# IMPROVING OUR COMMUNITY'S HEALTH: CLINICAL INTEGRATION

**MEET PATIENT JACK BOUDREAUX:** Chest Pain 11. ONGOING PRIMARY CARE EMERGENCY DEPARTMENT 10. HOSPITAL/ 2. **OUTBOUND CALLS / CARDIAC CARE** CARE MANAGEMENT 3. 9. Jack's Electronic Health Record PHYSICAL THERAPY allows ALL of his healthcare **CARDIOLOGIST: CARDIAC OCCUPATIONAL THERAPY** CATHETERIZATION providers to access and share timely, accurate information about Jack's ongoing health: Family medical history Current medications 8. Alleraies Diagnoses Immunizations · Provider contact info **CARDIAC SURGEON:**  Pharmacy preference CARDIOLOGIST: **TRIPLE BY-PASS SURGERY**  Directives about end of life care **FOLLOW-UP VISIT** 7. 5. 6. REHAB PHARMACY FACILITY HOME HEALTH

For health systems to succeed in the future, patient care must become more "clinically integrated" so that hospitals, doctors and other kinds of clinical caregivers work together-real time- to help manage a patient's overall health, not just one particular condition, disease or injury.

## Benefits to Jack

- Better coordinated care
- Timely updates shared between hospitals doctors, pharmacies, etc.
- Less paperwork
- Access to his own medical records
- Fewer opportunities for errors or gaps in his care
- Improved health

#### Benefits to Jack's Hospitals & Doctors

- Less duplicated efforts
- Minimized opportunity for errors
- Reduced variations in care
- Increased safety
- · Lowered readmission rates
- Reduces costs
- Increased opportunities for shared savings and higher reimbursements
- Improved health

Partnering closely with physicians and healthcare organizations that share our goals and values, BRG will be a leader in clinical integration to provide better coordinated care, enhance our safety and efficiency, and improve our community's health.



# TRANSFORMING CARE FOR HEALTHY COMMUNITIES NETWORK DEVELOPMENT

For hospitals to succeed in the future, they must expand beyond the walls of the traditional medical center and increase both the convenience of and access to high quality care. Cost pressures and new payment models from both government programs and private insurance companies are leading hospitals to explore new kinds of business relationships.

**TRADITIONAL HOSPITALS** are partnering with other healthcare providers in their community to expand their reach, coordinate patient care and increase patient convenience and satisfaction.



#### **OTHER** HOSPITALS



#### AMBULATORY/ WALK-INS



#### **POST-ACUTE** AND ANCILLARY



#### **OTHERS**



#### Metropolitan/Regional hospitals

- Secondary local/ community facilities
- Specialty hospitals (behavioral, orthopedic, etc.)
- Primary Care/
- Specialty Practices
- Freestanding **Emergency** Departments
- Urgent Care Centers
- Health Centers (FQHCs)
- Surgery Centers for Same-Day Surgeries
- (X-ray, MRI, CT Scan, etc)
- Worksite Clinics
- such as Walgreens or CVS)
- Rehab Hospitals / LTACHs
- Home Health Agencies
- Other ancillary providers
- Pharmacies
- Insurance Companies
- Medicare/Medicaid/TRICARE
- Employers

#### Patient Benefits

- Patient choice
- Patient convenience
- · More points of access to care
- Access to medical records
- Greater involvement in our own care

#### Health System Benefits

- Greater market share
- Clinical coordination sharing of information to reduce duplicated efforts
- Enhanced computer systems to collect, analyze and share patient data
- · Cost savings on equipment and supplies
- Shared incentives for improving quality
- Enhanced negotiating power with insurance companies

BRG is committed to developing a new kind of health network that will connect organizations that share a common vision and commitment to patient care. This network will allow us to better serve our patients and community, optimize our resources, and enhance our value to large employers and insurance companies.



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- Imaging Centers
- Retail Clinics (in locations
- Skilled Nursing

# **IMPROVING OUR COMMUNITY'S HEALTH:** INNOVATION

From how we send a birthday greeting to how we manage our bank account, new technologies impact our lives every day. Understanding and managing our healthcare should be no different. From physician visits conducted over the Internet

to smart phones that measure our heart rate to drones that deliver medications, medical and technological advances create new opportunities for hospitals to innovation delivery settings, disease management and prevention.



• The American Telemedicine Association estimates that about 450,000 patients will see a doctor through the Internet this year for a primary care consultation.

to their doctor's

office.

 Some patients already have invested in stethoscopes - medical devices used to listen to hearts and lungs - and otoscopes - devices used to look into ears, noses and throats - that can be plugged into a computer's USB port.

**42%** of 18-34 vear old woman want birth control 30% want blood pressure medication

**27%** want allergy or asthma medication

health apps already on the market

By embracing innovation, BRG will explore new approaches to delivering care, engaging patients, enhancing access and improving patient health outcomes.



## TRANSFORMING CARE FOR HEALTHY COMMUNITIES **MOVING FROM** VOLUME TO VALUE

For health systems to succeed in the future, they must consider not only how to treat a patient's individual illness or injury, but how they help patients - and communities manage their overall health.

### Five Reasons Why Our Healthcare System Needs to Change:



U.S healthcare spending is expected to continue to rise over the next decade due our aging population, faster projected economic

growth, and coverage expansions under the Affordable Care Act.

In an effort to improve community health and control costs. the Centers for Medicare and Medicaid

Services is using new methods for paying for healthcare, putting greater focus on the quality of patient health instead of the quantity of services



Even though we are spending more and more on care, the health of our communities is not improving. As a country,

and here in our state, overall health status ranks poorly.

This shift in payment structure is receiving significant discussion in our nation's capital and throughout the country as our healthcare system moves from volume to value.



Employers are demanding greater value for their healthcare dollar, too,

causing insurance companies to embrace value-driven payment methods.



by 2030, 71.5 million U.S. adults will be age 65 years or older.



\*Centers for Disease Control and Prevention

The U.S. Department of Health & Human Services (HHS) set a goal of tying 30 percent of payments for traditional Medicare benefits to value-based payment models by the end of 2016 and

by 2018.

\*U.S. Department of Health & Human Services



BRG is committed to being a leader in the transition from volume to value and to improving community health. To navigate the changes in our industry, we must realign:

- our business and contractual relationships → Network Development
- the way we provide care and share information → *Clinical Integration*
- the way we utilize medical and technological advances  $\rightarrow$  *Innovation*

