

## Executive Physician Leadership: Critical Success Factors in Value-Based Care

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Bluethorn 2

### Round Table Facilitators

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Topic/Question	Groups Comments/Discussion
Current physician leadership challenges	<ul style="list-style-type: none"> <li>• Competing priorities between administrative time and clinical time requirements                             <ul style="list-style-type: none"> <li>- Physician leaders feel like they are doing everything</li> <li>- How do you simplify and focus on most important items?</li> </ul> </li> <li>• No traditional training program for MD leadership training</li> <li>• Variation of size and scope</li> <li>• Physician engagement is crucial because then physicians aren't aligned and feel like administrators are dictating to them what to do                             <ul style="list-style-type: none"> <li>- Physician alignment is crucial factor for success</li> </ul> </li> <li>• There is lack of financial incentive alignment for providers and organizations will not get to where they need to be without alignment</li> <li>• Physicians needs to be educated on bigger picture and rules of contracting</li> <li>• CMOs might feel like being blown off by administrators</li> <li>• Need to consider burnout issues</li> <li>• How do you train the next generation of providers to be ready for the healthcare environment we live in today?</li> </ul>
Transition from FFS to value based model	<ul style="list-style-type: none"> <li>• Moving from FFS to value based model, must engage physicians and empower them                             <ul style="list-style-type: none"> <li>- Can't force to see patients every 15 min and have same productivity</li> <li>- Need to better understand where providers spend more time to get quality results</li> </ul> </li> </ul>

# Round Table Discussion Notes

	<ul style="list-style-type: none"> <li>• Population health requires multi-disciplinary approach with individuals aligned along entire path</li> <li>• Need to engage providers and tell them what they will be empowered to do at end of the day</li> </ul>
<p>Addressing physician leadership challenges</p>	<ul style="list-style-type: none"> <li>• For physician leadership - look for people with realistic view of colleagues             <ul style="list-style-type: none"> <li>- Need leaders that can honestly evaluate physicians and what their goals are</li> <li>- When can you teach? When do you need to let go? What to/not tolerate?</li> <li>- Need someone who is very honest and courageous</li> </ul> </li> <li>• Need to create a team together and be aligned on value goals</li> <li>• Need to provide big data and admin support to providers to understand where to focus</li> <li>• Partnered physician with non-MD leader             <ul style="list-style-type: none"> <li>- Administrative support helps success of physician leaders</li> <li>- Bonuses of admin and med directors were the same criteria</li> <li>- If doc didn't get the bonus, neither did administration and vice versa</li> <li>- Non-physicians extremely involved in clinical decisions and vice-versa</li> <li>- Incentivize on business and clinical metrics</li> </ul> </li> <li>• Send medical directors to leadership programs along with administrator counterparts</li> </ul>
<p>"Era of the new physician"</p>	<ul style="list-style-type: none"> <li>• Providers are not being trained for value-based care, SDH, etc.</li> <li>• More focus on work/life balance</li> <li>• EMR has killed the practice of medicine, and everything feels like "cut and paste"</li> </ul>