In July 2015, CannonDesign hosted a Peer Colloquium Panel Discussion as part of our Health Practice Executive Education Program. Panelists included leaders of renowned healthcare organizations from across the nation. During the panel discussions many topics were covered, including the impact of Medicaid expansion and meaningful use dollars, strategies for effectively managing populations, responses to the growing consumerism in healthcare, and leveraging partnerships to support more effective growth strategies. This Executive Summary highlights the major themes from the discussion in hopes that it will spur new ideas as we all look to develop solutions to the greatest challenges facing the healthcare industry.

**Beyond the ACA: Positive Impacts of Meaningful Use, Other Innovations**

While the health systems represented are all still feeling some of the effects of the ACA, their leaders called attention to other innovations and policies that are helping them make significant progress towards organizational goals and population health initiatives. For example, many of the successful implementations of Epic across the country would not have happened without the support of the funding that came from Meaningful Use incentive programs. In Maryland, new CMS metrics for rate regulation focus on how to more effectively manage people in an effort to restrain volume and are helping organizations align more with population health than perhaps any other policy in the last five years. In Indiana, the successful implementation of Healthcare Information Exchanges has allowed the various health systems across the state to make significant progress towards clinical integration.

Our roll out of Epic was a tremendous management effort and a tremendous team effort that would not have been possible without the support of Meaningful Use dollars.

Steven Sonenreich, Mount Sinai Medical Center
Importance of Partnerships Never Greater

As many organizations ramp up their efforts in supporting population health goals, partnerships are top of mind. In efforts to achieve super clinically-integrated networks, organizations are looking towards partnerships that will help them more effectively manage populations—especially with employers that allow them access to large segments of population. Specialty centers such as Children’s hospitals are interested in partners that value the unique services the hospital brings forward, particularly those that allow them to become more involved in lower-level acuity activities, giving them greater access to a larger population.

Some partnerships are also allowing health systems to expand their presence geographically, without having to invest a large amount of capital. Using third party sources to help cover a broader footprint allows capital to be conserved for investing in a denser footprint on main medical campuses. These partnerships can also be an effective entry strategy into a new region, allowing organizations to assess whether it is in their best interest to make a capital investment that would allow for more effective brand integration, or utilize third party facilities in a test market.

Skilled nursing facilities and assisted care facilities are business models that we don’t necessarily want to get into, but we can utilize partnerships to create access to the resources we need to better manage chronic or complex patients.

Dennis Murphy, Indiana University Health System

Emerging Care Models Focused on Population Health

Many of the panelists discussed the importance of an ambulatory care strategy as part of their goals related to population health. Systems across the country are currently investing in large ambulatory hubs that provide a full-range of services—a “hospital without beds” as one of the panelists aptly put it. These hubs are seen as opportunities to drive business to the main medical campus and capture a larger market share. But the panelists were also anticipating when different solutions may be warranted. One panelist posed the question of how many exam rooms will really be necessary in the future with the advent of telemedicine, home health care, and convenient alternatives such as Walgreens and CVS. Another ruminated about how long it will be until more healthcare systems are taking cues from Kaiser and renting beds from health systems that used to be competitors.

The real challenge moving forward is considering when we, as population health managers, get to a juncture where we are willing to buy/rent beds from what were once our competitors for the sake of having a presence in certain communities.

Samuel Moskowitz, MedStar Franklin Square Medical Center
Responding to Consumer Demands

While responding to a patient base that is demanding more accessibility and convenience every day was an important goal for all health systems, it is of particular concern at Children’s Hospital of Wisconsin, where the average age of mothers is around 30 years old. Their propensity to embrace technology at a faster rate than average requires the hospital to stay ahead of the curve and actively engage consumers in ways they never have in the past. Technological advancements such as the disposable otoscope that allow parents to utilize Facetime-like technology to send images of a child’s ear to a physician to diagnose an ear infection will continue to disrupt traditional ways of thinking about patient care. However, in order for health systems to embrace some of the advances in virtual health and telemedicine, payment models that currently do not reimburse at the rate of more traditional care delivery methods will need to catch up.

We need to continue to look at ourselves differently. We need to be actively engaged in the community in ways we haven’t thought of in the past. That’s what the disrupters are doing. People are able to access all types of healthcare now in very different places than they have in the past.

Peggy Troy, Children’s Hospital of Wisconsin

Preparing a Workforce for Change Ahead

An engaged workforce is critical to effectively adapting to and embracing all of the change ahead. In an industry where the nature of relationships with payers, corporations, and physicians are all changing, being cognizant of the impact to the culture of an organization is of critical importance. In many cases, these changes require providers and payers alike to adapt the way they have traditionally functioned and embrace changes that may make them uncomfortable at first. For example, many physicians are now being asked to work hours outside of the traditional 9-5 work day and deliver care in new ways via vehicles such as telemedicine. These types of changes can make them feel like their personal welfare or job is at risk. Finding ways to make sure that the workforce feels a health system’s ethos of confidence and determination to thrive in this new environment is a real challenge and remains an important focus for many organizations.

Assuring that medical schools are keeping up with all these changes will also be key to sustainable change moving forward. As care delivery models continue to evolve, medical schools must be abreast of them and ready to adapt their curriculum and methods to better serve the needs of future physicians and other healthcare providers.

The real disruption is the impact on the culture of the organization and how adaptable our teams can be to withstand all of the change in the industry.

Dennis Murphy, Indiana University Health System
The Hospital of the Future

The hospital and healthcare systems of the future will look very different than they do today. In order to be successful they will need to do a better job of meeting people where they are – outside hospitals and clinics. It will also require a thoughtful understanding of what it means to make people healthier – and the role that environment, people, and care models play in that. Unprecedented flexibility will be critical, as planning horizons continue to shorten. The ability to quickly transition both physical space and operational processes to accommodate new care models without significant capital costs will be an essential tactic in helping healthcare systems weather this rapid change. It will also be important to look to unexpected places and strategies as opportunities to deliver care. Healthcare organizations will be spending more time and energy developing strategies focused outside the walls of the acute care hospital – exploring new locations and access points and leveraging technology to connect with people in new ways.

We shouldn’t be moving old habits into new facilities. We need to look at every capital project as a mechanism to challenge our delivery process and rethink how we are going to deliver care in a very different world.

Samuel Moskowitz, MedStar Franklin Square Medical Center