.</u> Key competitors are beginning to move in this direction. Pro-competitive opportunity to create a clear market differentiation. Initial market impact / value more difficult to achieve if physicians are aligned elsewhere
↑	Stakeholder Satisfaction	<u>Improved physician recruitment and retention.</u> Compelling value proposition for physicians with mutually aligned incentives.
↑	Reimbursement	<u>Improved, value-based reimbursement despite changing models and tighter margins.</u> Enhanced performance based payments for physician and hospital services. Qualification for ACO-based payments. Joint contracting with third parties.

The Message – Program Components



Key Program Components

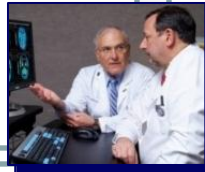
Enhanced Accountability

- Quality measures / benchmarking to set performance expectations
- Peer-to-peer, physician-directed counseling
- Remediation activities to ensure accountability



Dissemination of Best Practice

- Provide the forum, continuing medical education, and process support to assure that leading practice is communicated in a timely and efficient manner and consequently adopted into standard practice



Performance Measurement

- Quality measures used across the network
- Benchmarking based on leading practices
- Performance expectations linked to reward structures



Practice Support / Tools

- Access to systems, resources, and services to support practices in program implementation



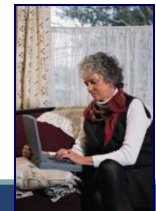
Improved Care Coordination

- Improved communication and processes among providers of care including primary, specialty, and ancillary care



Patient Engagement Tools

- Health assessments, patient and provider messaging, health information, and health coaching



The Message – Clinical Program



Clinical Program

Processes

- Optimization and Standardization of Quality Frameworks
- Clinical Performance Metrics
- Clinical Management Forums
- Incentive Management

Clinical Integration Program

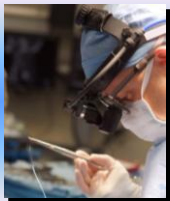
- Performance Measurement
- Improved Care Coordination
- Dissemination of Best Practice
- Enhanced Accountability
- Patient Engagement Tools
- Practice Support & Tools

Tools

- Disease Registry
- Health Information Exchange (HIE)
- Electronic Medical Record (EMR)
- Physician Performance Scorecard

Measures by Category

Superior Quality



Collaborative, Aligned Physicians



Coordinated Care



Consistent Patient Experience

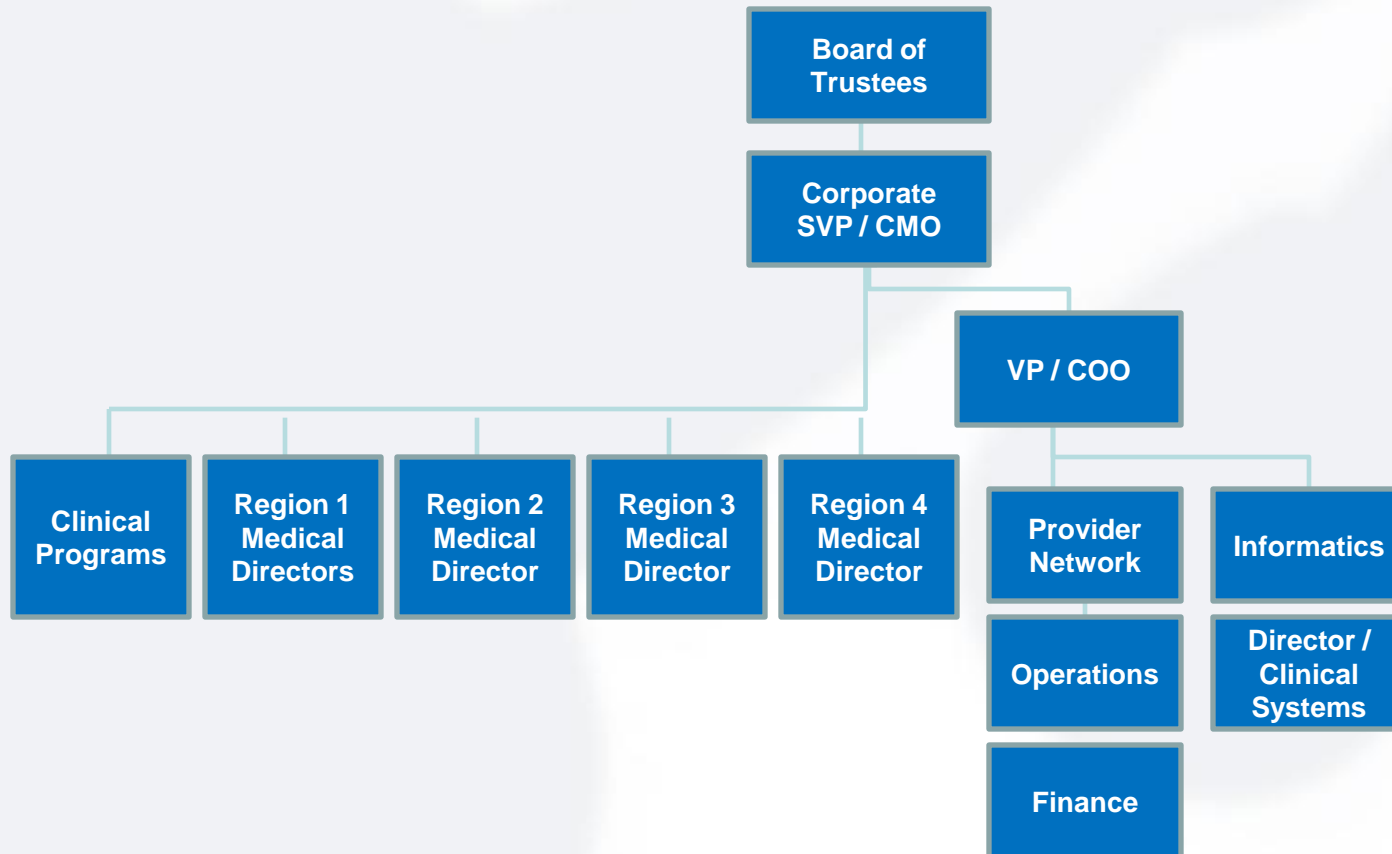


Quality Processes
Administrative
Patient Satisfaction
Clinical Outcomes

	Medical Specialties																	Surgical Specialties														
	PCP	Pediatrics	Allergy/Immunology	Psychiatry/Behavioral Health	Cardiology	Critical Care/Intensivist	Dermatology	Emergency Medicine	Endocrinology	Gastroenterology	Hospitalist	Infectious Disease	Nephrology	Neurology	Oncology	Pain Management	Pathology	Pulmonology	Radiology	Rheumatology	Anesthesiology	Cardiovascular Surgery	General Surgery	Neurosurgery	OB/GYN	Ophthalmology	Orthopedic Surgery	Otolaryngology	Plastic Surgery	Urology	Vascular Surgery	
TOTAL	7	4	3	1	2	3	0	3	2	1	3	1	3	4	2	4	0	3	0	4	0	3	3	4	1	2	3	3	2	2	3	
Quality Processes	77	13	11	8	5	7	8	7	8	6	10	10	11	5	8	6	6	2	9	3	7	5	16	11	6	14	6	12	8	6	8	12
Administrative	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3
Patient Satisfaction	1	0	0	0	0	0	0	1	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Clinical Outcomes	16	5	1	1	0	3	2	0	0	3	0	0	0	3	0	0	0	1	0	0	0	1	1	2	4	1	2	1	1	1	1	1
Total	104	25	18	13	10	16	13	10	15	14	14	17	15	14	15	11	13	5	16	6	14	8	23	18	15	22	12	20	15	12	14	19

The Message – Leadership

Governance & Organization Structure



Moving Stakeholders Along Commitment Curve



Quarter 1

Sequence & Tailor Message to Audience

STAKEHOLDER GROUP	ACTIVITIES / TACTICS	ENGAGEMENT GOALS				
		Aware	Understand	Accept	Support	Commit
Medical Group	Board		X	X		
Medical Group	Primary Care Chairs Council	X	X			
Medical Group	Specialty Chairs Council	X	X			
Medical Group	Administrative Leadership Team	X	X			
Medical Group	Behavioral Health Services	X	X			
Medical Group	Regional Operations Team 1 (Physicians-in-Charge)	X				
Medical Group	Regional Operations Team 2 (Physicians-in-Charge)	X				
Medical Group	Regional Operations Team 3 (Physicians-in-Charge)	X				
Medical Group	Specialty Department / Division Meetings	X				
Medical Group	CMO / CEO Newsletter	X				
Medical Group	Primary Care Newsletter	X				
Medical Group	Medical Group Newsletter	X				

Quarter 2

STAKEHOLDER GROUP	ACTIVITIES / TACTICS	ENGAGEMENT GOALS				
		Aware	Understand	Accept	Support	Commit
Medical Group	Board				X	X
Medical Group	Primary Care Chairs Council			X	X	
Medical Group	Specialty Chairs Council			X	X	
Medical Group	Administrative Leadership Team			X	X	
Medical Group	Behavioral Health Services			X	X	
Medical Group	Regional Operations Team 1 (Physicians-in-Charge)		X	X		
Medical Group	Regional Operations Team 2 (Physicians-in-Charge)		X	X		
Medical Group	Regional Operations Team 3 (Physicians-in-Charge)		X	X		
Medical Group	Specialty Department / Division Meetings		X	X		
Medical Group	CMO / CEO Newsletter		X			
Medical Group	Primary Care Newsletter		X			
Medical Group	Medical Group Newsletter		X			

Introducing the Program



Why Clinical Integration? / Why Now?

- Increased Expectations for higher quality at a lower cost
- Complex Compliance Requirements (ARRA / Meaningful Use)
- Changing Payment Systems with Healthcare Reform
- Competitive Market

Program Tenets

- Performance Measurement
- Enhanced Accountability
- Dissemination of Best Practices
- Improved Care Coordination
- Practice Support & tools
- Patient Engagement Tools

Participation Criteria / 2011 Terms

- Transparency
- Non-exclusivity
- Clinical Integration
- Data X-Change / Confidentiality
- Contracting
- Term & Termination

Quality / Efficiency Metrics Program

- 104 metrics to measure clinical quality, efficiency & value
- Leading practice targets and thresholds to drive performance and behavioral changes
- Operational processes, policies and procedures to manage ongoing metric selection and clinical reporting

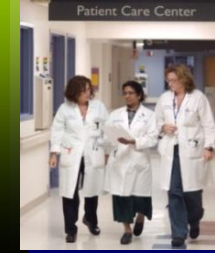
Superior Quality



Collaborative, Aligned Physicians



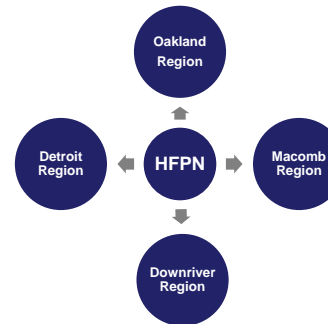
Coordinated Care



Consistent Patient Experience



Regional Collaboration



Benefit to Medical Group

- Ability to favorably impact quality of care beyond the boundaries of the Medical Group
- Ability to expand referral volume through a more extensive physician network
- Ability to enhance research opportunities through a broader network of physicians and patients
- Improve regional access to specialists
- Ability to engage in group contracting on a larger geographic scale and scope
- Potential for greater reward and resources through earned incentives and value creation

Physician Messaging #1



Why Clinical Integration? / Why Now?

- Increased Expectations for higher quality at a lower cost
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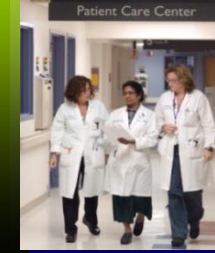
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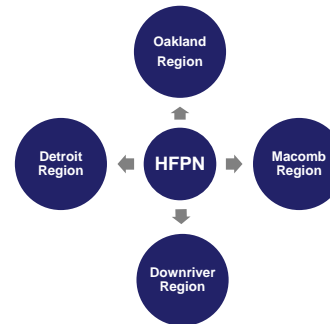
Coordinated Care



Consistent Patient Experience



Regional Collaboration



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Physician Messaging #2



Why Clinical Integration? / Why Now?

- Increased Expectations for higher quality at a lower cost
- Complex Compliance Requirements (ARRA / Meaningful Use)
- Changing Payment Systems with Healthcare Reform
- Competitive Market

Program Tenets

- Performance Measurement
- Enhanced Accountability
- Dissemination of Best Practices
- Improved Care Coordination
- Practice Support & tools
- Patient Engagement Tools

Participation Criteria / 2011 Terms

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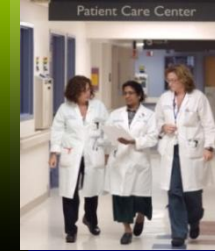
Superior Quality



Collaborative, Aligned Physicians



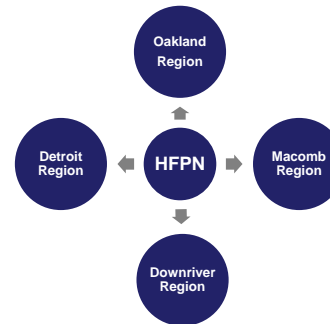
Coordinated Care



Consistent Patient Experience



Regional Collaboration



Benefit to Medical Group

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Physician Messaging #3



Why Clinical Integration? / Why Now?

- Increased Expectations for higher quality at a lower cost
- Complex Compliance Requirements (ARRA / Meaningful Use)
- Changing Payment Systems with Healthcare Reform
- Competitive Market

Program Tenets

- Performance Measurement
- Enhanced Accountability
- Dissemination of Best Practices
- Improved Care Coordination
- Practice Support & tools
- Patient Engagement Tools

Participation Criteria / 2011 Terms

- | | |
|----------------------|---------------------------------|
| Transparency | Non-exclusivity |
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| Contracting | Term & Termination |

Quality / Efficiency Metrics Program

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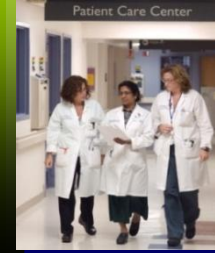
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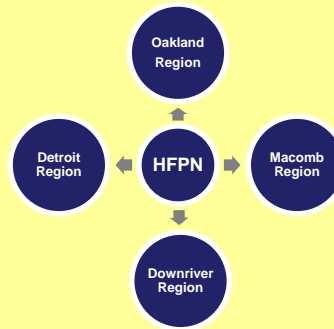
Coordinated Care



Consistent Patient Experience



Regional Collaboration



Benefit Medical Group

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- Improve regional access to specialists
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- Potential for greater reward and resources through earned incentives and value creation

Moving Stakeholders Along Commitment Curve



Recruitment & Onboarding

STAKEHOLDER GROUP	ACTIVITIES / TACTICS	ENGAGEMENT GOALS				
		Aware	Understand	Accept	Support	Commit
Prospects	Program Overview Pamphlet	X	X			
Prospects	Intro Letter & Pamphlet	X	X			
Prospects	Website	X	X	X		
Prospects	Recruiting Brochure		X	X	X	X
Prospects	IT Solutions Brochure		X	X	X	X
Prospects	MSO Offerings Brochure		X	X	X	X
Prospects	Web Google Ad Words Campaign	X				
Prospects	Web Video (Physician Leadership)		X	X	X	
Prospects	Web Testimonial Video (Physician Membership)		X	X	X	X
Prospects	Advertising / External Publications	X	X			
Prospects	Town Halls	X	X	X	X	X
Prospects	Individual Practice Meetings	X	X	X	X	X
New Members	Welcome Letter / Personal Thank You Notes				X	X
New Members	Orientation Binder				X	X
New Members	Practice Orientation Series					
New Members	Introduction / Orientation		X	X		
	Technical / Process Assessment - Install			X	X	X
	Performance Support			X	X	X
	Regional Collaboration Forums				X	X
New Members	Network eNewsletter	X	X	X	X	X
New Members	Practice Promotion Guidelines					X
New Members	Physician Profiles / Performance Dashboards					X

Sequence & Tailor Message to Audience

Recruitment Pamphlet

IT'S A REMARKABLE TIME FOR HEALTH CARE.

The opportunity to take healthcare delivery to a significantly higher level of performance – top quality care at lower cost – has never been more important.

The Henry Ford Physician Network is a physician-led, clinically integrated Accountable Care Organization (ACO) with the goal of creating a high degree of interdependence and cooperation among physicians to control cost and ensure quality across the full continuum of care.

The Henry Ford Physician Network is based on the idea that greater clinical collaboration and shared accountability among private practice physicians, Henry Ford Medical Group physicians, regional hospital employed physicians, and Henry Ford Health System hospitals will create better outcomes for the southeast Michigan community and health care as a whole.

The Henry Ford Physician Network is about a coordinated system of care. It's about bringing together top physicians to collectively create quality improvements. It's about using technology more effectively. And, it's about creating alignment of incentives with the creation of greater healthcare value.

We invite you to join us.



Henry Ford Physician Network

*An innovative program
for clinical integration
and your practice*

WHAT IS THE HENRY FORD PHYSICIAN NETWORK?

The Henry Ford Physician Network (HFPN) is a new business entity of the Henry Ford Health System and a coordinated system of care delivery that aligns physicians, hospitals and ancillary services around initiatives for clinical integration and quality improvement.

WHAT IS CLINICAL INTEGRATION?

Clinical Integration is defined as an active and ongoing program to evaluate and modify practice patterns by the network's physician participants and create a high degree of interdependence and cooperation among the physicians to control costs and ensure quality.

WHAT ARE THE BENEFITS OF CLINICAL INTEGRATION?

Clinical Integration provides patients with greater consistency of high quality care delivery from a trusted source - their physician – through patient-centered tools and approaches including use of advanced information technology to support communication between you, your colleagues and your patients.

Clinical Integration allows physicians to demonstrate their quality and efficiency to current and future patients, payors and employers, and to enter into physician-directed "pay-for-performance" and other contractual arrangements with health plans in a way that financially recognizes the physicians' efforts to improve health care quality and efficiency.

Clinical Integration gives hospitals the ability to develop more collaborative relationships with their medical staff, enlist physician support for quality initiatives, and position themselves at an advantage in the market on the basis of quality.

Clinical Integration gives employers the ability to more effectively manage the health care costs of employees and their dependents through the purchase of better, more efficient health care services.

WHY SHOULD PHYSICIANS CONSIDER PARTICIPATING IN THE HENRY FORD PHYSICIAN NETWORK?

This is an opportunity to be part of an innovative physician-led organization committed to demonstrating measurable improvements in the quality of health care and in expanding that impact in southeastern Michigan.

Participation allows you to maintain your current business model as a private, employed or Medical Group physician with enhanced access to Henry

Ford systems, resources and services to support your practice.

Participation includes access to affordable technology solutions that will make your practice more efficient and help position you to meet meaningful use requirements.

WHAT ARE THE RESPONSIBILITIES OF PARTICIPATION?

Physicians enrolled in the network agree to participate actively and meaningfully in efforts related to continuous improvement, quality and safety, efficiency, access, performance measurement, patient status communications, discharge standards, and adoption of team care medical home principles. Specifically, physicians agree to:

- Adopt and adhere to physician developed standards to improve quality and efficiency
- Collaborate with HFPN participants to improve performance
- Promote, refer to, and communicate with HFPN participants appropriately and effectively
- Agree to be measured and share information to facilitate measurement
- Adopt technology offered and/or recommended by the HFPN, including high speed internet access, ePrescribing, disease registry and data exchange tools
- Maintain medical staff privileges in good standing at a Henry Ford Health System hospital

WHO IS ELIGIBLE TO JOIN THE HFPN?

Participation in the HFPN is open to all medical staff with current privileges at HFHS hospitals.



Moving Stakeholders Along Commitment Curve



Regional & Media Focus

STAKEHOLDER GROUP	ACTIVITIES / TACTICS	ENGAGEMENT GOALS				
		Aware	Understand	Accept	Support	Commit
Regions	Individual Physician Letters / Focused Outreach	X	X			
Regions	Program Brochures	X	X			
Regions	IT Pamphlets / Fact Sheets	X	X			
Regions	MSO Service Pamphlets/Detailing	X	X			
Regions	Medical Staff Meetings	X	X	X		
Regions	<i>Regional Newsletters / Publications</i>	X	X			
Regions	<i>Town Hall Meetings</i>	X	X	X		
Regions	1:1 Physician Meetings			X	X	X
Regions	Medical Staff Office Scripting		X	X	X	X
Regions	CME Events		X	X	X	
Regions	Service Chiefs Meetings			X	X	X
Regions	Practice Meetings		X	X	X	
Regions	Posters in Physician Lounges	X	X			
Media	Press Releases	X	X			
Media	Op Ed			X	X	
Media	Medical Society Meetings	X	X	X	X	

Sequence & Tailor Message to Audience

The Journey

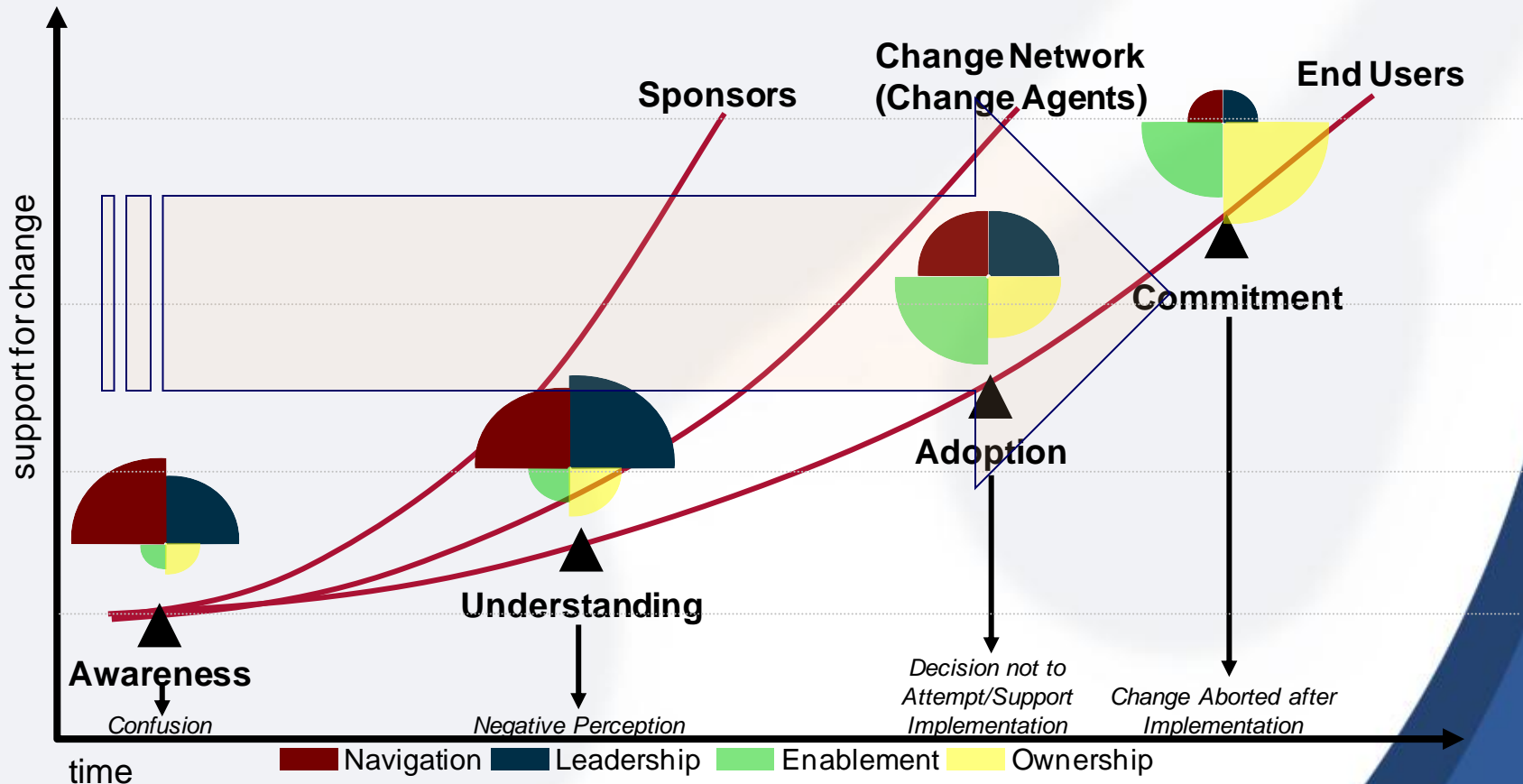


	SPRING 2009	FALL 2009	SPRING 2010	SUMMER 2010	WINTER 2011
Program Milestones	Confirmed Future State Vision	Secured Exec Alignment & Support	Incorporated New Business Entity	Launched Physician Recruitment	Go Live with Clinical Program Phase 1
Physician Leadership	Project Champion	Steering Committee	Board of Trustees	CEO Board Committees	Deploy Regional Medical Directors
Medical Group	Participated in Establishing Vision	Engaged CEO Medical Leadership	Engaged Department Chairmen	Engaged Division Leaders – Medical Staff	Launched Regional Infrastructure
Private Practice		Engage Group Leaders / Champions	Engage Practice / PHO / Group Leadership	Engage Medical Staff	Launched Regional Infrastructure
Employed Physicians		Engaged CEOs / CMOs	Engaged Practice Leaders	Engaged Medical Staff	Launched Regional Infrastructure
Other	Contribute to Vision	Engaged Leaders	Engaged in Processes	Defined Roles and Actions	Launched Regional Infrastructure

Stakeholder Groups

The Status

As of January 2011, 1,550 signed physician participation agreements





Contact Information



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