Project Title: “Rush Health” Matters!! Efforts toward better integration and physician engagement

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Background, Challenge or Opportunity:
Rush Health is a clinically integrated network of hospitals and physicians comprising of 4 hospitals and more than 1350 professional providers in 120 practices. It is an independent entity that offers an equal voice to the hospitals and physicians. However, based on surveys and attendance at annual meeting, physician engagement in Rush Health is suboptimal. Changes in health care market including the Affordable Care Act are directing rewards for quality not just quantity. In the ACOs, cost containment and quality are key to financial rewards. The Chicago market has also changed significantly in the past 5 years from a PPO driven market with very little HMO/managed care to one characterized by a growing number of narrow network products and ACO-like offerings. To meet these challenges, Rush Health has negotiated contracts with payers to include bonuses for hospitals and physicians if they meet certain quality measures i.e. Medicare core measures. In order to improve quality and earn the incentives we need physicians to be aware of their role in achieving this goal.

Purpose/Objectives:
Success at gainsharing, improving quality while reducing costs and being rewarded for it requires physician engagement. The purpose of this project is to work with senior leaders of Rush Health as well as the institution to improve it.

Methods/Approach:
Initiatives to revamp Rush Health and prepare for the challenges of changing health care market included:
1. A fulltime CMO and a CIO have been recruited.
2. Four medical directors are appointed at the network hospitals.
3. New analytics support team is in place to collect pertinent information regarding performance measures for physicians.
4. A campaign was launched in the weeks leading to the annual meeting on March 22, 2016, to encourage senior leaders, departmental Chairs and division heads to urge faculty to attend.
5. A change was made to the focus of the meeting to physician centric as opposed to institutional goal.

Outcomes and Evaluation Strategy:
Observations and initial feedback from the recent meeting are promising. A post meeting survey will also be conducted to gauge the impact. The future directions for Rush Health include:
1. Expand the network of hospitals and physicians with focus on primary care which would help bring patients to the academic medical center.
2. Provide scorecards to the physicians early and update on their performances toward reaching their goals during the year.
3. Meet with Chairs and section chiefs to get continuous feedback for improving physician engagement.
**Background/Challenges**

Rush Health is a clinically integrated network of hospitals and physicians aligning to improve health care outcomes for its contracted lives. It is comprised of 4 hospitals and more than 1350 professional providers in 120 practices, is an independent entity and offers an equal voice to the hospitals and physicians. However, based on surveys and attendance at annual meetings, physician engagement in Rush Health is suboptimal. Changes in health care market including the Affordable Care Act are directing rewards for quality not just quantity. In the ACOs, cost containment and quality are key to financial rewards. The Chicago market has also changed significantly in the past 5 years from a PPO driven market with very little HMO/managed care to one characterized by a growing number of narrow network products and ACO-like offerings. To meet these challenges, Rush Health has negotiated contracts with payers to include bonuses for managed care quality and efficiency measures. For bundled pricing agreements under Rush Health contracts, report cards, contracts, and knowledge of their role in achieving this goal.

**Purpose/Objectives**

Success at gainsharing, improving quality while reducing costs and being rewarded for it requires physician engagement. The purpose of this project is to work with senior leaders of Rush Health and institution to improve physician awareness and participation in Rush Health matters.

A new care model will enable success with future performance measurement.

**Survey Questions**

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<th>Survey Questions</th>
<th>Yes %</th>
<th>No %</th>
<th>High value%</th>
<th>Some %</th>
<th>No %</th>
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<td>Awareness of RH</td>
<td>83.8</td>
<td>16.2</td>
<td>50.4</td>
<td>38.2</td>
<td>11.4</td>
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<td>P4P built into contracts</td>
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<td>20.2</td>
<td>43.4</td>
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<td>RH is preparing for future models of health care delivery</td>
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<td>53.1</td>
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<td>RH proprietary website info for contracts, report cards, quality bonuses</td>
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<td>44.3</td>
<td>39</td>
<td>40.4</td>
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<td>RH collects quality data for managed care quality requirements</td>
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<td>RH supports data share via private HIE to improve quality and lower costs</td>
<td>55.7</td>
<td>44.3</td>
<td>40.8</td>
<td>43</td>
<td>16.2</td>
</tr>
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</table>

**Methods/Approach**

Initiatives to revamp Rush Health and prepare for the challenges of changing health care market included:

1. Recruitment of a fulltime CMO and CIO
2. Appointment of medical directors (4) at each hospital partner site
3. New analytics support team is in place to collect pertinent information regarding performance measures for physicians
4. A campaign was launched in the weeks leading to the annual meeting on March 22, 2016, to encourage senior leaders, departmental Chairs and division heads to urge faculty to attend.
5. A change was made to the focus of the meeting to physician centric as opposed to institutional goal.

**Future Directions**

Work with Rush Health Leadership to:

1. Expand the network of hospitals and physicians with focus on primary care which would help bring patients to the academic medical center.
2. Provide scorecards to the physicians early and update on their performances toward reaching their goals during the year.
3. Optimize the EMR to improve functionality and ease in achieving quality metrics.
4. Meet with Chairs and section chiefs to get continuous feedback for improving physician engagement.