

HIGH PERFORMING HEALTH SYSTEMS – CLINICAL PROCESSES AND CHANGE MANAGEMENT

The Leadership Institute

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Banner Health

VP, CMO Community Delivery

April 2017



Banner Health®

DISCLOSURE:

I am an employee of Banner Health.
I have no other financial disclosures.

THE JOURNEY

- ▶ **Brief market context**

- ▶ **Focus on non-acute enterprise**

- ▶ Digital and telehealth integration
- ▶ Urgent care
- ▶ Transitions of care
- ▶ Precision medicine and academic affiliation

- ▶ **Payor strategy**

- ▶ **Cyber security**

- ▶ **Insights and future considerations**

- ▶ **Group discussion**

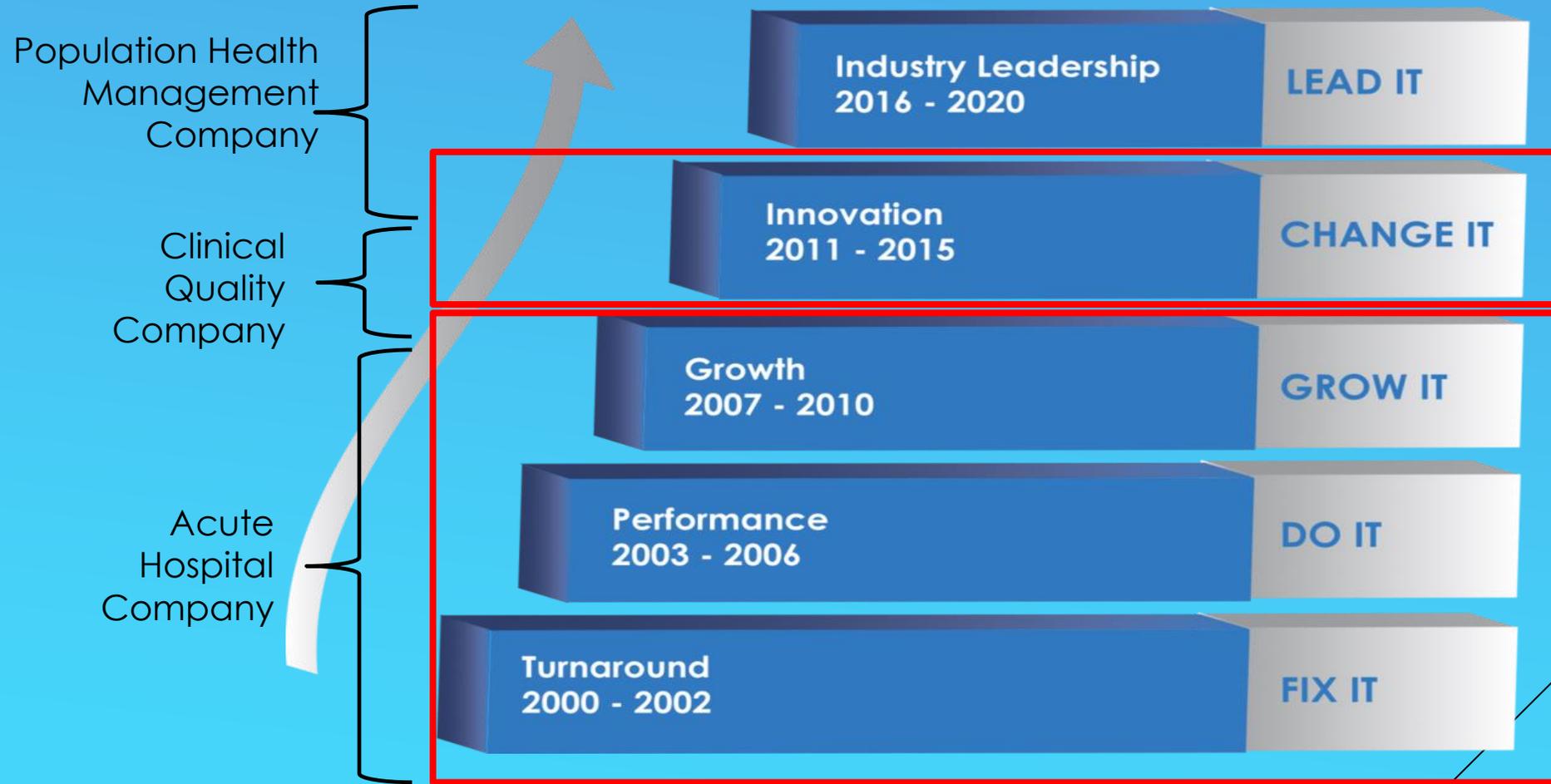
MISSION

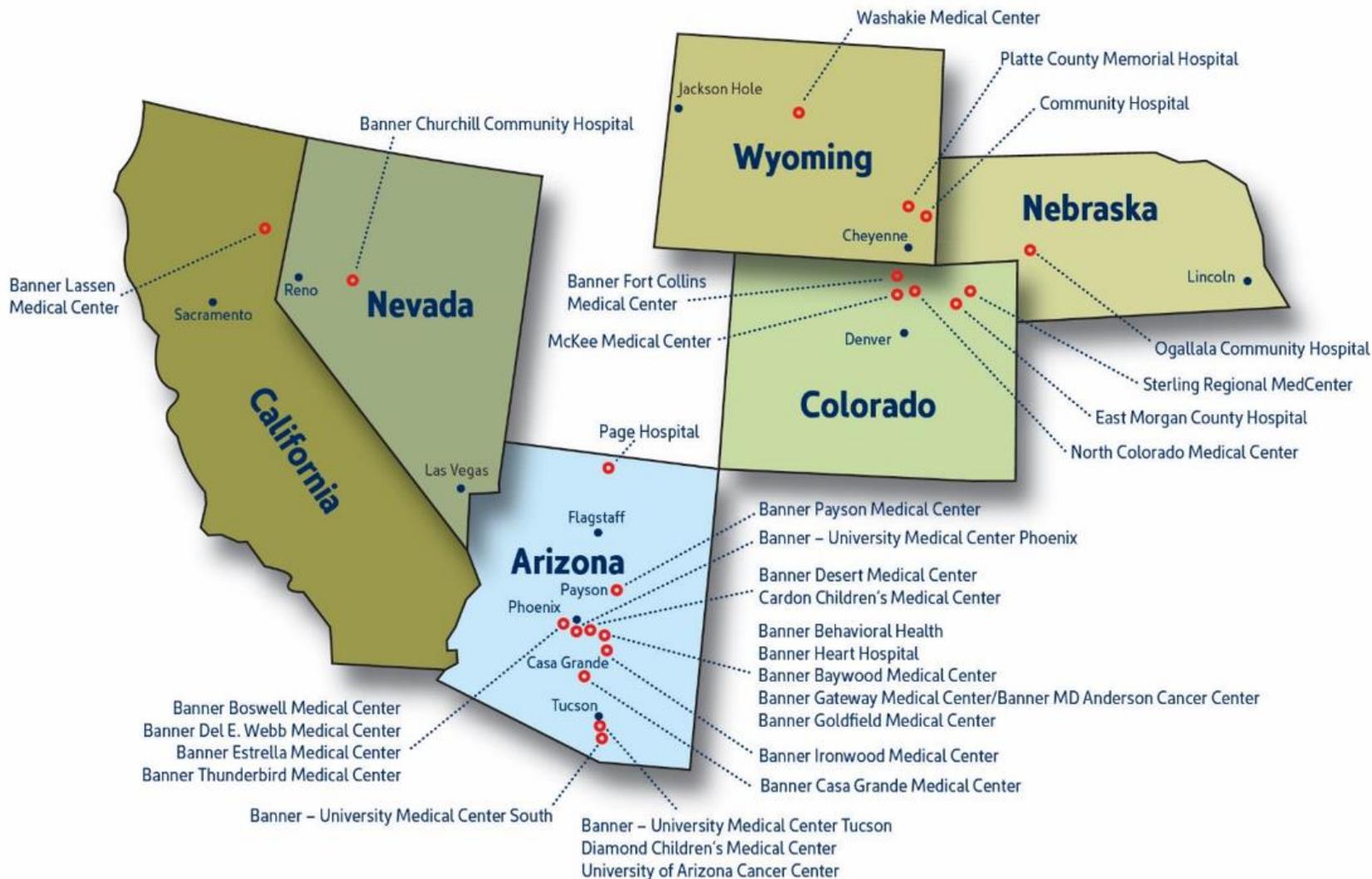
Banner Health:

*We exist to make a difference in
people's lives through excellent
patient care*

BANNER'S 2020 VISION

"OUR STEPS TO THE FUTURE"





- 28 Acute Care Hospitals
- Banner Health Network/ACO
- Medical Groups with more than 2000 providers
- Banner Health Centers and Clinics
- Behavioral Hospital
- Outpatient Surgery
- Home Care, Hospice and other services
- Urgent Care Centers network

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Banner Health®

THE EVALUATION OF TRANSPARENCY IN MEDICAL INFORMATION

Q X A = E

**Everything is about change
management**

**Clear communication is essential to
all change management**

A series of several parallel diagonal lines in the bottom right corner of the slide, extending from the bottom edge towards the right edge.

CARE MANAGEMENT COUNCIL

ANESTHESIA

BEHAVIORAL
HEALTH

CRITICAL
CARE

CV SURGERY

NEURO-
SCIENCES

ED

NICU/
Newborn

PALLIATIVE
CARE

PULMONARY

LONG TERM
CARE

WOMENS
HEALTH

PEDIATRICS

INFECTIOUS
DISEASE

PHARMACY &
THERA-PEUTICS

SURGERY

NEPHROLOGY

MEDICAL
IMAGING

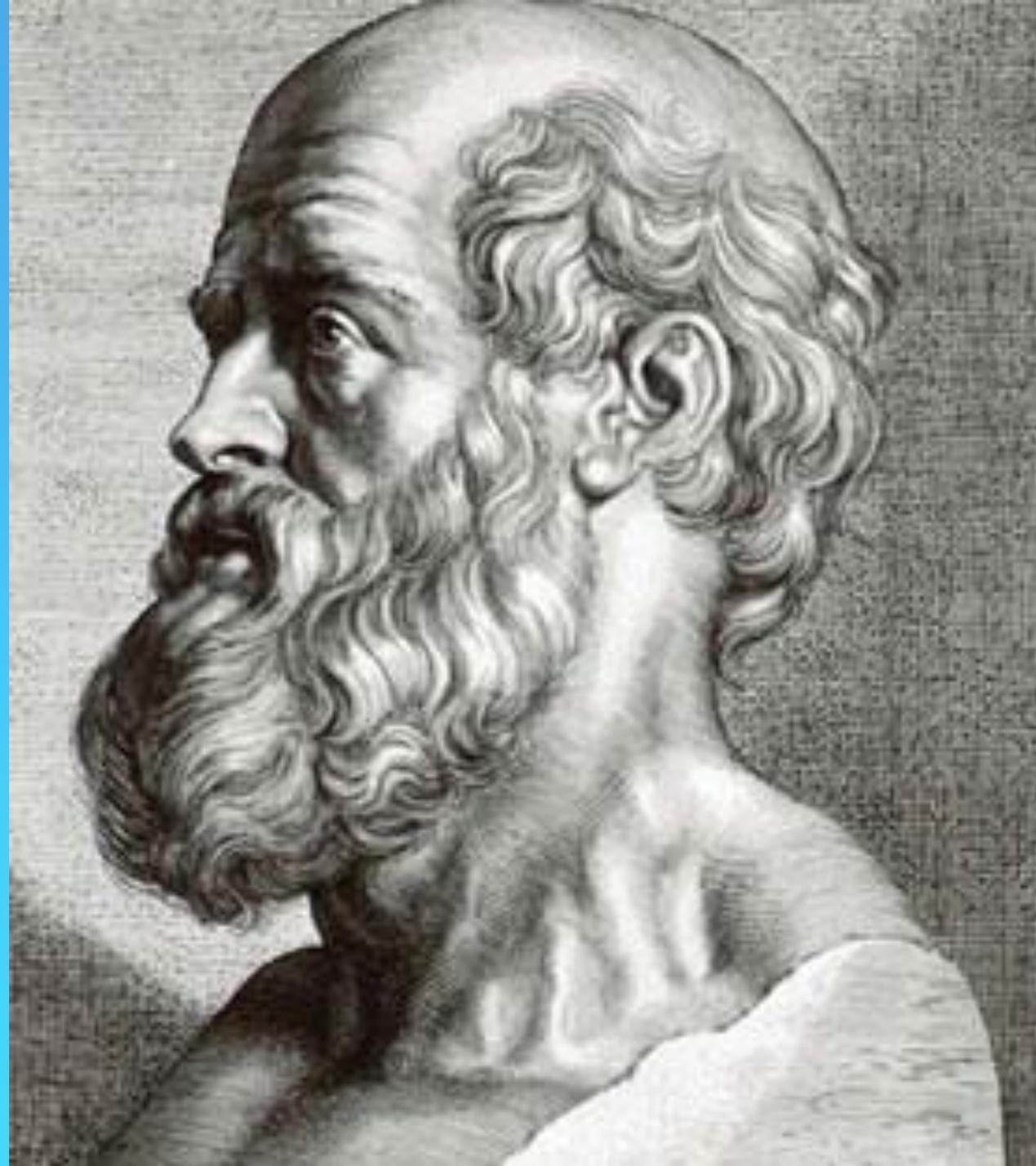
CARDIOLOGY

HOSPITAL
MEDICINE

PRIMARY
CARE

ORTHO

ONCOLOGY



CODE OF
OF THE
AMERICAN
MEDICAL ASSOCIATION

ADOPTED MAY 1847.



PHILADELPHIA:
T. K. AND P. G. COLLINS, PRINTERS.
1848.

medical man is under the strongest obligations of secrecy. Even the female sex should never allow feelings of shame or delicacy to prevent their disclosing the seat, symptoms, and causes of complaints peculiar to them. However commendable a modest reserve may be in the common occurrences of life, its strict observance in medicine is often attended with the most serious consequences, and a patient may sink under a painful and loathsome disease, which might have been readily prevented had timely intimation been given to the physician.

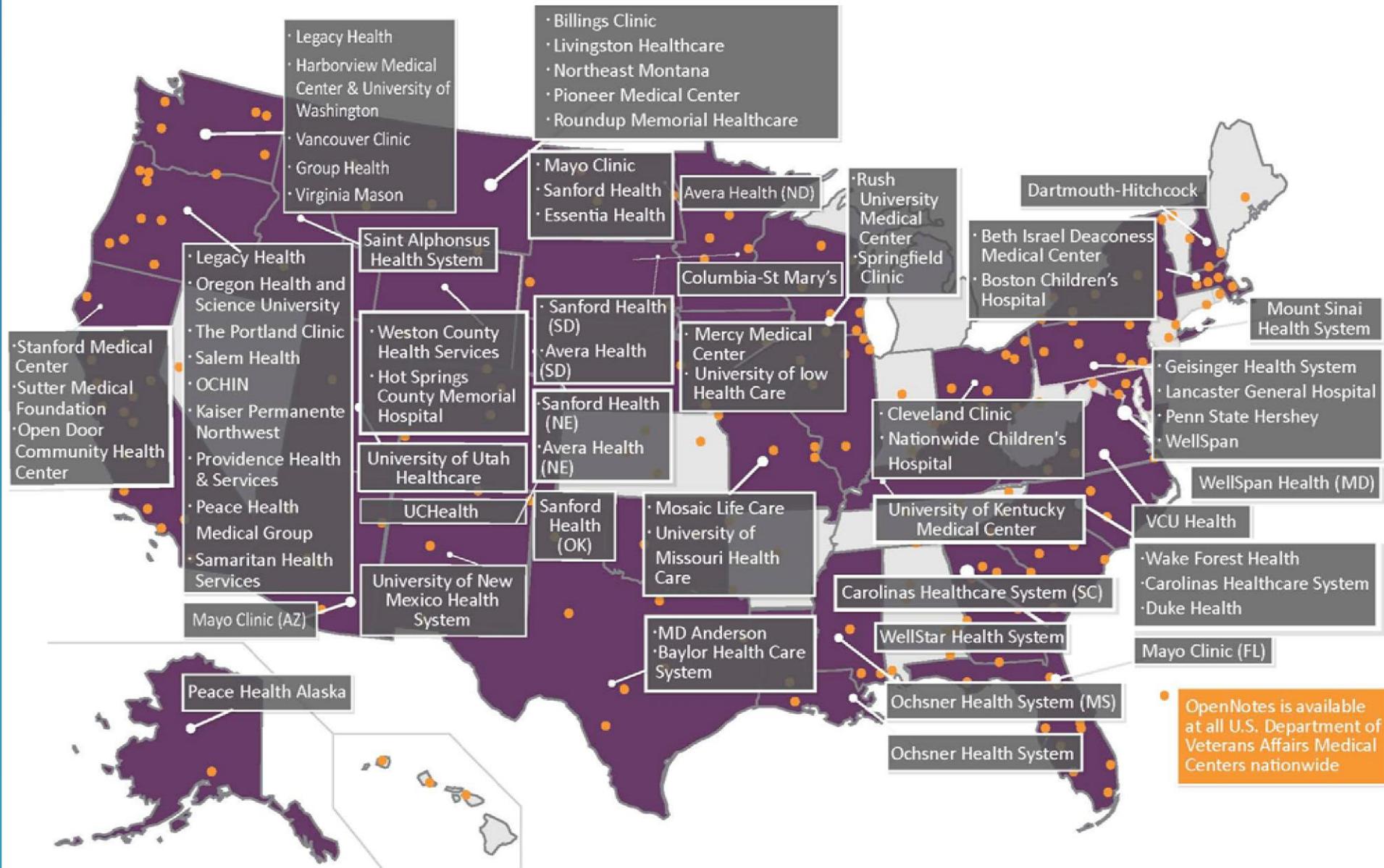
§ 5. A patient should never weary his physician with a tedious detail of events or matters not appertaining to his disease. Even as relates to his actual symptoms, he will convey much more real information by giving clear answers to interrogatories, than by the most minute account of his own framing. Neither should he obtrude upon his physician the details of his business nor the history of his family concerns.

§ 6. The obedience of a patient to the prescriptions of his physician should be prompt and implicit. He should never permit his own crude opinions as to their fitness, to influence his attention to them. A failure in one particular may render an otherwise judicious treatment dangerous, and even fatal. This remark is equally applicable to diet, drink, and exercise. As patients become convalescent, they are very apt to suppose that the rules prescribed for them may be disregarded, and the consequence, but too often, is a re-





More than 10 million patients have easy access to their clinicians' notes



Transparency of Healthcare Service Information (Adult/Pediatric)

PRACTICE APPROACH:

Expected Clinical Practice

PRACTICE STATEMENT:

Consumers of Banner Health services, or their legally authorized representative, will have timely access to their personal health information (PHI) and the support needed for self-management.

RATIONALE:

The ability of individuals to access and use their online medical records serves as one of the cornerstones of national efforts to increase engagement and improve health/outcomes (Patel, 2014). Portals have a positive influence in patient's health by enabling and stimulating patients to manage and monitor their care, something that may be of particular value to patients with chronic diseases. Numerous research studies have been conducted to assess the impact of patient portals (and similar EHR-linked online services) on patient outcomes, and several reviews of this rapidly growing literature have been published. Several studies have indicated that patient portals to be correlated with better chronic disease management, expressed as improved outcome indicators such as blood pressure and hemoglobin A1C levels (Trojel, 2015). Studies indicate that use of the portal is positively associated with patient satisfaction (Trojel, 2015).





TELEHEALTH

YES



Tele ICU



Tele Psych



Tele Neuro

NO



Tele SNF

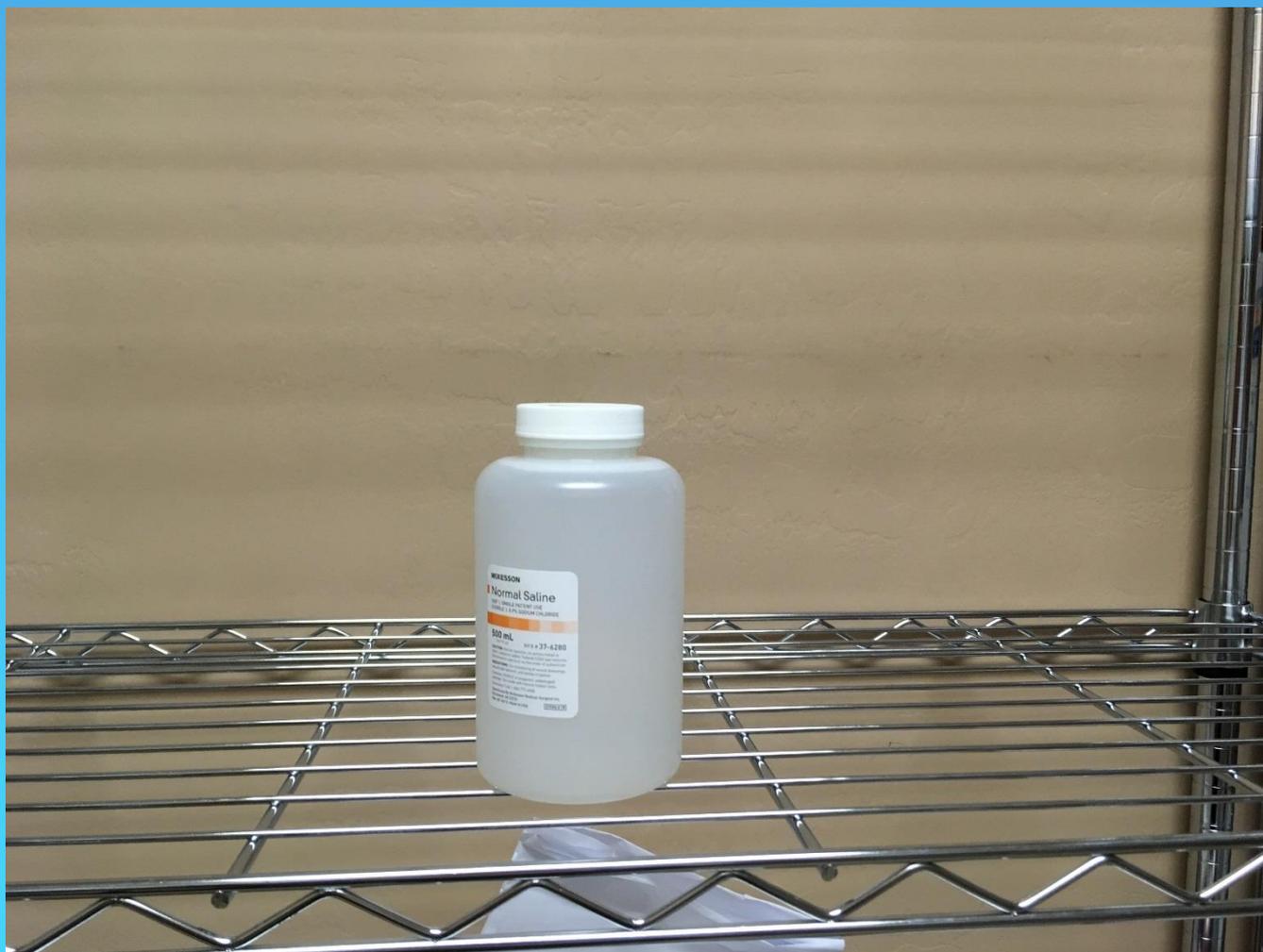


Tele Obs

OPEN

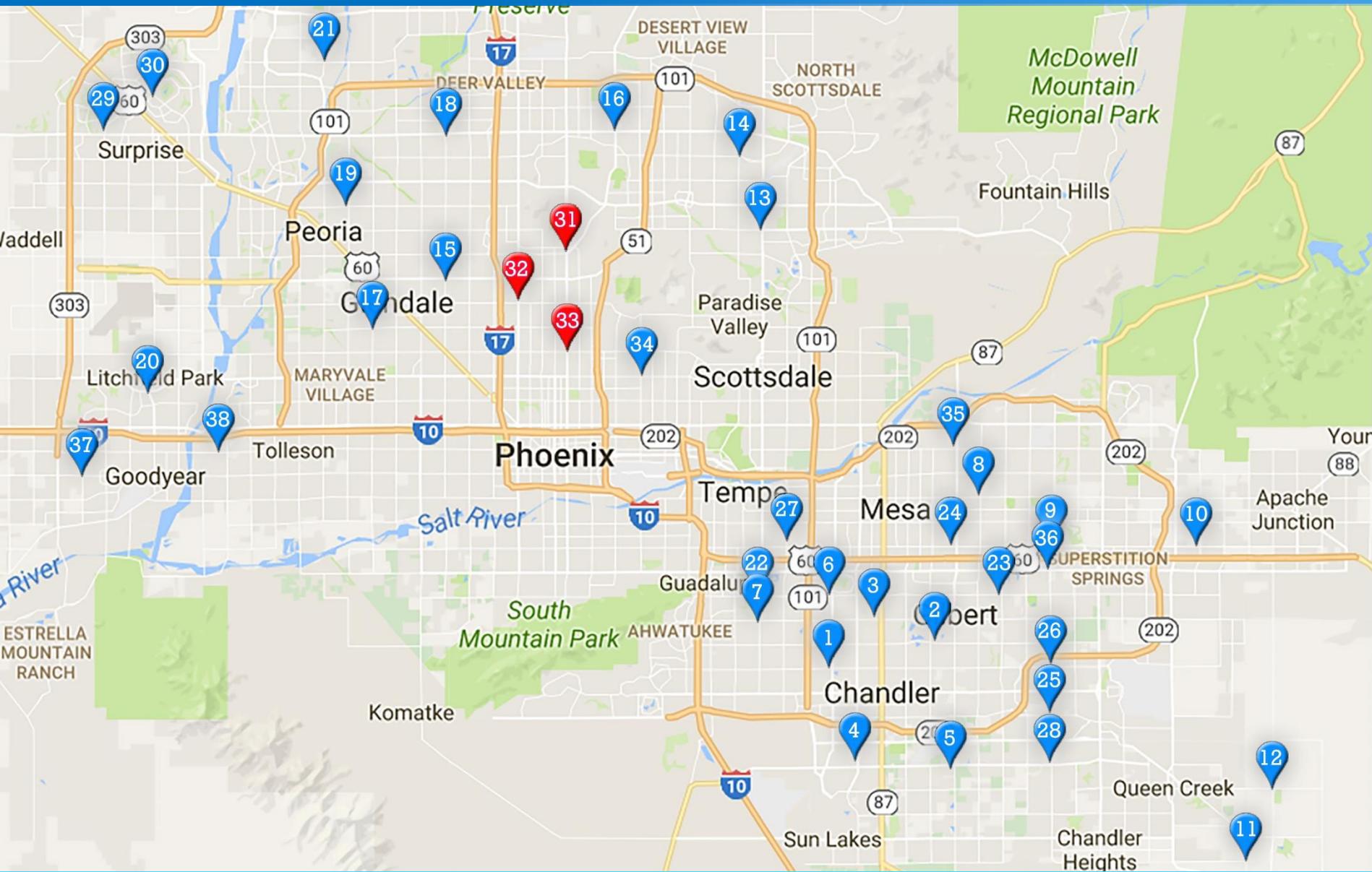
BANNER URGENT CARE SERVICES





BUCS Map Phoenix

OPERATIONS



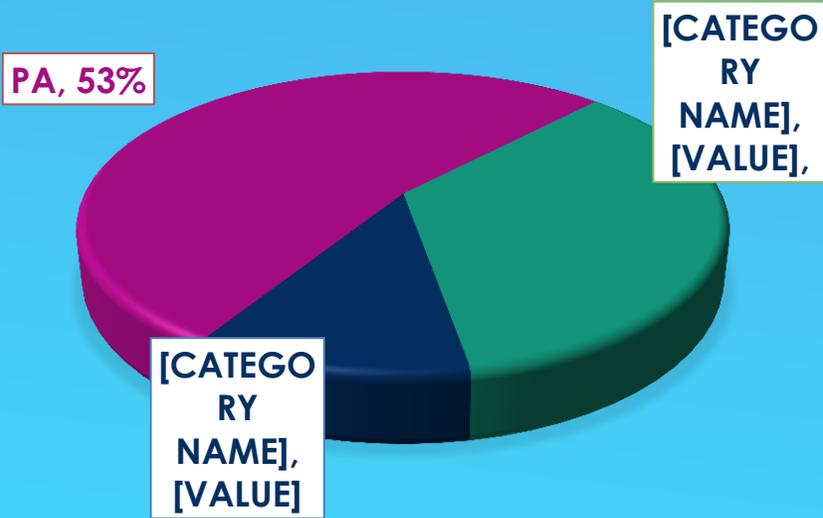
BUCS Current Clinics
Total: 40



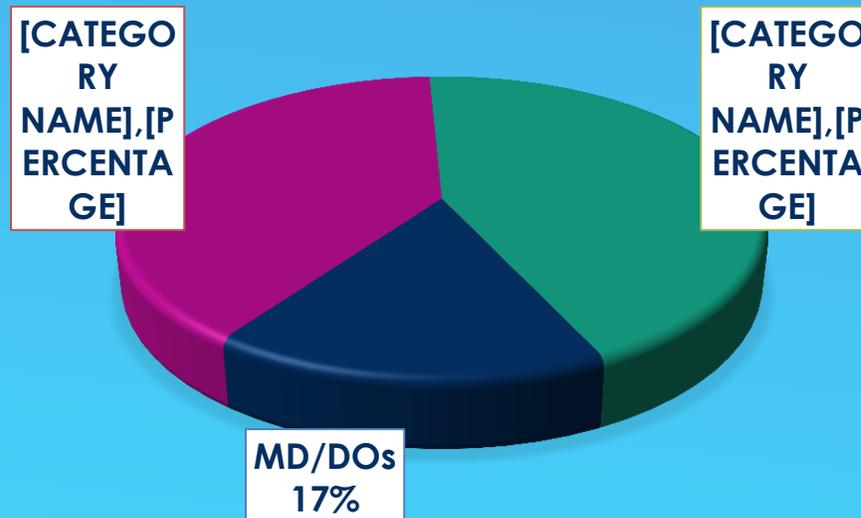
BUCS Future Clinics
Total: 3

BUCS Provider Composition

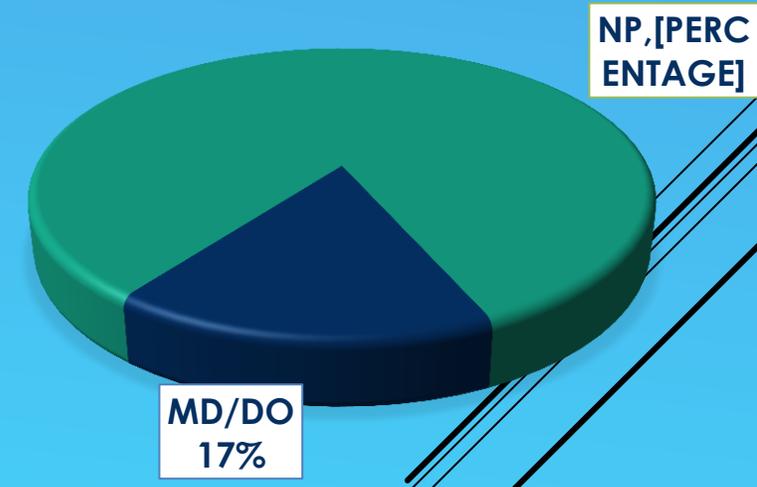
77 Providers
Oct 2016



137 Providers
March 2017

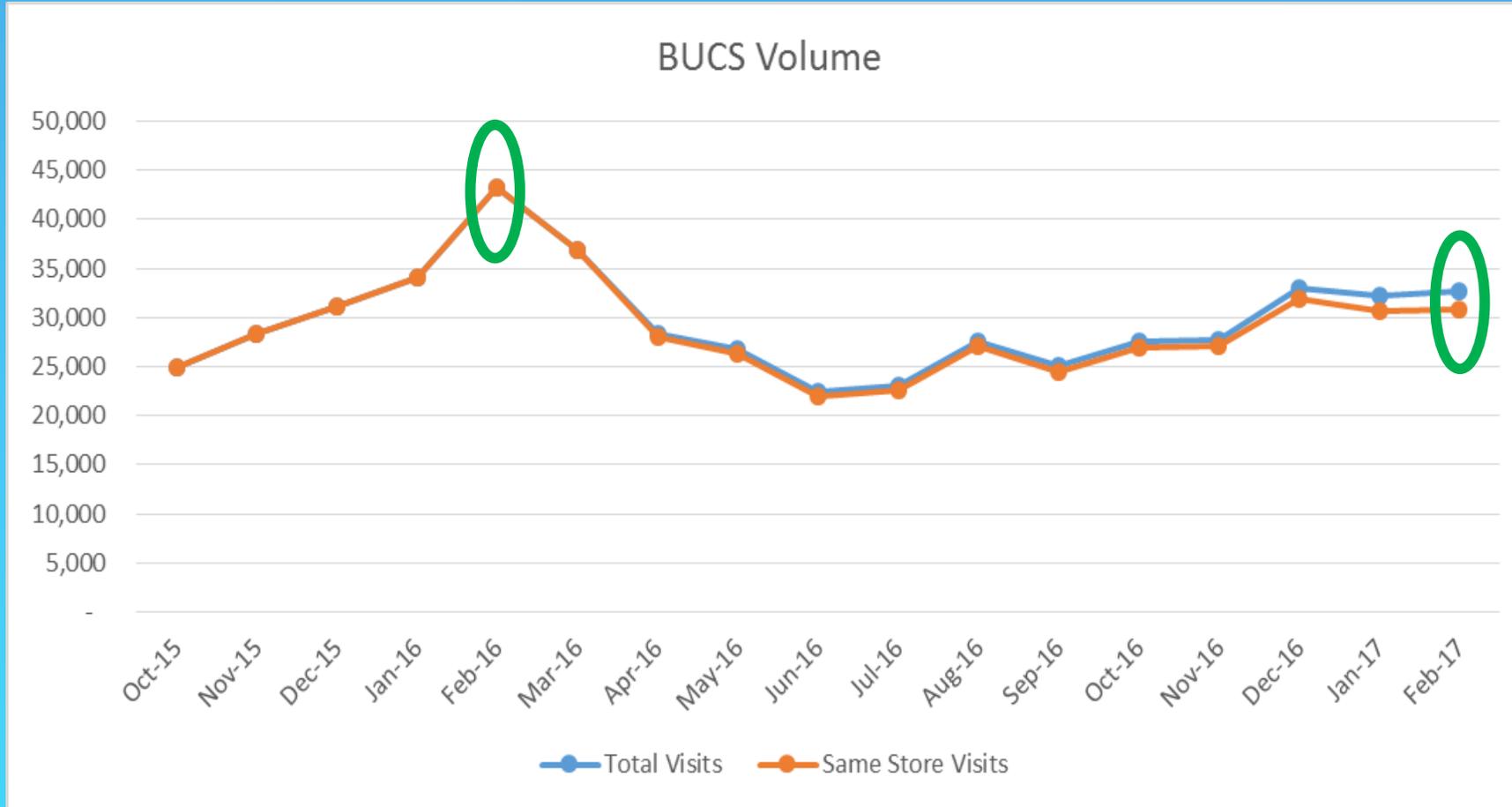


Ideal State*



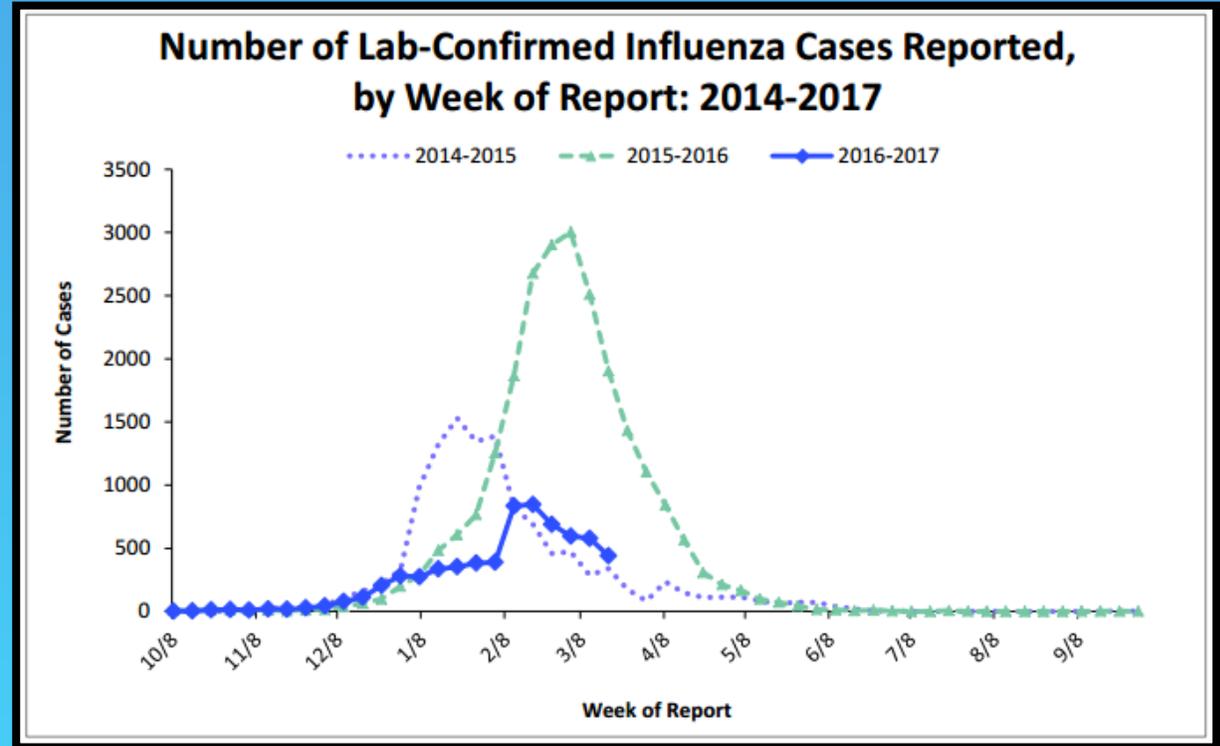
* \$80,000 Savings

BUCS Volume



Flu Season

- ▶ 64% fewer cases than 2016
- ▶ 35% fewer than typical year



| | Cumulative Season Total | Current Week Total |
|--|-------------------------|--------------------|
| 2016-2017 | 6,559 | 440 |
| 2015-2016 | 18,756 | 1,903 |
| 5 year average | 10,165 | 605 |
| % increase, compared to 2015-2016 season | -65% | -77% |
| % increase, compared to a typical flu season | -35% | -27% |
| % increase, compared to last week | 7% | -24% |

Reputation.com

Executive Summary

CUSTOMER

Year-To-Date Summary

Total Reviews

216

41% Positive | 4% Neutral | 55% Negative

Overall Rating

2.7 /5

Reputation Score

-

All Time Summary

Total Reviews

All Time
1,854

47% | 5% | 48%

At Start

958

55% | 6% | 39%

Overall Rating

All Time
3.0

At Start
3.3

Reputation Score

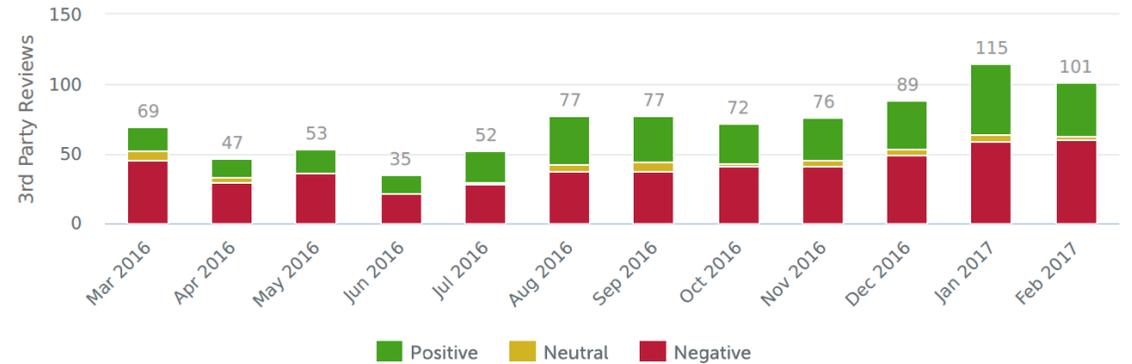
All Time
-

At Start
-

Monthly Summary

| Month | Total Reviews | | Overall Rating |
|---------------------------------------|---------------|--|----------------|
| February 2017 | 101 | 38% Positive 3% Neutral 59% Negative | 2.6 /5 |
| January 2017 | 115 | 45% Positive 4% Neutral 51% Negative | 2.8 /5 |
| Previous 12 Months Monthly Average | 72 | 39% Positive 5% Neutral 56% Negative | 2.7 /5 |

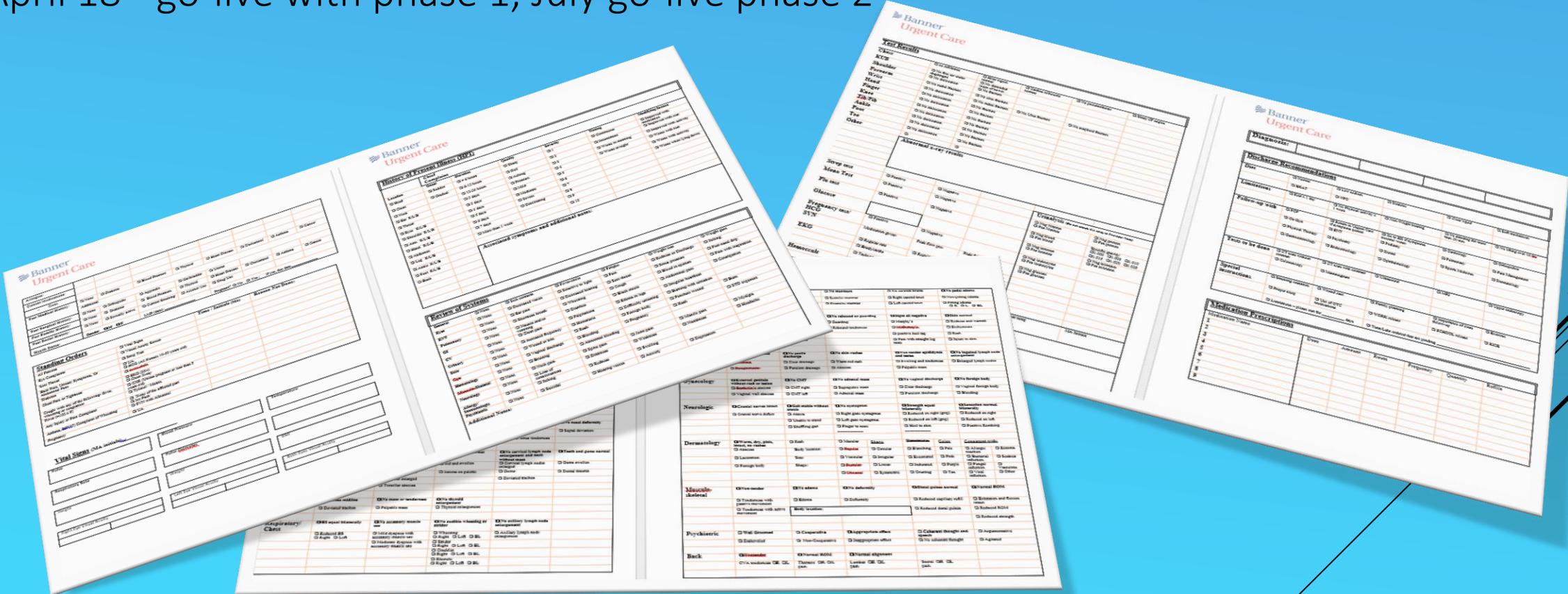
3rd Party Reviews Sentiment Trend



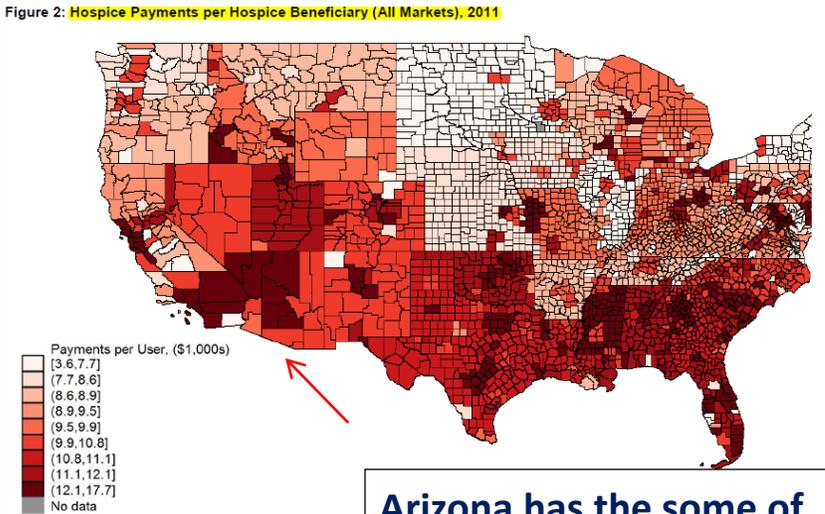
Cerner Transition

OPERATIONS

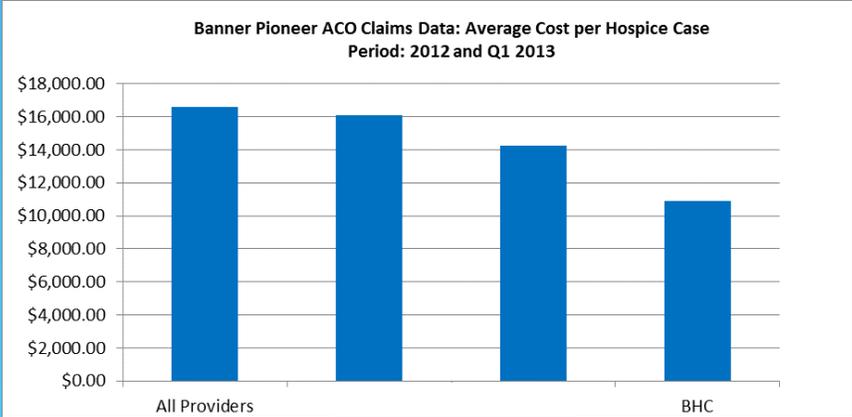
April 18th go-live with phase 1, July go-live phase 2



TRANSFORMATION OF OUR HOSPICE MODEL OF CARE

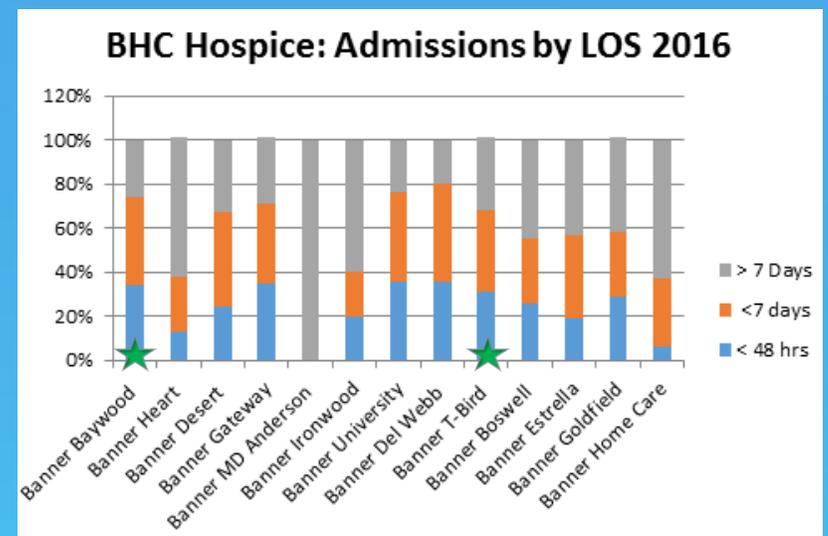
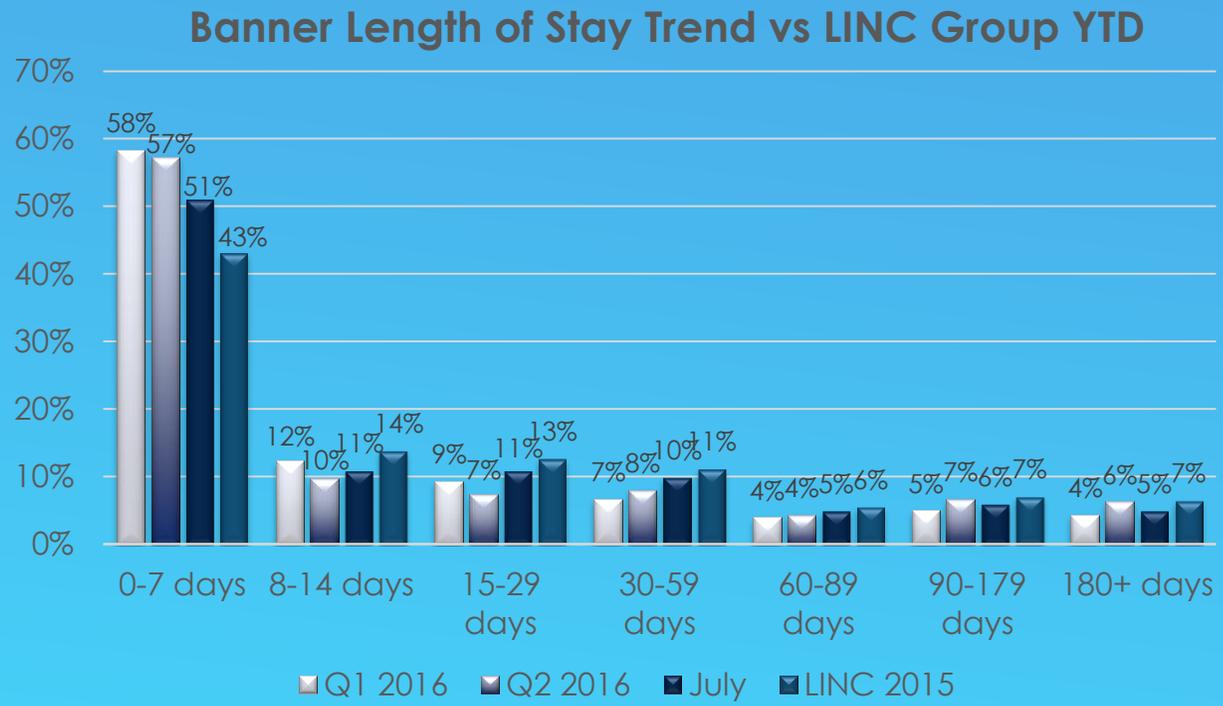


Arizona has the some of the highest payments per hospice beneficiary in the western US.



WHAT IS BHIP?

- ▶ BHIP- in hospital hospice patients who...
 - ▶ are imminently dying
 - ▶ discontinued aggressive care in favor of comfort measures with hospice who need a couple days of aggressive palliative management prior to life transition home
- ▶ Patients are discharged from the hospital and admitted to hospice without ever leaving their hospital bed
- ▶ There is consistency of care with continuity from the hospital staff with added hospice director, case managers, social workers and spiritual care contributing to the management and care of the patient and family



QUALITY: LENGTH OF STAY



UNIVERSITY OF ARIZONA - BANNER HEALTH
THE PRECISION MEDICINE
INITIATIVE® COHORT PROGRAM

ALL OF USSM RESEARCH PROGRAM

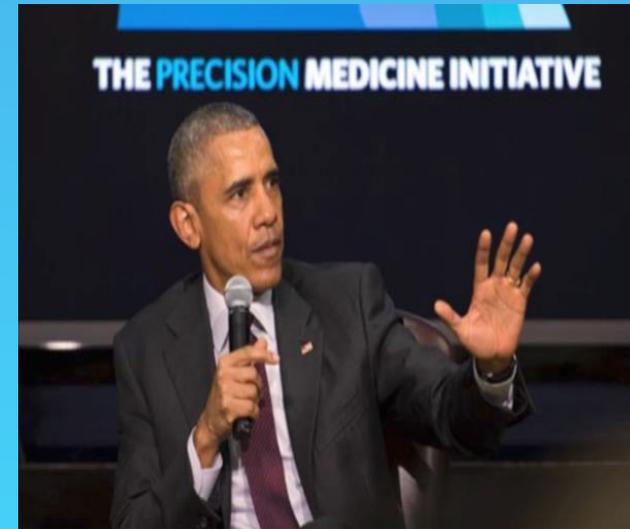
THE PRECISION MEDICINE INITIATIVE® (PMI)

Announced by President Barack Obama in his 2015 State of the Union address

MISSION: To enable a new era of medicine through research, technology, and policies that empower patients, researchers, and providers to work together toward development of individualized care

An emerging approach for disease treatment and prevention that takes into account individual variability in lifestyle, environment, and genes

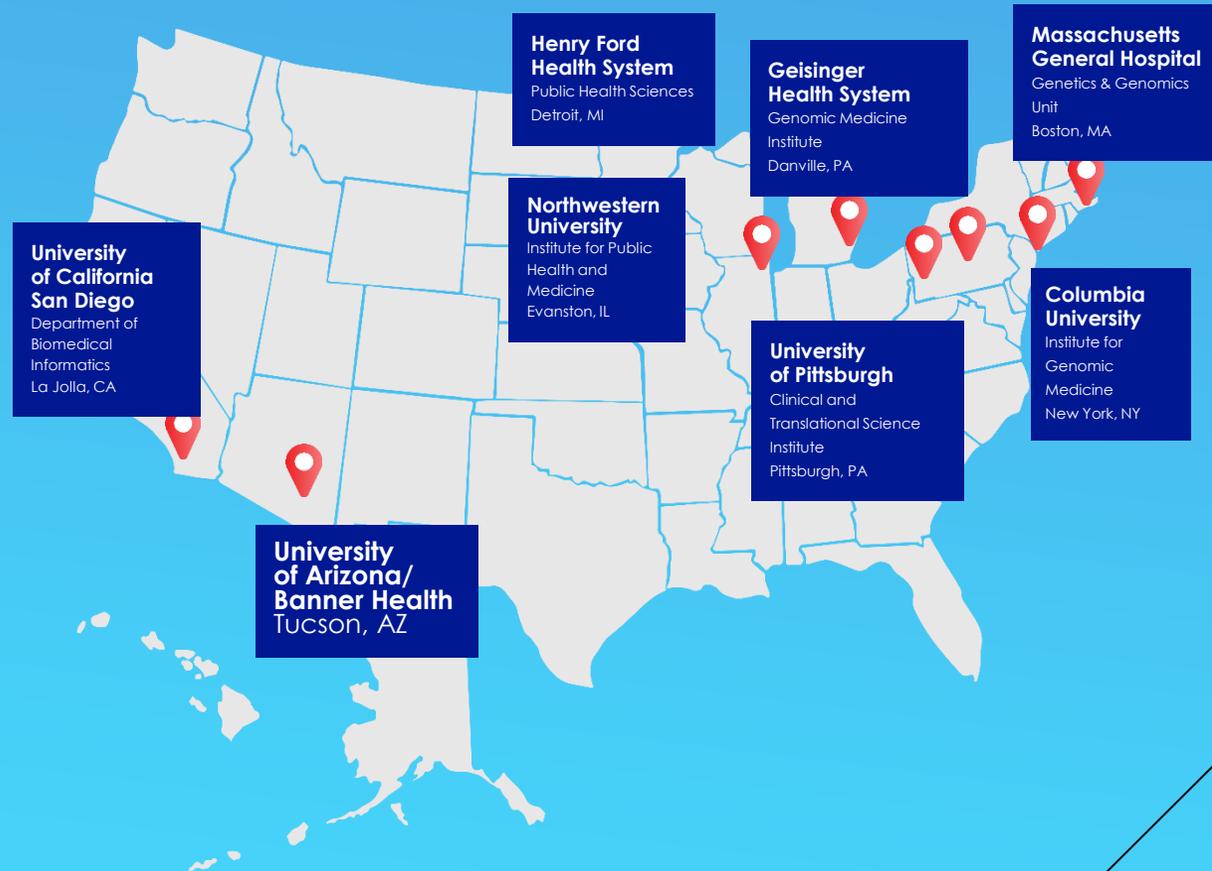
A radical shift in how each of us can receive the best care possible based on our unique makeup



"My hope is that this becomes the foundation, the architecture, whereby in 10 years from now we can look back and say that we have revolutionized medicine."

HPOS: REGIONAL MEDICAL CENTERS (RMCS)

- Able to enroll diverse patient populations
- Strong electronic health record capacity
- Geographic spread
- Capacity to enroll 35,000 a year



PMI Budget for *All of Us*SM Research Program

\$130M

FY16 ENACTED

\$230M

FY17 PRESIDENT'S REQUEST

\$40M

FY16 – FY26 21st Century Cures Act
Dec 1st House vote – 392 to 26
Dec 5th Senate Vote - 94 to 5

\$330M

FY18

\$430M

FY19

UA-BANNER ALL OF USSM 5-YEAR ENROLLMENT TARGETS

| | Ethnic Categories | | | | |
|---|------------------------|---------------|--------------------|---------------|----------------|
| | Not Hispanic or Latino | | Hispanic or Latino | | |
| Racial Categories | Female | Male | Female | Male | Total |
| American Indian/Alaska Native | 4,222 | 3,778 | 1,480 | 1,318 | 10,798 |
| Asian | 1,075 | 958 | 74 | 66 | 2,173 |
| Native Hawaiian or Other Pacific Islander | 15 | 12 | 33 | 30 | 90 |
| Black or African American | 1,473 | 1,313 | 463 | 412 | 3,660 |
| White | 34,069 | 31,655 | 26,270 | 23,400 | 115,394 |
| More than One Race | 756 | 674 | 8,765 | 7,689 | 17,884 |
| Total | 41,610 | 38,390 | 37,085 | 32,916 | 150,000 |

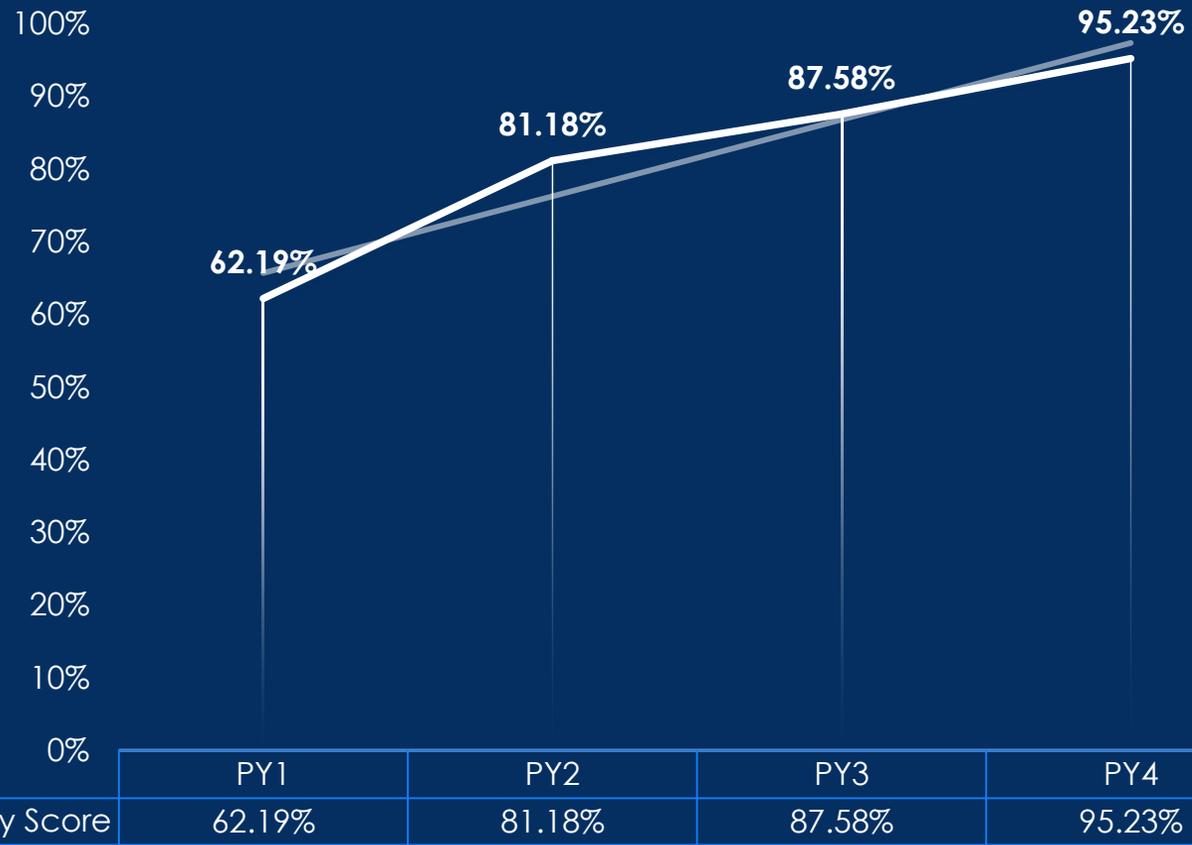
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Banner Pioneer ACO

| | |
|-------------|---------------------|
| PY1: | \$13,369,201 |
| PY2: | \$ 9,038,408 |
| PY3: | \$18,698,004 |
| PY4: | \$24,578,369 |

QUALITY SCORE – YEAR OVER YEAR



Aetna and Banner Health launch a new joint venture health plan in Arizona

Creation Date: 10/25/2016

Last Modified Date: 11/15/2016

Today a new joint venture is being announced between Banner Health and Aetna. The resulting organization, called Banner|Aetna, will offer a new health plan to Arizona. [View a video message](#) from Banner President/CEO **Peter S. Fine** and Aetna Chairman/CEO **Mark Bertolini**.



Related Links

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Banner Health cyberattack impacts 3 million people

By [Joseph Conn](#) | August 3, 2016

(Story updated at 6 p.m. ET)

Banner Health is contacting 3.7 million individuals whose personal information may have been accessed in a cyberattack that began on systems that proce

LESSONS LEARNED

- ❑ Discovery
- ❑ Remediation
- ❑ Eradication/Down time
- ❑ Notifications
- ❑ Phishing
- ❑ Do NOT send emails requested by IT
- ❑ It's all about change management and communication



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