

## **ABSTRACT: 2019 ELAM Institutional Action Project**

**Project Title:** Creating efficiencies in Onboarding and Credentialing Clinical Faculty and Advanced Care Providers improves alignment, billing and compliance, as well as provider and Chair satisfaction.

**Name and Institution:** Lavinia P. Middleton, MD Univ. of Texas MD Anderson Cancer Center

**Collaborators and Mentors:** Drs. Steve Hahn, Ethan Dmitrovsky, Welela Tereffe, Carin Hagberg, Alma Rodriguez, Maureen Cagley, MBA and Evelyn Starr-High CPCS, CPMSM, BHA

### **Topic Category: Administration**

**Background, Significance of project:** This project addresses the lengthy time period to credential and onboard new providers as well as the need to modernize the performance evaluation process to recognize accomplishments throughout the faculty's life cycle. These improvements are a necessary response to our changing healthcare environment and reflective of the needs of our health system.

**Purpose/Objectives:** The objective is to improve the individual providers' onboarding experience, integration, and alignment with the expanded vision of the institution. A key component of the project is to improve the process to evaluate providers' clinical competencies and achievements. The purpose of these improvements are to support the mission of our enterprise, ensure quality patient care and adhere to accreditation standards.

### **Methods/Approach/Evaluation Strategy:**

Meet with stakeholders and leadership to define scope, timeline and allocation of resources.

Develop a project management plan and routine meetings to assess progress towards goals.

Engage organized medical staff and graduate medical education office.

Identify deficiencies in policies and improve process.

Monitor improvements.

Disseminate gains to stakeholders and larger community.

### **Outcomes/Results:**

The time to hire and onboard faculty and advanced practice providers has been significantly decreased by more than 30%.

The provider experience during onboarding has been enhanced.

Providers within our system have access to our EHR learning modules sooner during the process.

The language in contracts has been improved to delineate percent clinical, academic, research, education and administrative expectations (including Quality and Patient Safety activities).

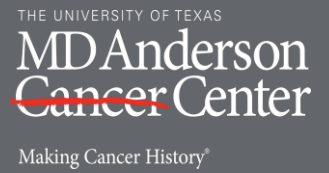
Revenue leakage related to inconsistencies between credentialing and billing has been curtailed.

Provider quality metrics are aligning with institutional priority metrics, delineated during the hiring process and evaluated during the ongoing professional practice evaluation for recredentialing.

**Discussion/Conclusion with Statement of Impact/Potential Impact:** We anticipate that these improvements in processes, which decrease time from onboarding to in-clinic presence of providers, will improve staffing efficiencies, improve work productivity and engagement in relevant measures, as well as decrease cost to the organization.



# Creating Efficiencies in Onboarding and Credentialing Clinical Faculty and Advanced Care Providers Improves Alignment, Billing & Compliance, Quality & Patient Safety, as well as Chair Satisfaction



Name and Institution: Lavinia P. Middleton, MD - The University of Texas MD Anderson Cancer Center

Collaborators and Mentors: Drs. Steve Hahn, Ethan Dmitrovsky, Welela Tereffe, Carin Hagberg, Alma Rodriguez, Maureen Cagley, MBA and Evelyn Starr-High CPCS, CPMSM, BHA

## Background, Significance of Project

This project addresses the lengthy time period to credential and onboard new providers as well as the need to modernize the performance evaluation process to recognize accomplishments throughout the faculty's life cycle. These improvements are a necessary response to our changing healthcare environment and reflective of the needs of our health system.

## Purpose/Objectives

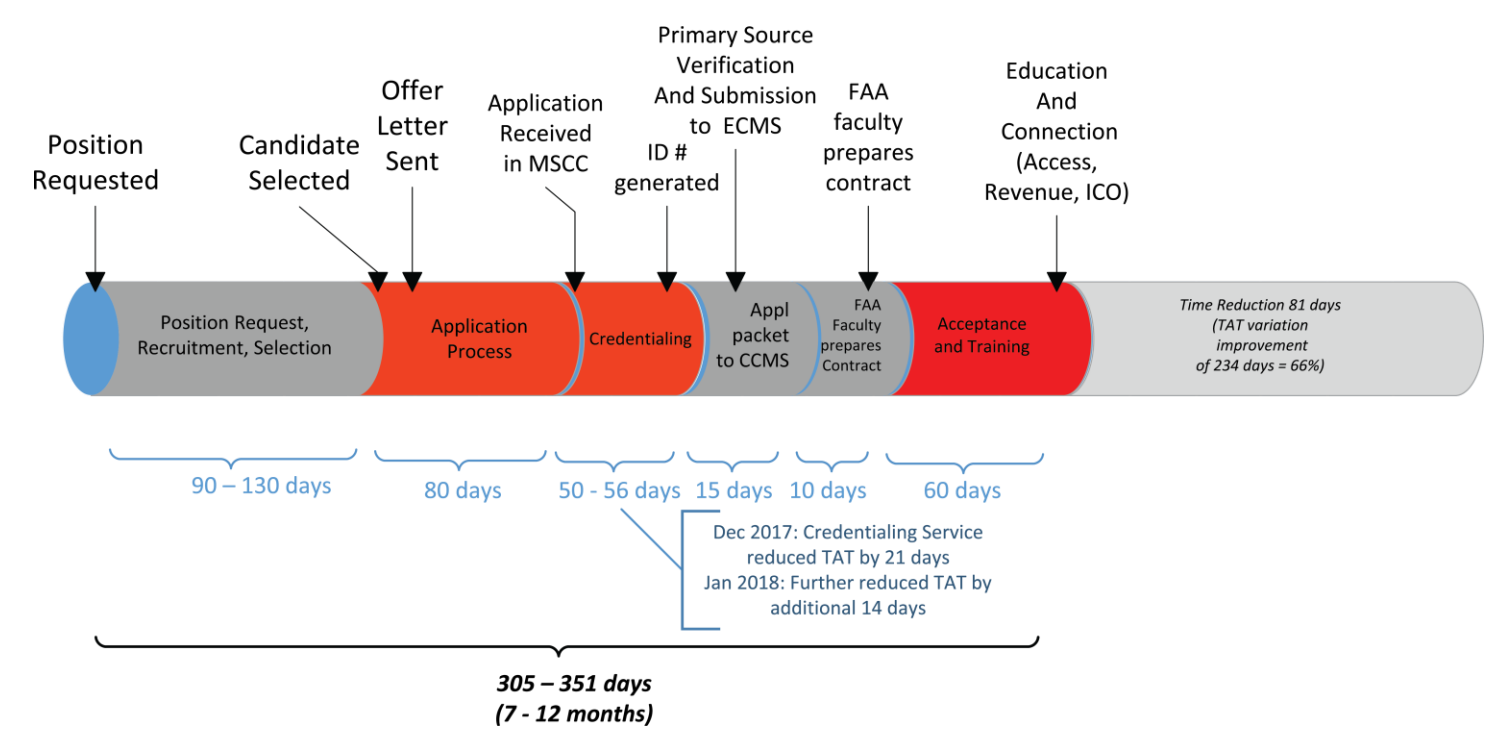
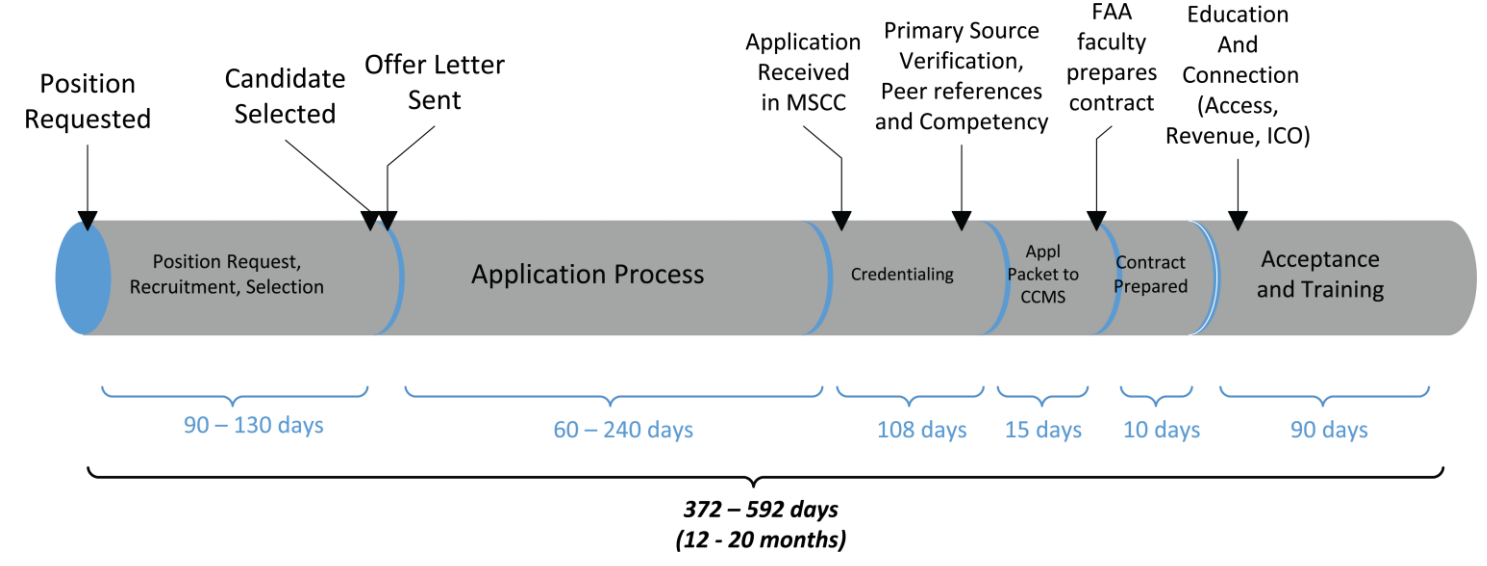
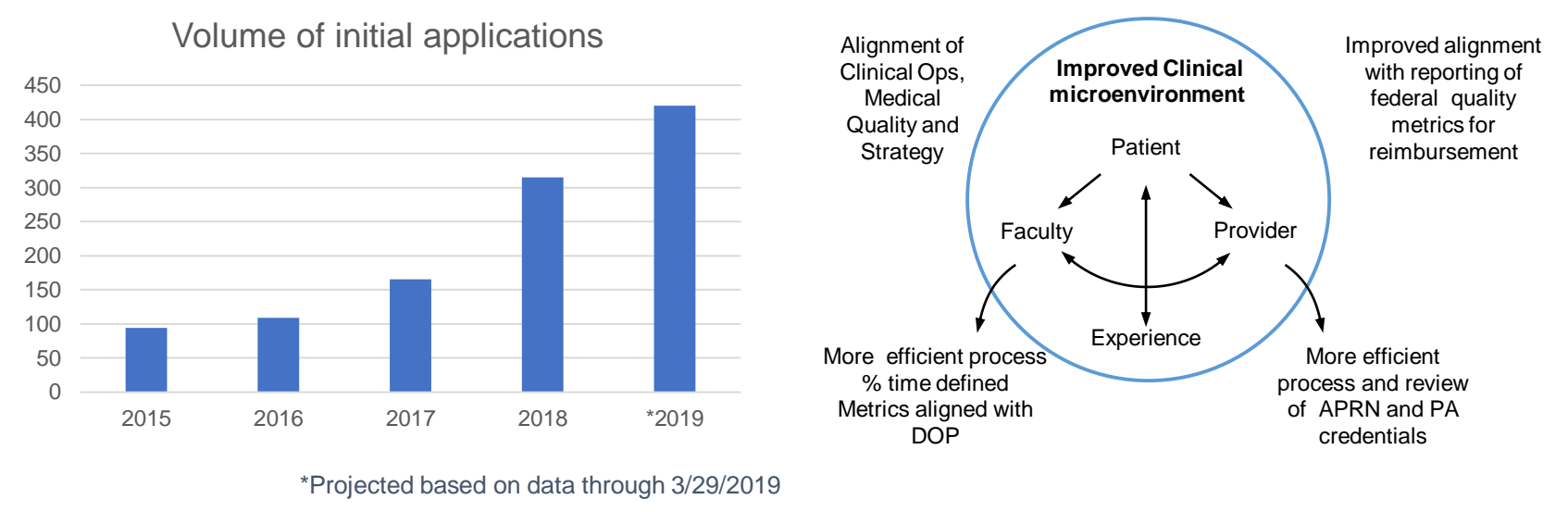
The objective is to improve the individual providers' onboarding experience, integration, and alignment with the expanded vision of the institution.

A key component of the project is to improve the process to evaluate providers' clinical competencies and achievements. The purpose of these improvements are to support the mission of our enterprise, ensure quality patient care and adhere to accreditation standards.

## Methods/Approach/Evaluation Strategy

- Meet with stakeholders and leadership to define scope, timeline and allocation of resources.
- Develop a project management plan and routine meetings to assess progress towards goals.
- Regular meetings with medical staff, HR and Academic Affairs.
- Establish meetings with Clinical Department Chairs and Quality Officers.
- Identify deficiencies in policies and improve processes. Measure.
- Modernize Delineation of Clinical Privileges to document clinical competencies and volumes.
- Disseminate gains to stakeholders and larger community.

## Aligning Q&PS, Chairs, Chief Medical Executive



## Outcomes/Results

- The time to onboard faculty and advanced practice providers has been decreased by 30% while the number of applications have increased.
- Feedback indicates that the provider experience during onboarding has been improved.
- Providers within our system have access to our EHR learning modules sooner.
- The language in contracts has been improved to delineate percent clinical, academic, research, education and administrative expectations (including Quality & Patient Safety activities).
- Revenue leakage related to inconsistencies between credentialing and billing has been curtailed.
- Provider quality metrics are aligning with institutional priority metrics, delineated during the credentialing process and evaluated during the ongoing professional practice evaluation for re-credentialing.
- A formalized process has been created to standardize Delineation of Clinical Privileges.

## Discussion/Conclusion with Statement of Impact

We anticipate that these improvements in processes, which decrease time from onboarding to in-clinic presence of providers, will improve staffing efficiencies, improve work productivity and engagement in relevant measures, as well as decrease cost to the organization.

Review of speciality specific clinical competencies and delineation of privileges with the Department Chairs and Quality Officers have led to improvements in provider assessment and provides opportunities for improved patient care.