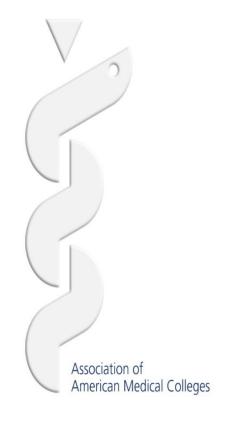


Welcome! Thank you for joining us for today's webinar.

Please note:

- The program will begin shortly.
- You will not hear the audio until we begin.
- If you have technical questions, please email aamc@commpartners.com.





Emory Healthcare Physician Group Practices: The Journey to Combining Faculty and Community Practices

AAMC December, 2020

Penny Castellano, MD Maureen Haldeman, MBA/MHA





DISCLOSURES

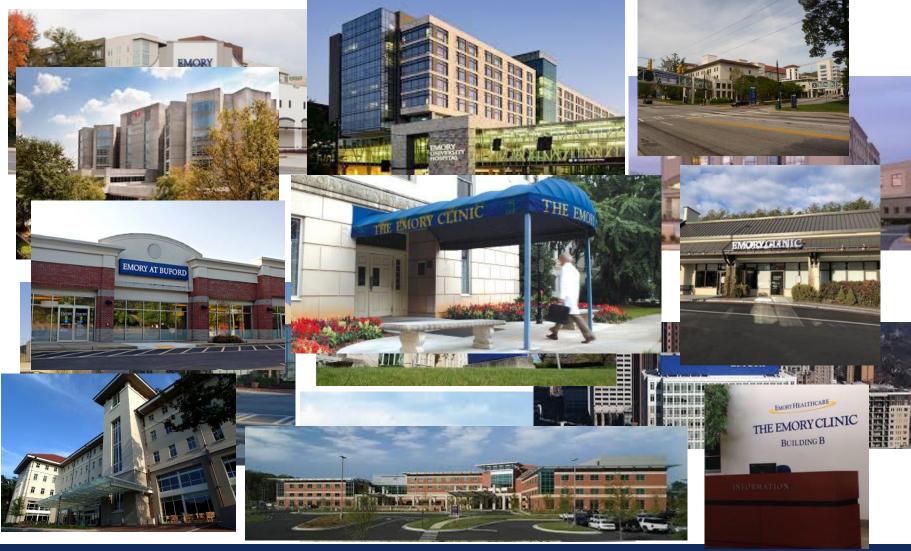
- Dr. Penny Castellano has no conflicts of interest to disclose
- Maureen Haldeman has no conflicts of interest to disclose



OBJECTIVES

- Develop applicable options for creating an employed non-faculty practice that can align with an academic system's needs
- Differentiate an academic system in a competitively advantaged way to optimize local market dynamics
- Create a side by side description of a non-faculty vs faculty practice infrastructure that allows both to succeed

EMORY HEALTHCARE





Emory Healthcare BY THE NUMBERS

819,000+
Patients Served
Annually

2,060+ Employed Physicians

800+ EHN Non-Employed Physicians

23,600+ Employees

11 Hospitals

250+ Emory Healthcare

Network Locations

111,300

Inpatient Admissions

5,200,000

Outpatient Visits

325,000

Emergency Room
Visits

10,360 Deliveries

80,000

Operating
Room
Procedures

3Magnet
Designations

2,691 Licensed

Beds

21,000+

Clinical Research Patient Participants

2,000+

Open Heart Surgeries 500

Solid Organ Transplants 140

EHN Primary Care Locations

#1 Hospital in Georgia

Emory University Hospital

#2 Hospital in Georgia

Emory Saint Joseph's Hospital

\$4.7 Billion

Net Revenue (Budgeted)

\$122,000,000

Charity Care

\$4.8 Billion

Economic Impact on to

Economic Impact on the State of Georgia

60+

Countries
Served by
Emory
International

30

Urgent Care Cocations 2

40
Minute
Clinics

70+

Medical Specialties

As of January 2020

EMORY PHYSICIANS

The Emory Clinic

- Faculty within School of Medicine
- Teaching and research obligations

Community based with adjunct appointments

Emory Specialty Associates

- Community based providers
- No appointment within School of Medicine
- No teaching or research obligations

Emory Healthcare Network

- Non-Emory employed community based physicians
- Measured on Emory performance metrics





EMORY CLINIC



3.57 Million **FY20 FNCOUNTERS**



\$739M

FY20 REVENUE



3206+ **STAFF FTEs**

1130+





ADVANCE PRACTICE PROVIDER FTES





Emory Specialty Associates

937,000+ **FY20 FNCOUNTERS**



\$168M

FY20 REVENUE



694+

200+ ADVANCE PRACTICE **PROVIDER FTES**

PHYSICIAN FTES





As of Fiscal Year End 2020

ESA DEKALB MEDICAL

357,000 ENCOUNTERS



\$67M NET REVENUE





286+
TOTAL EMPLOYEES



124+

EMPLOYED PHYSICIANS





33+

ADVANCE PRACTICE PROVIDERS



78%-ile
PATIENT
SATISFACTION





38,000+ PATIENT PORTAL ACCOUNTS



63,000+
REFERRALS ANNUALLY

24,000+
DIAGNOSTICS ANNUALLY



PHYSICIAN GROUP PRACTICE (TEC/ESA/DMPG)

4.52M
TOTAL
ENCOUNTERS



\$907M TOTAL NET REVENUE





3900+ STAFF FTEs

11 1163

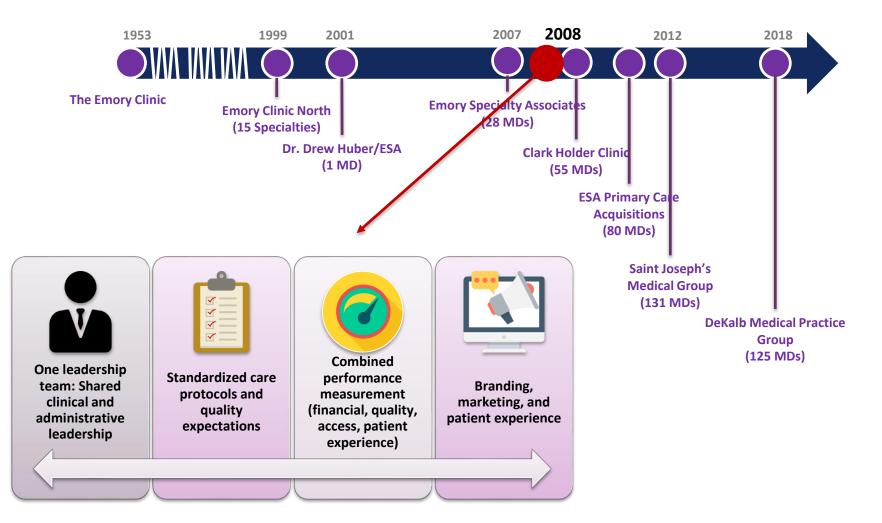
1389+
PHYSICIAN FTES



892+ADVANCE PRACTICE PROVIDER FTEs



OUR JOURNEY: MANAGEMENT DISCIPLINE TO SUPPORT PRACTICE GROWTH



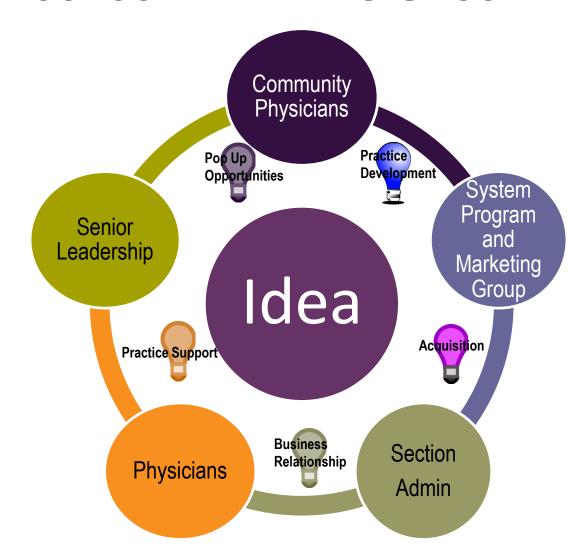
THE ASSESSMENT PROCESS

Points of Emphasis

Market Development provided by Market Services and Strategic Planning Departments, by locations and specialties

EHC CMO/CQOs, Risk and applicable Emory Chair must evaluate and sign off on each new-to-Emory physician's quality and risk credentials

All physician practice acquisition or start ups require sign off by EHC CEO, CFO, and PGP President prior to Board approval



BUSINESS PLANNING PROCESS

<u>Process</u>	<u>Timeline</u>	
Idea Generation Dept /Division Physician & Local Physician & Hospital/PGP Administrator Leadership (2) Dept /Division Physician & Local Hospital/PGP Administration Review System Priority Setting	Ongoing	
Emory Executive Team Reviews Strategic Fit (1) Emory Executive Team Reviews Strategic Fit (1) Dept./Div. Physician Review Quality Fit Risk and Quality Review by EHC Proceed with Business Plan	h 14-30	
Business Plan Discussions Validation of Design Practice Detailed Financial Market Operations Plan and Risk with Demand Model EU Legal sign off	h 30 Days	
Approvals Dept./Div. and PGP Administration recommend approval Dept./Div. and PGP Administration recommend Administration recommend Approval CFO Dept./Div. and PGP Administration residents of Hospital and Physician Group Board Approval (IEC or ESA; EHC or JOC or SRMC)	c 60 Days	
Development Credentialing (3) Buildouts Training Onboarding	120 Days	
Integration/ Daily Mgmt Billing Finance Quality / Compliance Operations / Other Shared Services		





(4) It take on average, 90 days from start of negotiations/business plan initiation to approval.

ASSESSMENTS

2

Self Assessment

On site review

3



Pre-go-live inspection

STARS & RAPC

Welcome to STARS - Emory's Online Event
Reporting System

SUBMIT A STARS REPORT
Thank you! If you have any questions about what or how to use 5 please call, 8-4193 or email Cheryl Burgess.



TEC Safety & Accreditation

ASSESSMENTS

Practice Self-Assessment Questionnaire

- Introduces the general expectations of all EHC physician practices.
- Requires practice to comment on its current state dimensions of:
 - Practice and provider integrity
 - Medical liability history
 - Practice operations such as
 - Coding review
 - Medical Records
 - Compliance issues
 - Quality and Service standards

On site Quality Review

- Conducted by EHC quality-trained nursing staff
- Validates self-reported practice assessment
- Includes direct observations
- Engages staff
- May be delicate issue

	Review
20 Pat	ient Charts Will be Reviewed to Assess:
	Documentation of a follow-up plan
	Population of medication list
	Population of allergy list
	Endorsement of results
	Communication of results to patient
Clinica	al Quality
	Existence and appropriateness of clinical service contracts
	Review patient ID Methodology (MRN)
	Hazardous materials: existence and if applicable, appropriate storage
	On-site medications: administration, adherence to expiration data, and appropriate storage
	Emergency plans are in place and staff are trained on these procedures
Compl	liance
1.	Method for skills validation of non-MD clinical staff? (NP, PA, MA, RN, LPN, tech, etc.)
Servic	e Quality
1.	Days to next new patient appointment
2.	Days to next return patient appointment
3.	Availability of acute illness appointments
-	Response time to patients' clinical questions
4.	
	Time to respond to prescription refill request

HEALTHCARE

PRE GO LIVE CHECKLISTS

- Credentialing checklist completed just before go live
- Requires on-site evaluation
- Conducted by Medical Staff Office
- Additional Nursing presence
- Assures EHC standards in place at go-live
- Include naming and signage approval

Is there a Hazardous Communication plan which include evidence of containment (red-bio-hazard bags), storage, and labeling?				
Is there an Exposure Control Plan that includes Infection Control and Universal Precautions policies, procedures, or protocols?				
What types of sterilization procedures are used? Explain procedure:	A. EMERGENCY CARE	Y	N N/A	COMMENTS
go-live	1. Is basic emergency equipment available to include an operable Ambu-bag or mask/oxygen tank (checked monthly and log maintained quantifying amount)? Is there a non-physician staff member CPR certified?			
signage	2. Is there evidence of a procedure in place concerning notification of local emergency transport personnel during a medical emergency?			
	3. What is the distance to the nearest 24-Hour Emergency Room? # of mile(s):	\Box		

LESSONS LEARNED

What Has Worked

Understanding the market and system need before engaging

Vetting practices through Chairs

In-depth proforma with realistic estimates based on known Emory practices and markets

What Hasn't Worked

Promising practices that nothing will change with Emory employment

Not communicating lines of authority/physician oversight

Ignoring potential mis-matches with Emory culture



WHAT'S ON THE WHITE COATS?

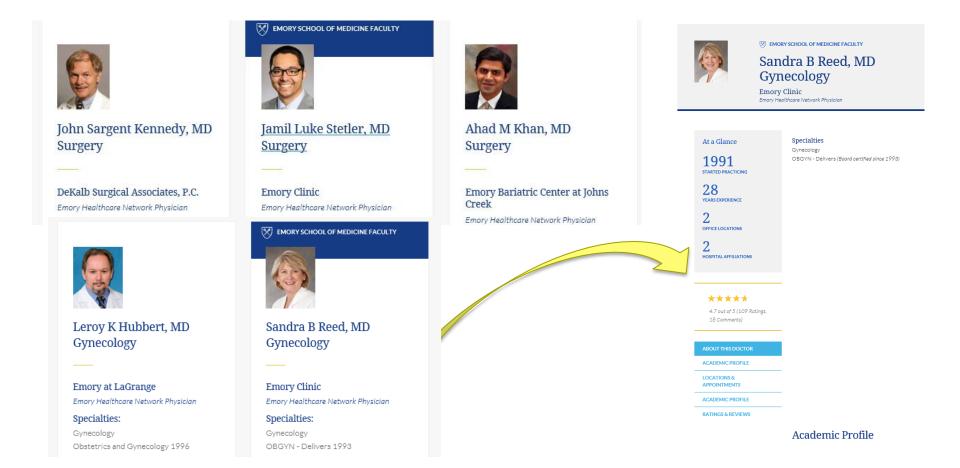




IDENTITY MATTERS...



AND WHAT IS ON THE WEBSITE





GROWING RESPONSIBLY



20





KAISER PERMANENTE PARTNERSHIP



325,000 members

26 medical offices

4 specialty hubs

3 acute care centers



595 physicians

204 APPs

40 specialties



NEW RETAIL LOCATIONS: KNOW WHERE TO GO







38 Locations

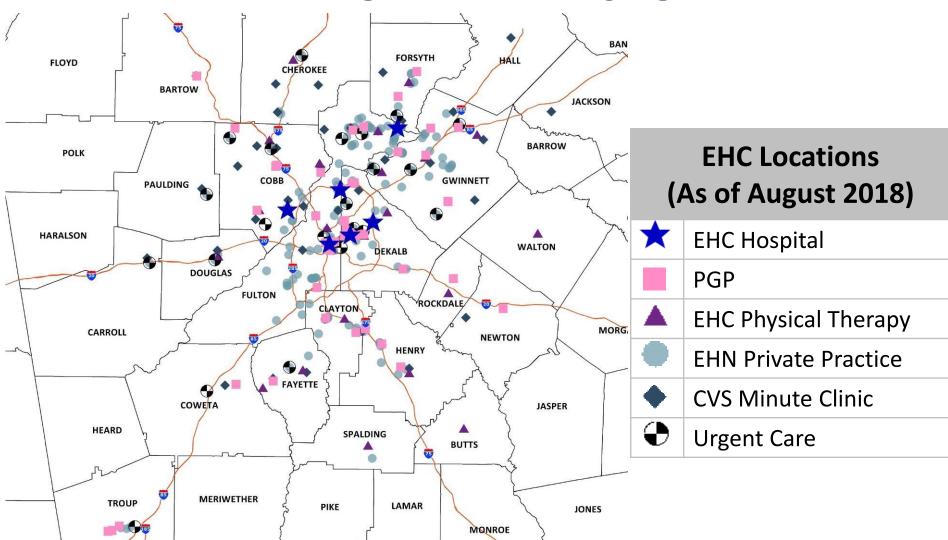


Key Takeaway:

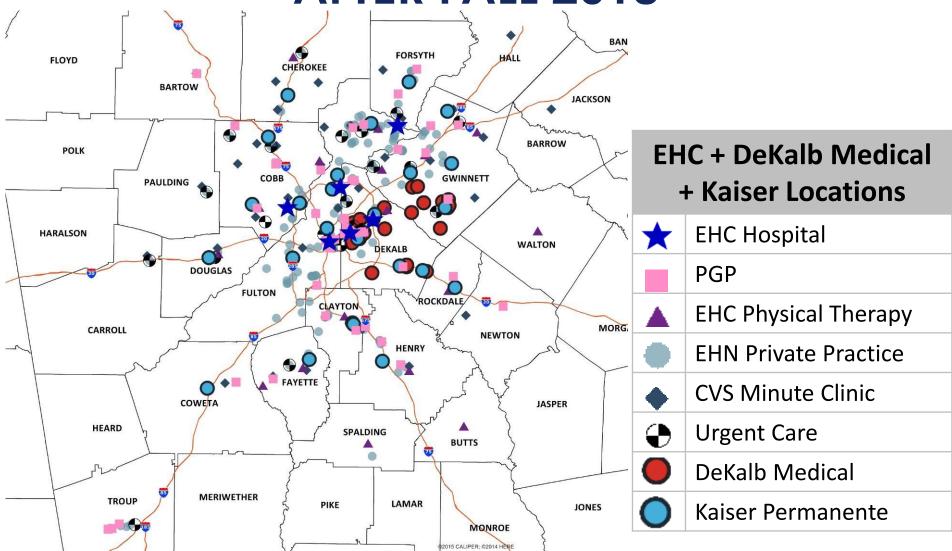
Retail and Urgent Care Clinics are a great option for low acuity medical needs



BEFORE FALL 2018

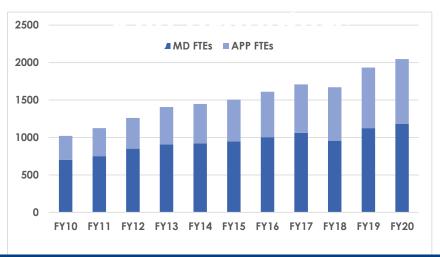


AFTER FALL 2018





PROVIDER GROWTH



Planned MD Growth ("green" hires):			
Cardiology	3	Orthopaedics	2
Colorectal Surgery	1	Pathology	3
Emergency Medicine	9	Plastic & Reconstructive Surgery	1
Em le le sproijity Projection (Casarout Liberton)	cés	Prima Care & Ge jat jc (inc.) Sala John Blog J J J J J	9 ¹³
Gynecology & Obstetrics	2	Radiology	10
Hematology & Medical Oncology	2	Rehabilitation Medicine	2
Nephrology	1	Rheumatology	1
Neurology	3	Urology	1
Neurosurgery	1	Vascular Surgery	1
Ophthalmology	2	TOTAL	70



"BIG" EMORY

EMORY EMORY

- WOODRUFF H E A L T H S C I E N C E S
- •\$5.5 billion enterprise
- •\$641.9 million research funding

- •3,673 faculty
- 5,848 students / trainees
- •33,456 employees

EMORY

EMORY
UNIVERSITY
SCHOOL OF
MEDICINE

EMORY

ROLLINS SCHOOL OF PUBLIC HEALTH **EMORY**

WOODRUFF SCHOOL OF NURSING **EMORY**

WINSHIP CANCER INSTITUTE **EMORY**

YERKES
NATIONAL
PRIMATE
RESEARCH

- Most comprehensive system in Georgia
- 11 hospitals
- 2,701 licensed beds
- 2,800+ physicians
- Emory Healthcare Network (Clinically Integrated Network)
- Emory Physician Practices

- 582 medical students
- 522 allied health
- 1,322 residents/ fellows
- 107 accredited programs
- 3,166 full/part-time faculty
- \$443.7m in research funds (#19 nationally)

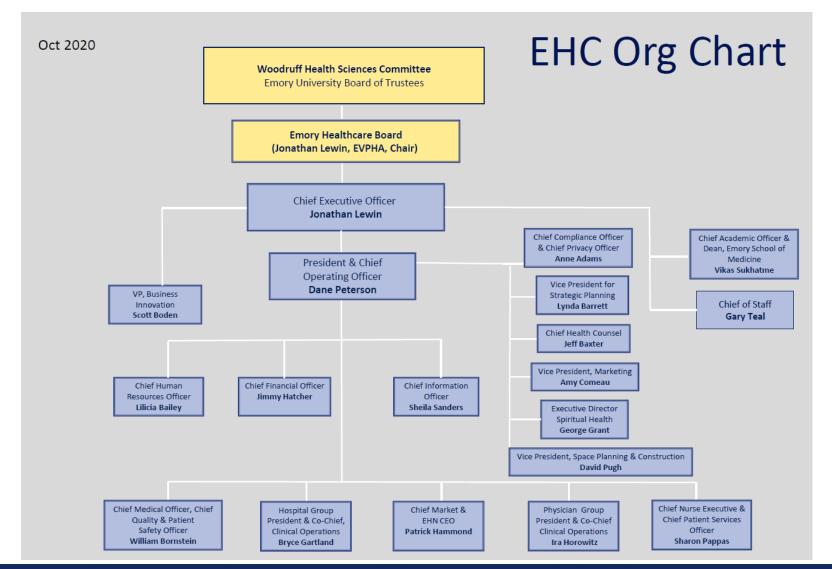
- 1,203 master degree students
- 179 PhD students
- 312 full/part-time faculty
- \$107.6m in research funds (#5 nationally)
- 553 bachelor degree students
- 445 master/PhD/ doctoral students
- 255 faculty
- \$12.8m in research funds (#5 nationally)
- Only NCI comprehensive cancer treatment center in Georgia
- \$96 million in research funds¹
- One of 7 NIH funded primate centers in the U.S.
- 352 staff members
- 64 faculty scientists
- 1,000 non-human primates
- \$74.6m in research funds (#1 nationally)





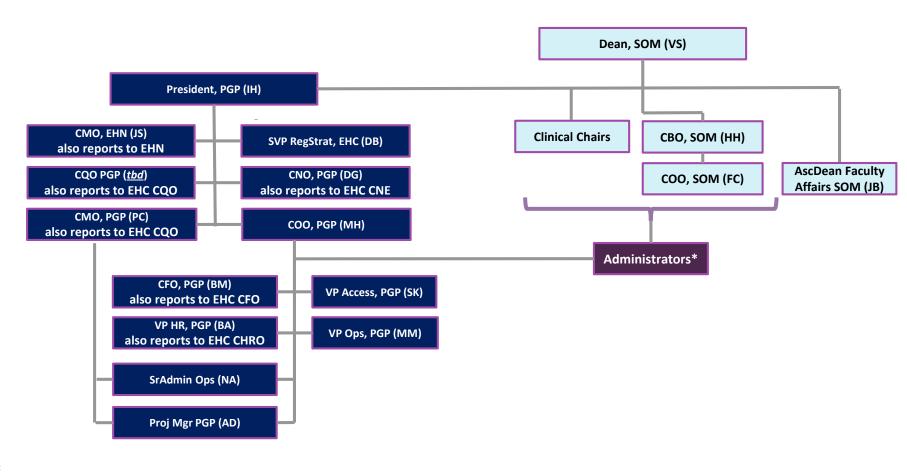
26

EMORY HEALTHCARE





EMORY PHYSICIANS GROUP



Note:

*Administrator Structure on Separate

Chart





ROLE OF THE CHAIR

- Chair oversees across all physicians and services within specialty (TEC, ESA)
- Chair is accountable for quality and operational excellence
- Chair has final approval for credentialing required of all employed physicians
- Chair provides input on EHN physician membership

DIFFERENCES – SUPPORT, RESOURCES, OVERSIGHT

The Emory Clinic

Emory Specialty Associates



- Chief Operating Officer
- Chief Finance Officer
- CEO of EHC/EVPHA
- 2 Chairs appointed by EVPHA
- 1 Physician appointed by Director
- 2 At Large Physicians voted by members
- 4 Non-Physician members of the Emory Healthcare Board



1:6 RN to Provider Ratio

1:4 MA to Provider Ratio

Use of consolidated call center

Limited RNs

1:1 MA to Provider Ratio

Some using call center





1:Primary Care & Specialty Care

1: Ophthalmology

3

2:Primary Care & Specialty Care

1: Ophthalmology















Level of standards expected of The Emory Clinic. ESA is not accredited with The Joint Commission, but some standards (NPSGs) do apply

Internal Quality Reviews
Staff Certification & Licensing
Infection Control Processes
Allergies & Medication Management
Service Standards Uniformity with
Patient & Family Centered Care
National Patient Safety Goals (NPSG)

Level of standards expected of an Emory Healthcare physician practice.

Scope of Practice Guidelines for Practitioners
State Third Party Payor Guidelines & Obligations
Department of Human Services (DHR) Regulations &
Guidelines
Technical Services Certifications & Guidelines (CLIA,
DMERC, etc.)

State Standards

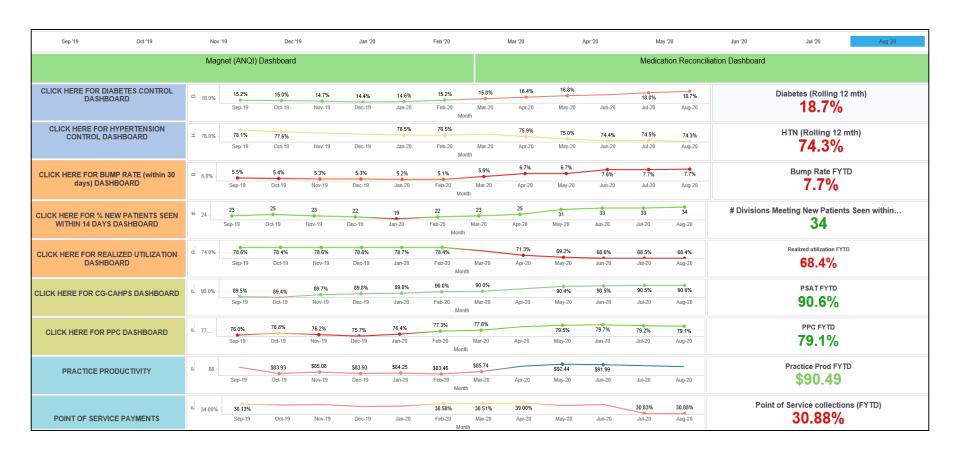
OSHA, Life Safety Codes, & HIPAA Regulations & Guidelines Coding & Medical Practice Regulations & Guidelines Centers for Medicare & Medicaid Services (CMS) Regulations & Guidelines Department of Health & Human Resources Regulations & Guidelines PQRI, Electronic Medical Records, & Meaningful Use Initiatives

National Standards





SHARED METRICS







SHARED METRICS





SHARED BENCHMARKING





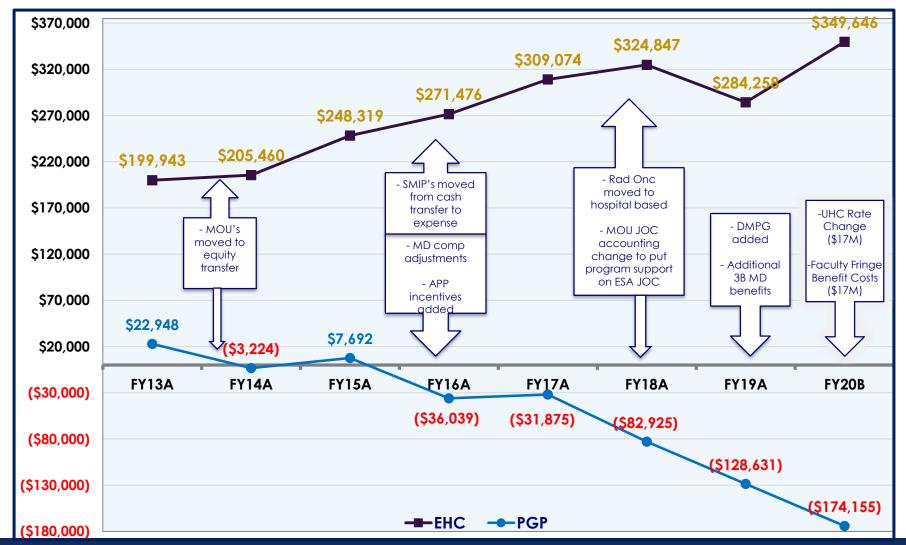


ONE PHYSICIAN COMPENSATION COMMITTEE

- Compensation Committee ensures alignment with Emory Medicine Compensation Philosophy and Guiding Principles
 - Makes recommendations to Dean
- Academic and Community RVU and Compensation benchmarks
 - Compensation and productivity are individually benchmarked
- ESA/TEC Alignment:
 - Components of the compensation plan may be similar (i.e., base, variable, incentive) within a specialty
 - Primary Care Compensation plan is the same across
 - Note: ESA plans typically utilize a community rather than academic benchmark
- Annual Salary Reviews



PRACTICE EBIDA CHANGES AS MORE SERVICES MOVE TO THE HOSPITAL





ONGOING INTEGRATION WORK

Merging of cultures

Integration Recruitment Leadership

Shared Fiscal Responsibility

Leverage for Population Health, Teaching, & Clinical Research

Network Integrity

Supporting Infrastructure



KEY TAKE AWAYS AND LESSONS LEARNED

Changing role of faculty vs community (ESA) Considerable loss of network integrity as move further from core hospitals Compensation differential decreasing between faculty and employed physicians Supporting Infrastructure (Hospitals, Medical Office Building, ASC) Quality and standards must be the same – "No Second Class Member" Financial awards must be aligned between the groups



WE ARE ONE - A NEW LOGO!

ENCORY HEALTHCARE

Physician Group Practice



QUESTIONS AND DISCUSSION

THANK YOU



CONTACT INFORMATION

Penny Castellano, MD

Associate Clinic Director and Chief Medical Officer The Emory Clinic and Emory Specialty Associates Professor and Vice Chair for Clinical Affairs

<u>pcastl@emory.edu</u> 404-778-2191



Maureen Haldeman Chief Operating Officer,

Emory Physician Group Practice

Maureen. Haldeman@emoryhealthcare.org

404-778-7550



Save the Date

Webinar: An Update on Physician Compensation Methodologies in Academic Medical Centers

Monday, February 8, 2021 3:30 – 4:45 pm (ET)

CMOG/GFP Joint Spring Meeting

March 18 &19, 2021 1:00 – 4:00 pm (ET) on each day (Please note that this meeting will be virtual)

Questions? Contact Shawn Rosen-Holtzman at srosenholtzman@aamc.org



APPENDIX



CHARACTERISTICS OF EMORY AMBULATORY SITES

	The Emory Clinic (Emory Employed)	Emory Specialty Associates (Emory Employed)	Private Physicians in Emory Healthcare Network (EHN)				
	Practice Administration						
Governance Board	TEC and EHC	ESA and EHC	Independent - Varies By Practice				
Practice Governance	Department Chair/Section Chief and PGP Admin	Department Chair/Section Chief and PGP Admin	Independent				
Tax I.D.	TEC	ESA and EMG	Varies By Practice				
Billing	Centralized GE Centricity Business/Patient Financial Services	Centralized GE Centricity Business/Patient Financial Services	Varies By Practice				
EMR	Cerner PowerChart	Cerner PowerChart	Certified EMR Required – Varies by Practice				
Medical Malpractice	Clifton Casualty	Clifton Casualty with MAG Tail coverage	Varies By Practice – Required Delegated Credentialing Levels				
Joint Commission Accreditation	Yes	No – but most standards apply	No				

CHARACTERISTICS OF EMORY AMBULATORY SITES

	The Emory Clinic (Emory Employed)	Emory Specialty Associates (Emory Employed)	Private Physicians in Emory Healthcare Network (EHN)			
Integration with Emory Tri-Partite Mission (i.e. clinical care, teaching and research)						
Physician Employment	EHC and SOM	ESA	Practice			
Advance Practice Provider Employment	EHC	ESA	Practice			
Staff Employment	EHC	ESA	Practice			
Full-Time Faculty Appointment	Yes	No – Some Have Volunteer	No – Some Have Volunteer			
Dean's Tax or Academic Enrichment Funding	No	No	No			
Teaching	Residents/ Fellows/ Students	Some Residents/ Fellows/ Students (not required)	Not Required – Some Do			

CHARACTERISTICS OF EMORY AMBULATORY SITES

	The Emory Clinic (Emory Employed)	Emory Specialty Associates (Emory Employed)	Private Physicians in Emory Healthcare Network (EHN)			
	Compensation and Reimbursement					
Physician Compensation	Productivity Based with quality and other incentives	Productivity Based with quality and other incentives	Varies by Practice			
Managed Care Rates	TEC Fee Schedule	TEC/ESA or EMG Fee Schedule	EHN Private Fee Schedule			