

## Why You Need a Project Management Office to Realize Your Value-Based Payment Strategy

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- 1. If a medical group in particular is thinking about moving into risk, what are some key considerations that they should keep in mind? What should they be thinking about in terms of organizing themselves PMO-like particularly for a group that is not so large say mid-sized, 25 to 50 docs? How can they do this in a way that's not overwhelming but it will be effective?**

One of the important things to remember is that not everybody is going to succeed at being a project manager. There are skills that are necessary for the role, including a lot of soft skills such as the ability to manage, influence and communicate across lots of different kinds of people, the ability to speak at all levels of the organization, but, even more importantly, the ability to understand.

Aspects such as contract management, being able to understand the flow of the funds and where the value is going, being able to understand the overall objectives and the structure that you are working to put in place will allow the project manager to be more effectively in working with teams across the organization.

Even for an organization of 4,050 people, you may only have initiatives that are going to require maybe one person or maybe even a person half the time. But you want to look for that right person in the organization, who not only has just the technical skills, but also the relationship capability to be able to motivate teams keep them focused. It is crucial to chart that roadmap that gets from where you are currently to the end state and make sure that you're progressing appropriately along the way.

- 2. For larger AMCs with their specific graduate education and large networks that sometimes partnered with community networks focused on teaching and research, but also of course care right often trauma center, what would be some of the critical success factors that you would share in having them put together the right type of project management office operation to ensure success as they work towards an incremental pathway, from where they are today, mostly fee-for-service to more global risk?**

In large organizations, validation of the processes is still critical as you're still driving your business. You want to foster for align metrics, making sure the strategy makes sense and that it is the right direction to go.

Once that is achieved, the next step is to align metrics across all the different type of businesses. that Now that we are introducing different metrics to the equation, they need to balance together, as many of them might contradict one another. The specific inputs to the type of PM or infrastructure will need to be set up. An outline of what drives the PMO is needed as otherwise, having a strong infrastructure would be meaningless. The outline would also bridge the gaps as those conflicts arises.

- 3. From what you have been able to achieve whether it's around scale or performance or efficiency or satisfaction, is there anything that you've seen that you think a PMO helped with and anything you can share, about in particular, you think has been useful to use as you've put this kind of a structure in place?**

From a compliance standpoint, we picked an aggregation of around 600 physicians throughout the state all wildly independent and we needed to make sure that we had the right structure in place to be able to service the memberships properly. By having the CMO step in, we were able to identify where we had fallen short from a compliance perspective. We were setup from a clinic as a governance perspective, properly as an organization, but really needed to make sure that we were doing the proper activities from an actual clinical and committee standpoint.

It was super helpful to identify that and once we had that in placed, also conduct a full inventory of all of our contracts. There were a good 10 to 15 different pair contracts, all with varying degrees of how we deliver, whether some are just a simple monthly CCTV as opposed to some upside downside risk.

I think between the setup of the full inventory and able to interject the ARC product to ensure we were engaging properly with physicians and getting the proper outcomes were the three biggest areas that that we found were where we're getting that immediate and best results.