New Roles - New Skills: Building a Workforce For the New World

Session 5, March 5th, 2018
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University of Maryland Medical System
Conflict of Interest

Karen Marie Wilding

Has no real or apparent conflicts of interest to report.
Agenda

• Review of Learning Objectives
• Seize Change Management Opportunities
• Identifying Skills for the Future
• Building & Maintaining Teams
• Closing
• Questions
Learning Objectives

• Discuss current challenges and opportunities for staffing within technology, analytics and population health

• Identify changing staff skillsets required for care delivery transformation

• Explore options for internal resource investment and when to consider external sources
Seize Change Management Opportunities

Understanding current state
- LICENSED BEDS: 2,252
- EMPLOYEES: 25,620
- HOSPITAL ADMISSIONS: 109,414
- OUTPATIENT VISITS: 1,447,357
- EMERGENCY VISITS: 374,853
- OP SURGICAL CASES: 65,301

- Epic
- Cerner Lab
- Meditech
- Data Warehouse
Quality Care Network

Participating Providers ~ 400 primary care providers

- Calvert Internal Medicine Group
- Clinical Associates*
- Maryland Primary Care Physicians*
- Mercy - Maryland Family Care
- Seton Medical Group*
- University of Maryland Community Medical Group*
- St. Joseph Medical Group*
- Intermed County IPA
- Cecil County Pod Practices
  - Dr. Neil Lattin, Family Healthcare of Elkton, Mulvey Family Practice
  - North Bay Medical Associates, Stone Run Family Medicine
  - Union Primary Care*, West Cecil Health Center
- Harford County Pod Practices
  - Dr. Louis Silverstein, Dr. Ragu, Union Medical Clinic
  - Naguib Family Medicine*, Harford Primary Care*
  - Plumtree Family Health Center*, Upper Chesapeake Primary Care*

*QCN groups participating in ACO
Proactive, Patient-Centered Care

Practice Transformation Specialists engage office staff in identifying quality and cost opportunities to drive value while promoting network optimization.

Helps providers manage high-risk patients, including complex case management, transitions, and ED utilization to drive overall health.

Helps providers manage social needs of patients impacting adherence, utilization to drive overall health.

Provides behavioral health and social work support to improve outcomes pertaining to adherence, utilization, and care optimization.

Serves as clinical thought leader who works with QCN providers to pursue best practices and advance value-based care performance.

Integrates data from members and payers into an informatics and workflow platform.

Optimizes pharmacy care via initiatives that promote medication adherence, generic medication utilization, and care optimization.
Changing Healthcare Environment

If you don’t like something, change it. If you can’t change it, change your attitude.

– Maya Angelou

• Migration to Value Based Care Reform
  – CMS MIPS Program
  – Accountable Care Organizations

• Health Information Exchange
  – TEFCA

• Affordable Care Act

• International Classification of Diseases (ICD-10)
  – Hierarchical Condition Coding (HCC) – Risk Adjustment

• Clinically Integrated Networks

• Expansion of Public Health Reporting

• Organizational growth, desire for data
## Migration from Fee For Service

### Value-Based Programs

<table>
<thead>
<tr>
<th>LEGISLATION PASSED</th>
<th>PROGRAM IMPLEMENTED</th>
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<tbody>
<tr>
<td>2008</td>
<td>MIPPA</td>
</tr>
<tr>
<td>2010</td>
<td>ACA</td>
</tr>
<tr>
<td>2012</td>
<td>PAMA</td>
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<td>2014</td>
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<td>2015</td>
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<tr>
<td>2018</td>
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<tr>
<td>2019</td>
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</table>

**LEGISLATION**
- ACA: Affordable Care Act
- MIPPA: Medicare Improvements for Patients & Providers Act
- PAMA: Protecting Access to Medicare Act

**PROGRAM**
- APMs: Alternative Payment Models
- ESRD-QIP: End-Stage Renal Disease Quality Incentive Program
- HVBP: Hospital Value-Based Purchasing Program
- HRRP: Hospital Readmissions Reduction Program
- SNF-VBP: Skilled Nursing Facility Value-Based Purchasing Program
- MIPS: Merit-Based Incentive Payment System
- VM: Value Modifier or Physician Value-Based Modifier (PVBM)

### Target Percentage of Medicare FFS Payments Linked to Quality and Alternative Payment Models in 2016 and 2018

- **2016**
  - All Medicare FFS (Categories 1-4): 85%
  - FFS linked to quality (Categories 2-4): 30%
  - Alternative payment models (Categories 3-4): 5%

- **2018**
  - All Medicare FFS (Categories 1-4): 90%
  - FFS linked to quality (Categories 2-4): 50%
  - Alternative payment models (Categories 3-4): 10%
## Industry Priorities

### Table 5: Top Shared Priorities

<table>
<thead>
<tr>
<th>Priority</th>
<th>Healthcare Providers</th>
<th>Vendors/Consultants</th>
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<tbody>
<tr>
<td>Privacy, Security and Cybersecurity</td>
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<td>Quality and Patient Safety Outcomes</td>
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<td>2</td>
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<tr>
<td>Care Coordination, Culture of Care, and Population Health</td>
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<td>3</td>
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</table>

### Table 6: Divergent Priorities

<table>
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<th>Priority</th>
<th>Healthcare Providers</th>
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<tbody>
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<td>Electronic Health Records (EHRs)</td>
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<tr>
<td>Business of Healthcare and New Payment Models</td>
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<td>4</td>
</tr>
<tr>
<td>Compliance, Risk Management and Program Integrity</td>
<td>5</td>
<td>10</td>
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<tr>
<td>Health Info. Exchange, Interoperability &amp; Data Access</td>
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<td>5</td>
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</table>

2017 HIMSS Leadership and Workforce Survey
Industry Priorities

**Table 7: Ranked Priorities - Providers**

<table>
<thead>
<tr>
<th>Priority</th>
<th>Healthcare Providers</th>
<th>Hospitals</th>
<th>Ambulatory</th>
<th>LTPAC</th>
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<td>Quality and Patient Safety Outcomes</td>
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<td>4</td>
<td>3</td>
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<tr>
<td>Integrity</td>
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2017 HIMSS Leadership and Workforce Survey
Technology is a precursor to healthcare reform

- 46% of physicians participate in delivery reform programs, and 90% of those physicians use a certified EHR
- Patient-Centered Medical Home (PCMH) participants (94%) reported use of a certified EHR
Provider Communication

Hospital Notification – ER Visit
- 57% notify PCPs inside the hospital's system
- 30% notify PCPs outside the hospital's system

Value Proposition
- Patient Safety
- Care Coordination
- Provider Engagement
- Potentially Avoidable Utilization (PAU)
Health Information Workforce Development Program

Office of the National Coordinator (ONC) was awarded $84 million to implement – 2009 ARRA

• The development education materials
• Community college non-degree training programs
• A competency exam program
• University-based training programs for specialized health IT roles

• 2015-2016 ONC awarded seven grantees $6.7 million to update training materials
• Train 6,000 incumbent health care workers
• The updates focused on four key topic areas
  – Population Health
  – Care Coordination
  – New Care Delivery and Payments Models
  – Value Based & Patient Centered Care
Challenges & Opportunities

• Keeping Pace Regulation
• Fluency Business of Healthcare
• Verbalize Care Continuum & Dependencies
• Identify components needed for analytics
• Technology depth beyond EMR
• Independence, self starters, motivated
• Adaptability to environment and leader needs
Identifying Skills for the Future

Growing a team, anticipating needs
Job Market

• Hospitals, health systems
• Practices
• Software vendors and consulting firms
• Education / Academic
• Insurance / payers
• Start ups
• Associations in healthcare
• Physician organizations
• Bio-Tech companies
• Pharmaceutical companies
• Government
Build a Team

• Execute on Work Streams
  – Identify Patient Populations
  – Implement Clinical Programs
  – Lead Provider Engagement
  – Optimize Practice Revenue
  – Close Gaps in Care
  – Coordinate with Payers
  – Administer, Monitor & Report Performance
  – Guide Regulation Interpretation
  – Ensure compliance, coordinate audits

• Strengths
  – Clinicians
  – Project Management
  – Technology (EMR, Interoperability & Analytics)
  – Data Standards
  – Workflow & Process Re-Design
  – Quality Measures & Registries
  – Operations
  – Regulations & Healthcare Policy
Technology – Applications & Reporting

• Work Experience
  – EMR
  – Clinical
  – HIE
  – Payer
  – Programming/Analytics
  – Data Science
  – Business Analysts

• Most Desirable Skills
  – Keep Pace with Changing Environment
  – Technology
    • EMR Workflow & Build
    • Interoperability
    • Data Standards & Measures
    • Data Visualization
    • Claims Reporting
    – “Out of the Box Thinking“
  – Project Management
  – Analysis
    • Documentation
Quality/Data Analytics

- Work Experience
  - Quality
  - Nursing
  - Payer/Regulator
  - EMR
  - Policy/Regulations
  - Consultants
  - Project Management
  - Programming/Analytics

- Most Desirable Skills
  - Project Management
  - Technology
    - EMR Workflow & Build
    - Excel
    - Data Visualization
    - Claims Reporting
  - Analysis
  - Communication
    - Providers
    - Executives
Practice Transformation

• Work Experience
  – Payer
  – Patient Centered Medical Home
  – EMR
  – Medical Assistants
  – Practice Managers
  – Revenue Cycle
  – Coding
  – Clinical Documentation Improvement
  – Nursing/Care Management
  – Allied Health

• Most Desirable Skills
  – Communication
    • Providers
    • Executives
  – Technology Aptitude
    • EMR Workflow
    • Reports
  – Facilitation
    • Joint Operating Committees
  – Documentation
    • Tip Sheets
Value Based Care

• Work Experience
  – Payer
  – Nursing/Allied Health
  – EMR/Technology
  – Policy/Regulations
  – Project Management
  – Revenue Cycle
  – Practice Management
  – Operations

• Most Desirable Skills
  – Communication
  – Technology
  – Analytics
    • Sync between Clinical, Revenue & Payer
  – Process Improvement
  – Change Management
  – Project Management
  – Program Development
Building & Maintaining Teams

“Keep the Machine Tuned”
Anticipate Needs

- Capacity Management – Supply/Demand
- Flexible Staffing
  - Per Diem
  - Supplemental Support
  - Interns
- Draw Future Needs on your Org Chart
Unconventional Teams

• Don’t be afraid of Matrix Relationships
• Empower teams to take on key initiatives
• Allow everyone to become a SME
• Ask staff
Retention

- Communication
- Flexibility
- Opportunities for Growth
- Continuous Education
- Leadership
Closing Thoughts
Key Takeaways

• Effective Change Management is critical for leadership, growth & outcomes
• Partner with key stakeholders & align opportunities
• Be prepared to educate everyone on your mission, vision
• Manage like a Start-Up
• Invest in Staff and Team Dynamics
• Communicate more than you think you should
Questions

Karen Marie Wilding, FHIMSS, CHCIO-Eligible

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Please complete the online session evaluation!