



CEO Healthcare ROUNDTABLE

A Partnership of The CEO Advisory Network & The Healthcare Roundtable

Fall Meeting 2023

“Have We Finally Reached the Tipping Point?”

Keynote Speaker: Paul DeChant, MD, MBA, Healthcare Consultant & Co-Founder, Organizational Wellbeing Solutions

On **October 4 – 6, 2023**, the CEO Healthcare Roundtable gathered at the Ritz-Carolton, Denver, Colorado. We were pleased to re-connect with current members as well as welcome a number of new, and potentially new, members to the Roundtable.

Our 2023 Roundtable discussions have focused on the broad concept of ***“Tipping Point”*** which is defined as ***“The point at which a series of small changes or incidents becomes significant enough to cause a larger, more important change.”***

Current stress and pressure on our health systems to make significant changes continues to present not just major challenges but also significant opportunities for our healthcare organizations.

Our C-Suites and Boards recognize the need to make changes, but progress has been slow. One specific area that has created ***“Tipping Point”*** issues and opportunities is managing the relationships with various physician cohorts including Employed Physician Groups, Independent Physician Groups and the growing challenges of working with the growth of investor owned, private equity funded physician

groups. This is all occurring at a time when physicians are facing increased performance pressures and burn-out. The Roundtable focused on effective ways to move beyond the ***“Tipping Point”*** as we identify successful solutions for improving engagement with physicians.

The Impact of leadership on Physician Burnout | What Every Leader Can Do

Our October Roundtable began with our Wednesday afternoon “keynote” speaker, **Paul DeChant, MD, MBA**, Healthcare Consultant and Co-Founder of Organizational Wellbeing Solutions based in San Ramon, California.



Dr. DeChant is recognized as one of the nation’s leading experts on ways to recognize and address physician burnout and the drivers of successful physician engagement. He shared key findings from his research, as well as his personal experiences, in his highly regarded book, ***“Preventing Physician Burnout: Curing the Chaos and Returning Joy to the Practice of Medicine.”***

Dr. DeChant opened his presentation stating that our healthcare systems are facing a “*labordemic*” as evidenced by the difficulties with recruiting and retaining physicians in healthcare organizations. It’s estimated that 56% of graduating residents receive over 100 job offers in their final year of residency with competition coming from investor-owned physician groups, independent physician groups, competing health systems and a wide array of other organizations seeking to employ physicians.

At the same time, as our healthcare organizations compete to attract and retain physicians, a growing number of physicians within the healthcare system are facing significant burn-out issues. ***A key driver of burn-out is the fact that only about one-third of physicians’ time is spent practicing medicine.*** Instead, the majority of their time is spent being overworked, underappreciated and experiencing a “*death by 1,000 clicks*” from the demands of documentation in various Electronic Health Records (EHR).

Dr. DeChant discussed three dimensions of burn-out:

- ***Exhaustion*** - Constantly being pushed to increase productivity while not having enough time to document everything required in EHR which leads physicians to complete records at home during their personal time
- ***Depersonalization*** - which leads to cynicism
- ***Inefficacy*** - Belief that one is not making a difference

He challenged our healthcare leaders to focus on prioritizing ways to address several key drivers of burnout in their organizations including:

- Work overload
- Physicians no longer having control over their time, workload, decision-making or personal lives
- Insufficient reward and recognition
- Breakdown of physician community (i.e. working remotely, not making rounds, no

longer socializing or networking in places such as the Physician Lounge, etc.)

- Absence of fairness
- Values conflicts

When healthcare leaders fail to prioritize and address these key drivers, it impacts safety issues, quality issues, patient satisfaction, access to care, and clinician and staff engagement and loyalty.

Dr. DeChant then asked: ***How do we harness the power (brilliance, commitment, loyalty, passion, etc.) of the physician workforce?*** He shared several things that healthcare leaders can do to create workplaces where physicians, clinicians and all employees want to work including:

- Prioritize addressing physicians’ top three priorities:
 - Reduce workload
 - Minimize exhaustion
 - Create greater work / life balance
- Commit to “*flipping the current ratio*” from an environment where physicians spend 2/3 of their time on wasteful things and only 1/3 of their time on meaningful work, to one where physicians spent over 2/3 of their time on meaningful things and less than 1/3 on wasteful things
- Make a meaningful effort to work together to address the concept of “*GROSS*” (*Get Rid Of Stupid Stuff*)
- Identify and recognize that the cost of burnout (turnover, decreased productivity, etc.) has a significant financial impact on the organizations bottom line so it must be prioritized and managed as any other expense

Dr. DeChant concluded his presentation with several examples of organizations which are creating programs to successfully address these issues. They are taking a new approach to leadership which includes encouraging engagement through a concept called “*Clinician Collaborators.*” This concept actively engages physicians in meaningful conversations about

change by focusing on detailed discussions around ways to improve processes including use of LEAN concepts and activities. He closed by stating that:

“We must create an environment of “Psychological Safety” where physicians believe and are assured that they will not be punished or humiliated when speaking up with new ideas, asking questions, raising concerns or reporting errors and mistakes.”

The Changing World of Physician Relationships | Reactor Panel



Tom Ferkovic, Founder & CEO of Medic Management based in Akron, OH. Tom is a national expert in physician relationships and practice management.



Scott Spohn, Managing Director of FORVIS based in Marietta, GA. Scott is a change strategist utilizing the latest thinking in the behavioral science and positive psychology fields.

We opened the second day of the Roundtable with a facilitated discussion of Dr. DeChant’s Keynote Address involving a Reactor Panel of two experts on the topic of physician issues.

Tom Ferkovic began with an historical example of the concept of “orthodoxies.” He described it as continuing to routinely do things “the way we were trained to do it.” *The presence of “orthodoxies” impact how we respond to “Tipping Point” issues when dealing with physicians and issues within our organizations, creating blind spots and barriers.* These “orthodoxies” prevent organizations from developing innovative solutions and effective strategies for working with and addressing the different issues and expectations of various physician cohorts. He then presented a chart which detailed the differences in needs, expectations and structural issues that drive

three distinctly different physician cohorts (*Employed Physician Groups, Independent Physician Groups, Corporate / Investor-Owned Physician Groups*) that our healthcare leaders are dealing with on a daily basis. Tom challenged our attendees to take the time to listen and understand what is driving and motivating each of these groups and to make decisions regarding their relationships with our healthcare organizations.

Scott Spohn followed with a presentation on research conducted by FORVIS using a 50-question diagnostic tool to identify various barriers in organizations as a determinant of change resistance. He stated that developing effective change strategies for addressing organizational issues, including physician relationships, is very difficult because “we are wired to resist change.” As a result, *successful change management requires a focused effort across all areas of the organization to create and implement an effective, successful change strategy.*

Scott cited a FORVIS case study where a client organization appeared to be making overall improvement with employee engagement and workforce issues at a macro level. When the organization drilled into the data at a micro level, they discovered a negative trend in physician relations and burnout.

Following their brief presentations, the panelists participated in a facilitated discussion based on the following questions:

- *What are some of the ways that your clients (physician groups, hospitals, health systems, etc.) are working with each other to improve processes and address the burnout drivers described by Dr. DeChant?*
- *What advice do you have for engaging the three different physician cohorts (Employed Physicians / Independent Physicians / Investor-Owned Physicians)?*

Barriers and Opportunities | Roundtable Break-Out Discussions

Following the morning presentation, Roundtable attendees were divided into three break-out groups and asked to discuss Barriers and Opportunities for working effectively with the various physician cohorts (*Employed Physicians / Independent Physicians / Investor-Owned Groups*). The Roundtable break-out groups identified, discussed and shared the following:

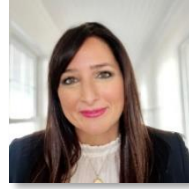
Key Barriers Identified:

- Achieving alignment with the unique needs and expectations of each of the respective cohorts
- Lack of engagement and difficulty communicating with physicians (unread emails, lack of participation and attendance at meetings, etc.)
- Size of physician groups and frequent lack of consensus within the group
- Perception by physicians that their opinions don't matter
- Competition for services resulting in these services leaving the health system facilities

Key Opportunities Identified:

- Define and implement leadership from a physician's perspective
- Intentional engagement of physicians via service line councils
- Create a forum for identifying and agreeing on key goals and objectives including mutual agreement on concepts such as "Highest Quality," "World Class Care," "Patient Focus"
- Provide and support opportunities for physicians to control activities in the hospital
- Work collaboratively to "Get Rid of Stupid Stuff" (GROSS)

Moving Beyond the Tipping Point | Using AI and Natural Language Understanding (NLU)



Angela Adams, CEO of Inflo Health based in Charleston, SC. Angela is on the forefront of the use of AI technology for use in radiology follow-up for patients, radiologists, and ordering physicians.

Following the break-out session, Angela discussed ways that AI is being introduced as an effective solution for Tipping Point issues. For example, ***technology such as the EHR, rather than offering a solution to stress and burnout, is actually creating more issues with burnout because it does not support the way that most physicians actually practice medicine.*** For instance, 70% of the medical records in the EHR are documented in "free text" format so it is not easily converted and aggregated into easily accessible data and information needed for decision-making.

Angela cited several ways that AI and NLU, which can read, understand, interpret and convert free text in the EHR into usable, actionable information, can help support and improve care delivery. ***She also emphasized that AI would augment, not replace the human element in medical decision making.*** When referring to AI, Angela uses the words "Augmented Intelligence" instead of "Artificial Intelligence."

Angela demonstrated the value of AI using an Inflo Health Case Study of a current hospital client which was experiencing challenges with missed radiology follow-up tests. The Case Study included a patient who eventually died because a recommended test for an item on an X-ray was not followed because it wasn't directly connected to the prescribed reason the test was being performed. ***Nationally, approximately 60% of radiology follow-ups are missed resulting in poor quality, poor patient care and lost revenue.*** To address the issue, the hospital initially built a manual

system to try to track and identify needed follow-up imaging tests. The process resulted in increased work processes and documentation as well as additional costs to build out the appropriate documentation and alerts in the EHR. Angela then shared how Inflo Health's use of AI and NLU was able to augment the information already presented in the radiology system and EHR to identify and ensure appropriate follow-up. This has resulted in better patient quality outcomes, higher patient satisfaction and increased revenue for the hospital.

Policy Outlook | Activities That Are Driving the Direction of Healthcare



Blair Childs is the former Senior VP, primary spokesperson, and communications strategist for Premier on key issues. He is now Senior Executive Advocacy Advisory for Premier and is based in

Washington D.C.

Blair Childs, who has spent nearly three decades as a leading healthcare policy expert and healthcare advocate in Washington D.C., closed our formal Thursday presentations with a deep dive into the policy outlook and activities in Washington which are driving the direction of healthcare both today and into the future.

Blair opened his presentation by stating that healthcare is highly valued but needed change occurs slowly due to government policy AND that healthcare has become a major political issue frequently used by politicians as a scare tactic to get the attention of their constituents. There are significant challenges facing our healthcare system today. ***Although overall healthcare spending continues to increase as a percentage of GDP, Hospitals are facing their worst margins ever.***

Blair noted that there is general agreement that the four core issues facing the nation are China, Big Tech

(including AI and Social Media), Inflation and Debt. However, from a regulatory outlook and perspective, the current Administration remains focused on healthcare, the environment and equity.

Blair reviewed and discussed the Administration's top healthcare priorities including, but not limited to:

- **Primary Healthcare Priorities**
 - Medicaid enrollment
 - Leveling the playing field between Traditional Medicare and Medicare Advantage
 - Implementing Value Based Care
- **Secondary Healthcare Priorities**
 - Price Transparency
 - Addressing Medicare Advantage abuses and addressing issues with Prior Authorizations
 - Health equity / SDOH
 - Patient access to data

The Administration is also supporting increased FTC oversight of healthcare consolidation as well as scrutiny of non-compete clauses in contracts.

He then identified the following ***five key areas where bipartisan agreement about healthcare currently exists:***

- Continue to shift risk for government programs (Medicare / Medicaid) to private entities
- Accelerate move from Fee-for-Service (FFS) to Value Based Care (VBC) and greater accountability
- Increase quality and price transparency
- Create a secure and stable supply chain
- Support greater competition

Childs concluded his presentation by stating that ***hospitals and health systems need to create a focus and priority around working with their state elected officials and organizations to re-position hospitals and health systems to become part of the solution because Washington currently views hospitals and health systems as an impediment to needed change.***

Innovation Session | The Art of the Possible with AI Transformation



Ron Rerko, Director of Healthcare & Life Sciences at ONIX based in Lakewood, OH. Ron and his team at ONIX partner with Google Cloud and Amazon Web Services to provide hospitals, healthcare companies and research institutions with innovative cloud-based solutions like Generative AI.

The Roundtable concluded on Friday morning with our traditional “*Innovation Session.*” ONIX is an industry leader in digital transformation through improved cloud technology and data & analytics using cutting-edge Machine Learning (ML) and Artificial Intelligence (AI) and is the 2023 “*Google Partner of the Year.*”

Ron stated that there are two rapidly evolving technologies that are going to radically change healthcare:

- 1. Genetics***
- 2. Artificial Intelligence (AI)***

He also presented the following facts:

- 30% of all of the world’s existing data is healthcare related
- 85% of healthcare costs are associated with chronic diseases
- The EHR was originally created as a billing mechanism not a clinical / quality improvement enhancement or data repository, yet doctors spend, on average, 4.5 hours per day documenting activities in the EHR
- Cyber Crime has become one of the largest businesses and economies in the world

Ron noted that we are very much in the early stages of the changes, and challenges, created by these rapidly evolving tools and technologies. ***Although AI uses Machine Learning to “create” something that didn’t exist before, AI’s main purpose will be to automate processes and enhance data and information.*** However, it is not likely to replace people as we will

still need people to review, analyze, strategize and implement actions based on the output of AI. He also noted that AI will “*enhance,*” not “*replace*” the patient/physician relationship. Noting comments made by Angela Adams in her presentation, he stated that he agreed that we should begin to refer to AI as “*Augmented Intelligence*” instead of “*Artificial Intelligence.*”

Ron noted that ***AI and ML will also impact the talent pool and type of talent needed by hospitals and health systems. In the future, leaders should begin to identify the types of skill sets and people that will be required to maximize the benefit of AI and ML.***

Ron presented the following recommendations for our Roundtable attendees:

- Become “Change Leaders”
- Embrace and understand opportunities presented by AI
- Assess and determine organizational readiness for adapting the use of AI
- Focus on skill sets and organizational needs for people, processes and technology

Ron concluded his presentation with the suggestion that when it comes to using AI to address problems and create solutions, leaders should “*focus on and fall in love with the problem, not the technology.*”

SAVE THE DATE!

Next Scheduled Spring Meeting
March 20 - 22, 2024



The Resort at McCormick Ranch

7505 E. McCormick Pkwy, Scottsdale, AZ 85258

Please join us at our next Healthcare Leadership Forum at the beautiful Resort at McCormick Ranch in Scottsdale, Arizona. We look forward to providing you with another informative and stimulating program.

For reservations and inquiries about the Spring 2024 Roundtable Meeting, please contact Alexis Matic at Alexis@healthcareroundtable.com



Marty Hauser

Facilitator, CEO Healthcare Roundtable

Alexis Matic

CEO, The Healthcare Roundtable

CEO Advisory Network

Senior Partners and Partners

www.CEOHealthcareRoundtable.com

