



Cook County Health and Hospitals System Presentation to Inform Strategic Plan: Medical Staff

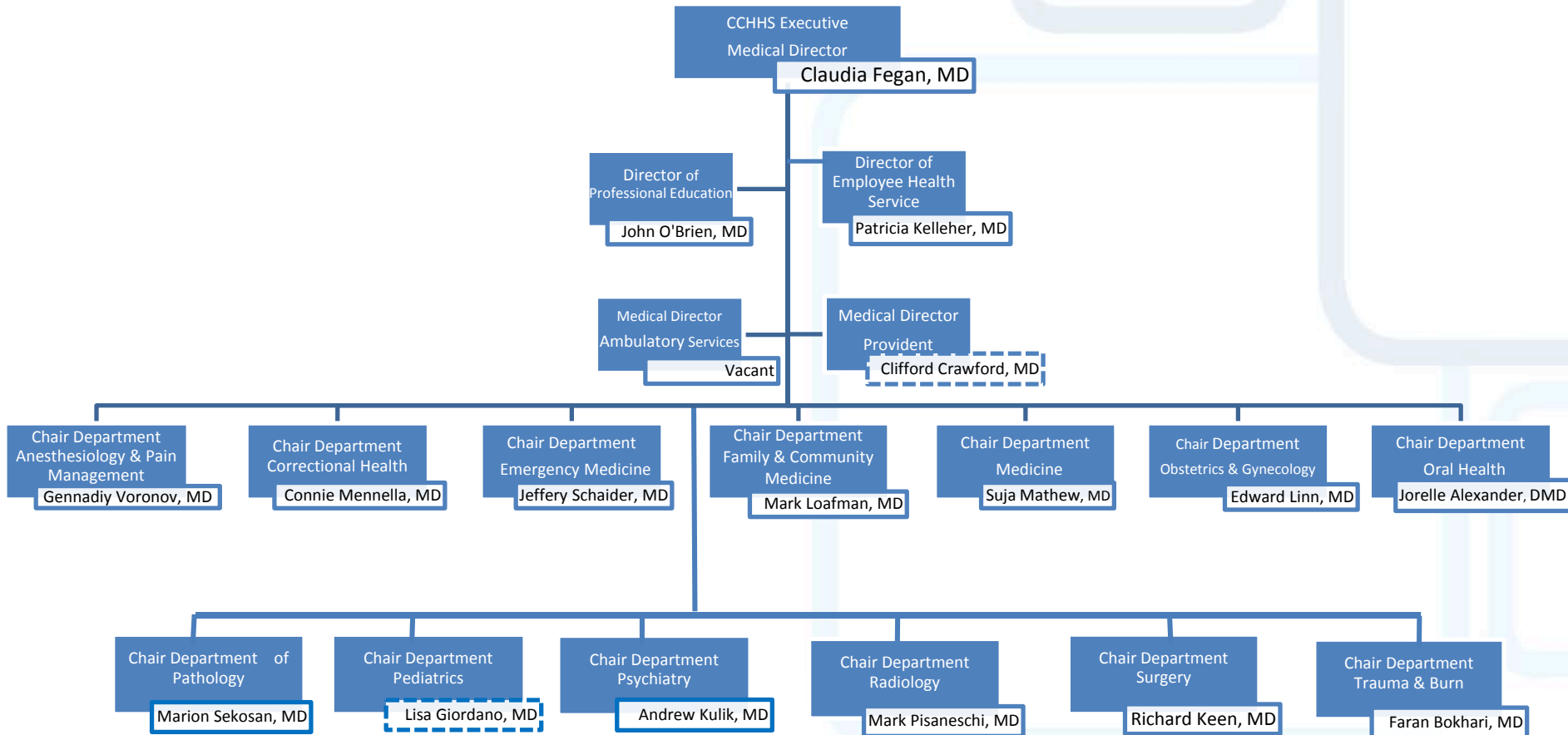
Claudia M. Fegan, MD, FACP, CHCQM
Executive Medical Director

April 29, 2016

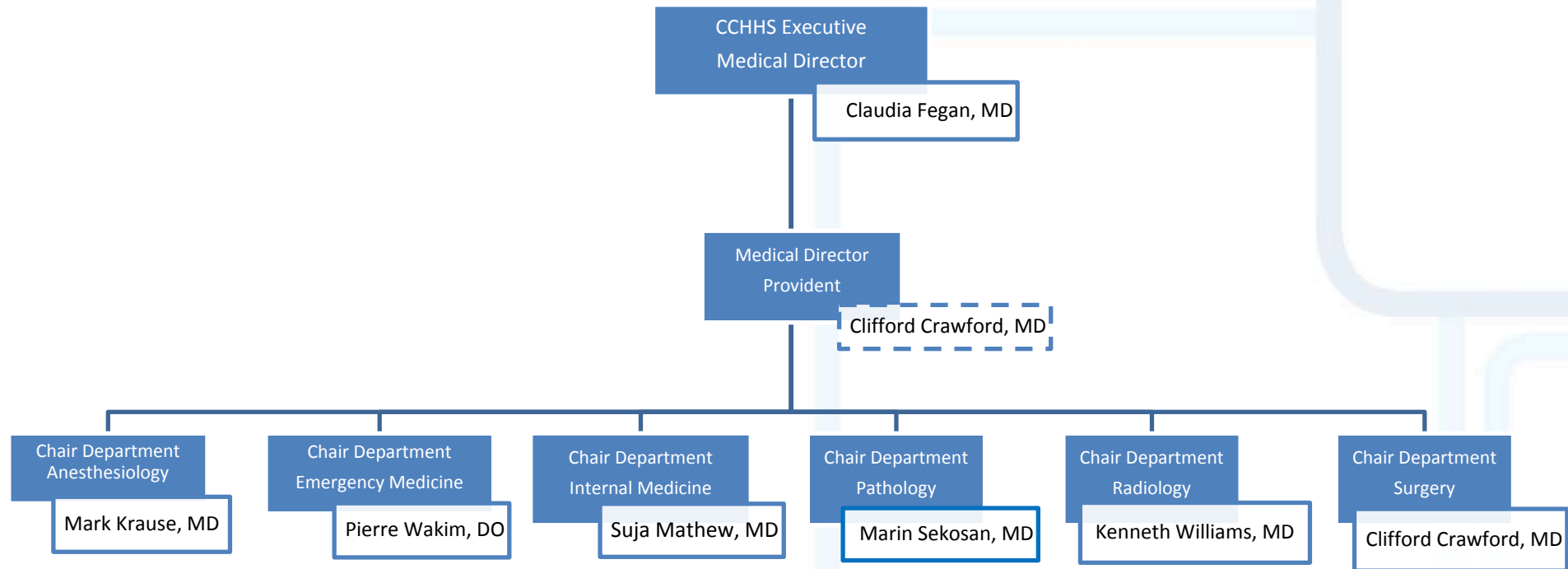


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CCHHS Medical Leadership



Provident Medical Leadership



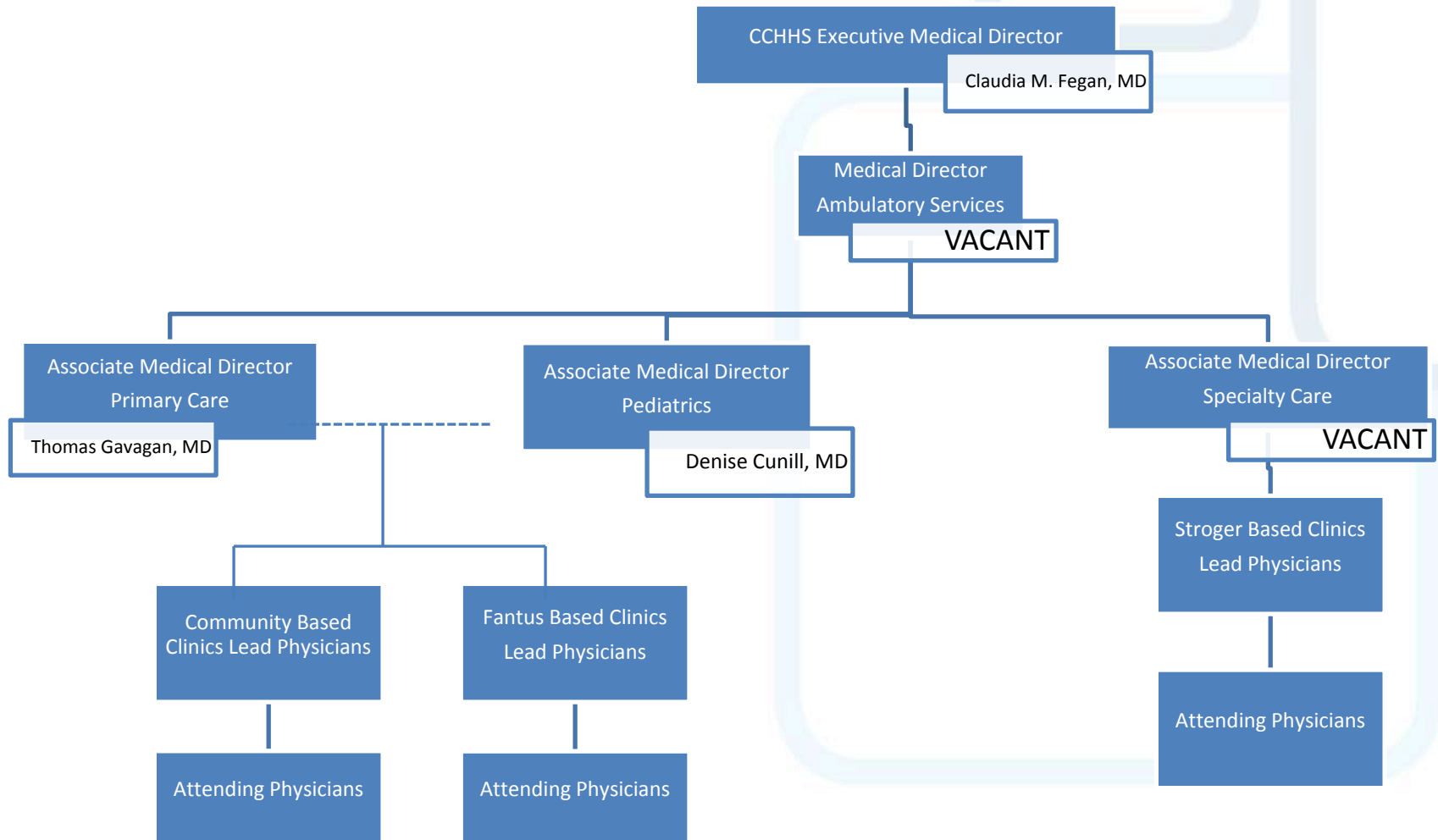
Interim



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Ambulatory Medical Leadership



Medical Staff Functions

“The Medical Staff has the overall responsibility for the quality of medical care provided to patients, and for the professional practices and ethical conduct of its members, as well as accounting therefore to the Cook County Health and Hospitals System Board of Directors...”

Preamble, John H. Stroger, Jr. Hospital Bylaws

“The Medical Staff is responsible for the quality of medical care in the Hospital and accepts and discharges this responsibility subject to the ultimate authority of the Cook County Health and Hospitals System Board of Directors...”

Preamble, Provident Hospital Bylaws



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Medical Staff Committees:

Executive Medical Staff (EMS) Committee

- Represents and acts on behalf of the Medical Staff
- Coordinates activities and general policies of the departments
- Receives and acts on committee reports
- Implements policies of the Medical Staff
- Liaison between Medical Staff, COO, CEO and Board
- Makes recommendations to the Board and Hospital Management on appointment/reappointment...clinical privileges and corrective actions
- Promotes professionally competent and ethical conduct by Medical Staff
- Assists in implementing and enforcing policies and procedures approved by the Board



EMS Committee Members

- Officers of the Medical Staff
- Chairs of all Medical Departments
- Chair of Division of General Surgery
- One member from each of 5 Divisions of Department of Medicine
- One member from each of 4 Divisions of Department of Surgery
- Two members each from OB/GYN and Pediatrics
- One member each from Departments of Anesthesiology & Pain Management, Correctional Health, Family & Community Medicine, Pathology, Psychiatry, Radiology, Trauma & Burn
- One member from FT non-member practitioners (selected by President)
- President of the House Staff
- Ex-officio members: Immediate Past President, COO, Medical Director, Associate Hospital Director, Director of Nursing Services



Stroger Hospital Executive Medical Staff Committee

2016-2017 Officers



Ozuru Ukoha, MD
President



Trevor Lewis, MD
Vice-President



Juliet Bradley, MD
Secretary



Aiman Tulaimat, MD
Treasurer



Provident Hospital Medical Executive Committee

2016-2018 Officers



Valerie Hansbrough, MD
President



Anwer Hussain, DO
Vice-President



Julita McPherson, MD
Secretary

Angel Leake, MD
Treasurer



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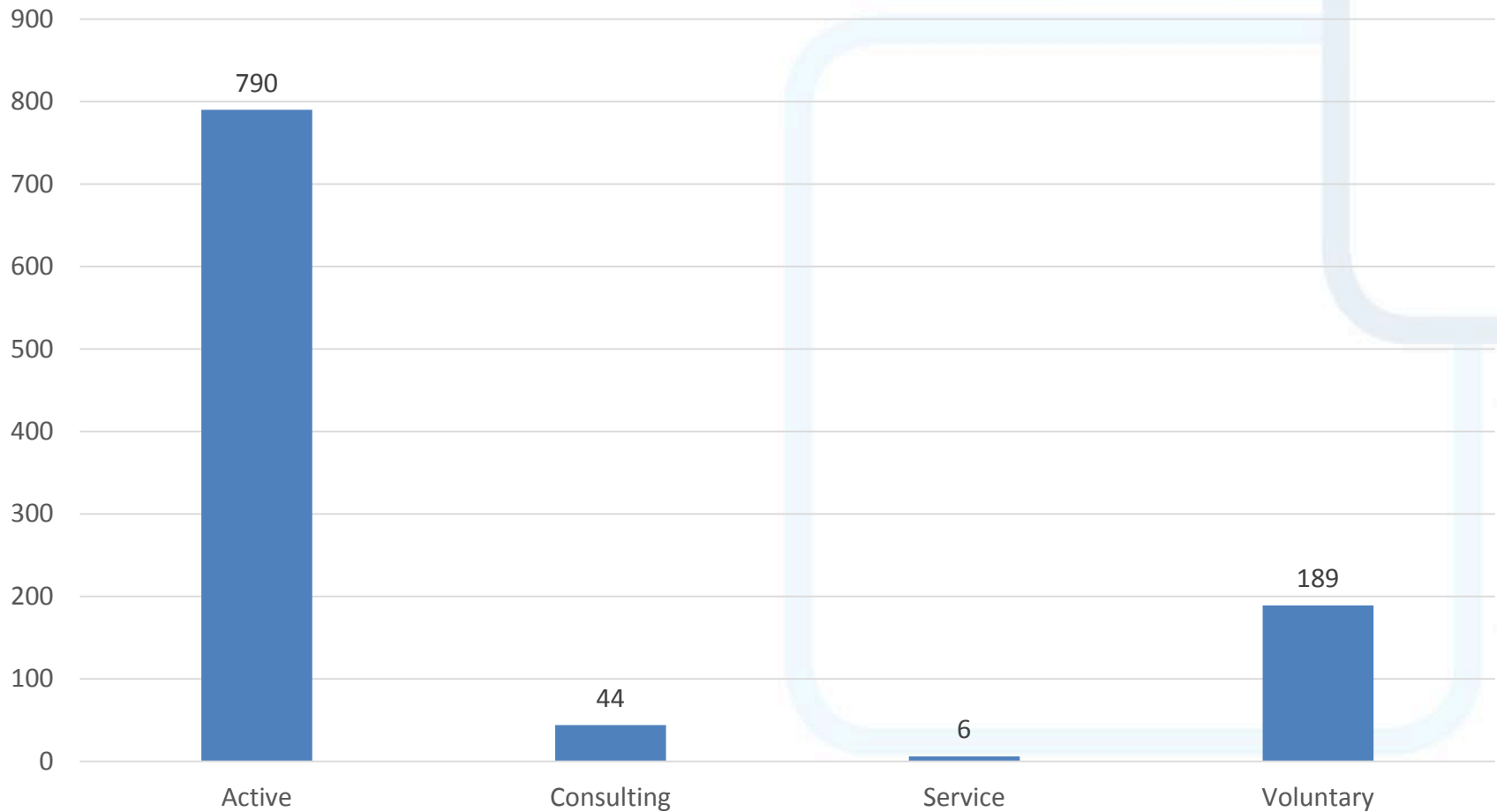
Medical Staff Committees

- Blood Bank and Transfusion Committee
- Bylaws Committee
- Cancer Committee
- Credentials Committee
- Critical Care Committee
- Drug and Formulary Committee
- Hospital Quality Improvement and Patient Safety Committee
- Institutional Review Board (IRB)
- Joint Conference Committee
- Medical Education Committee
- Medical Ethics Committee
- Medical Information Committee
- Operating Room Committee
- Peer Review Committee
- Resuscitation Committee
- Surgical Function Review Committee
- Ad Hoc Committees



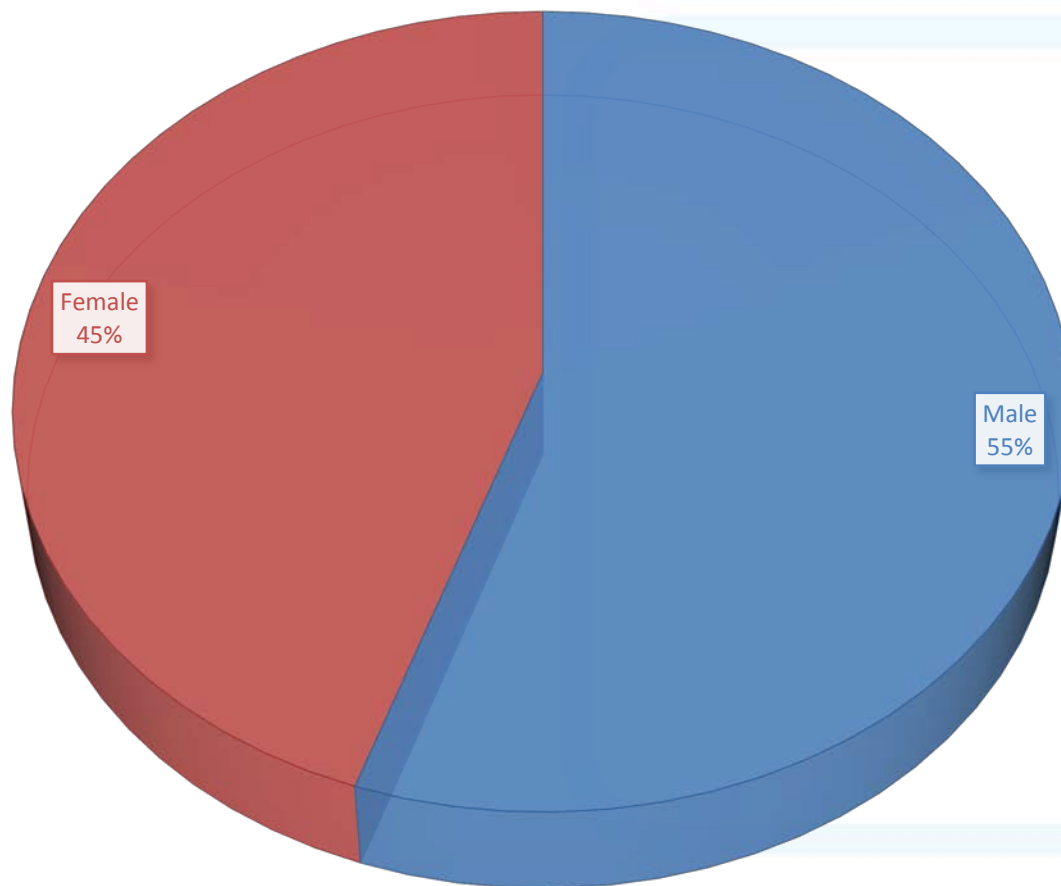
CCHHS Medical Staff by Category

Stroger/Provident



Medical Staff Demographics*

GENDER



*JHS and PH Active/Provisional only

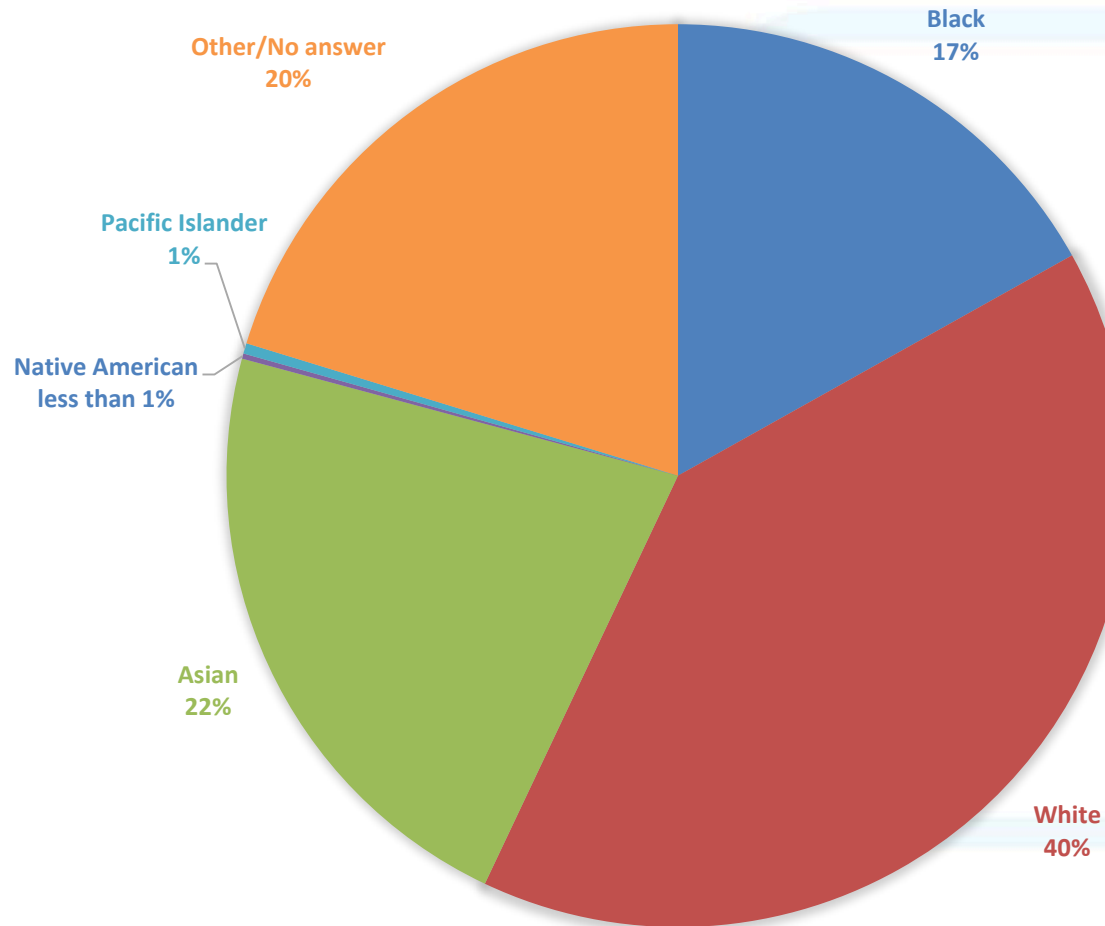


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Medical Staff Demographics*

RACE**



*JHS and PH Active/Provisional only

**Voluntary reporting

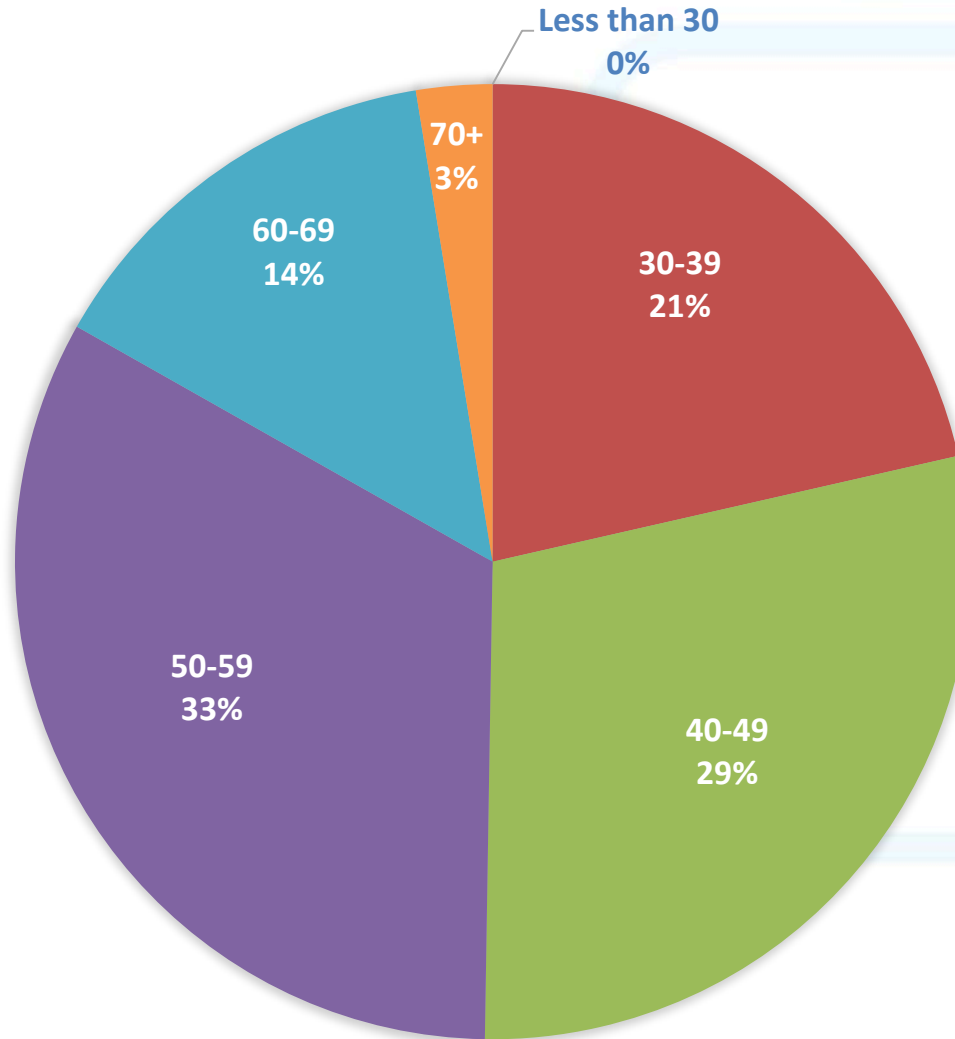


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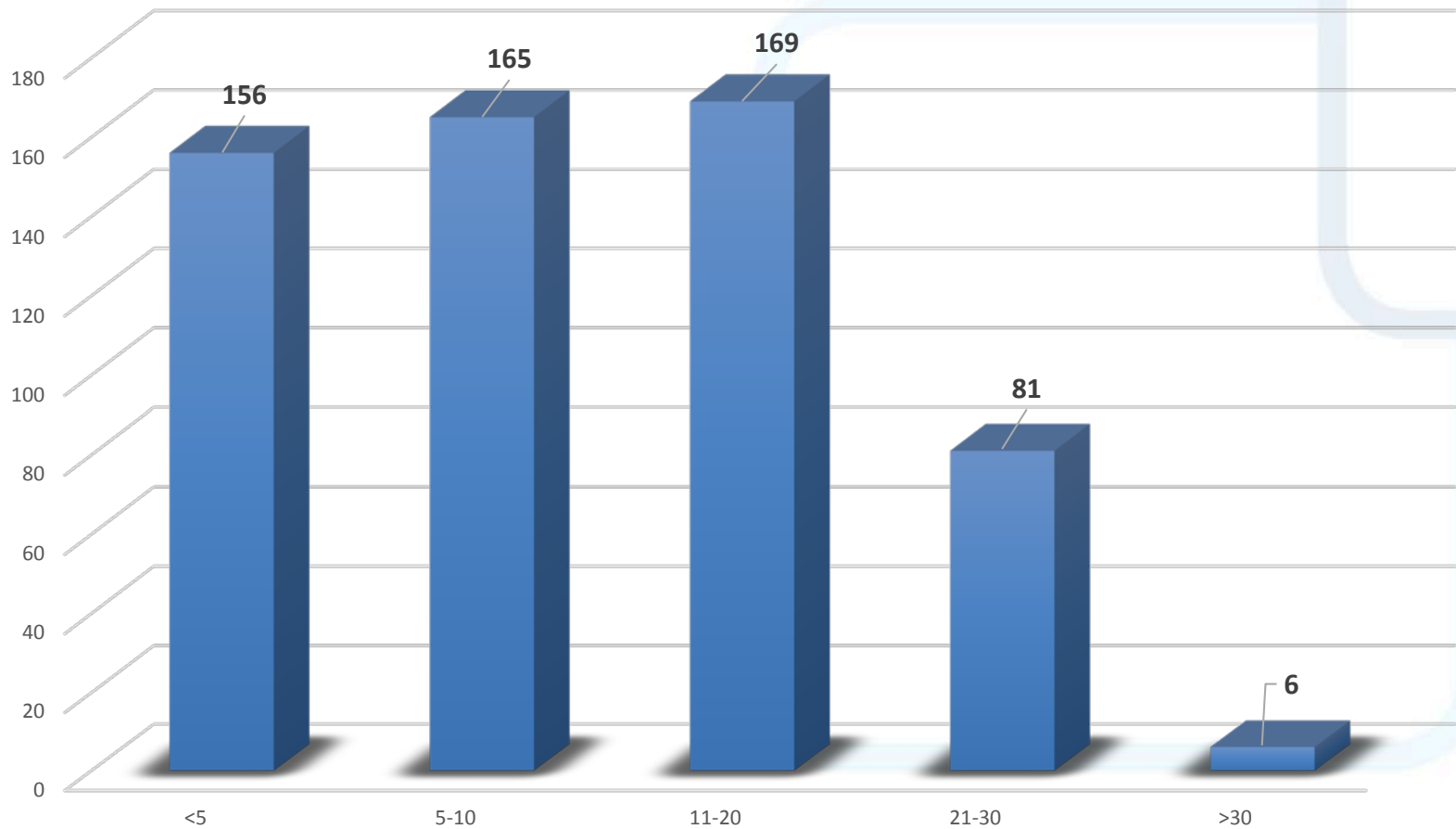
Medical Staff Demographics*

AGE



Medical Staff Demographics*

YEARS ON STAFF



*JHS and PH, Active/Provisional only

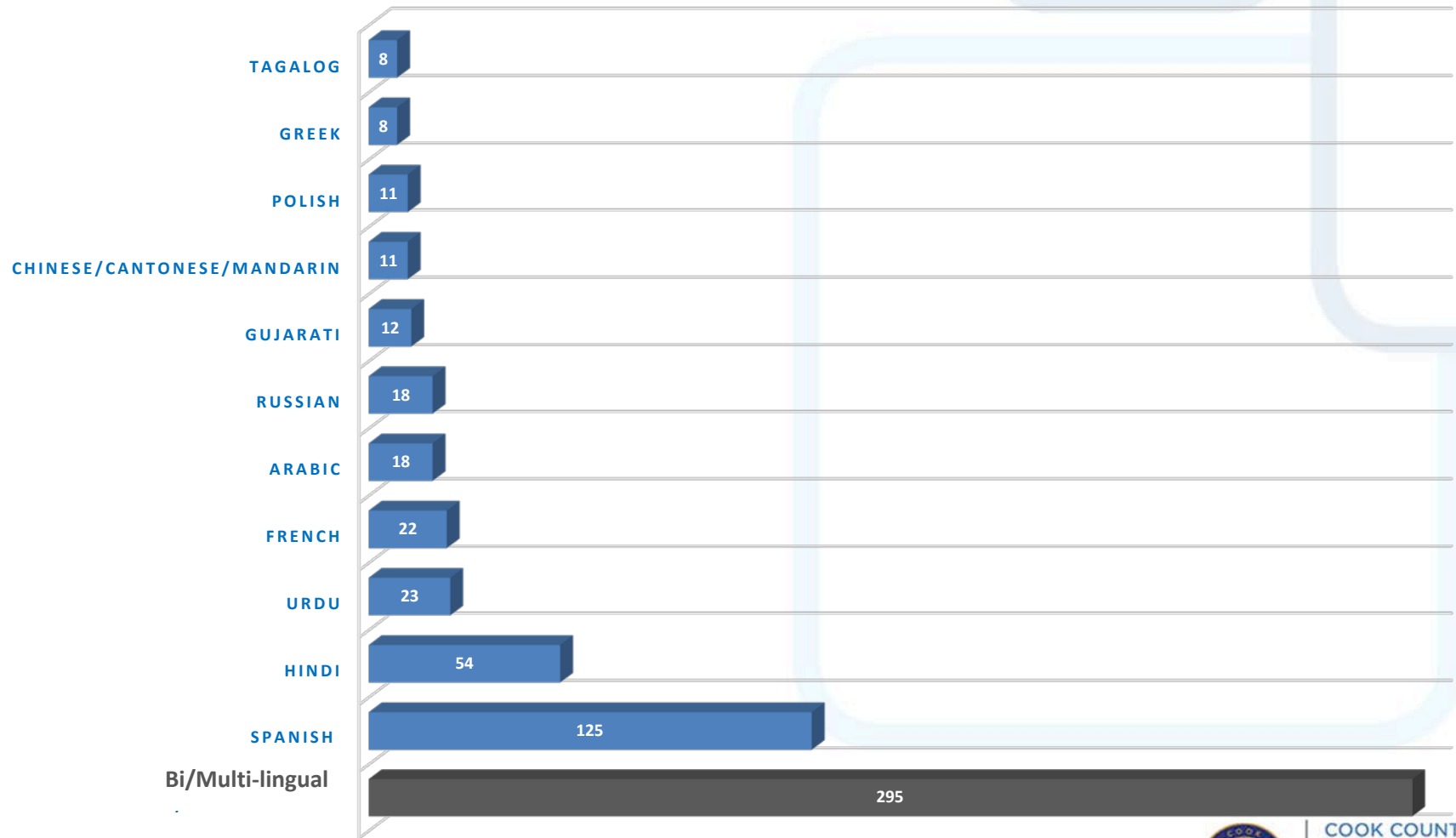


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Medical Staff Demographics*

TOP NON-ENGLISH LANGUAGES SPOKEN**



*JHS and PH, Active/Provisional only

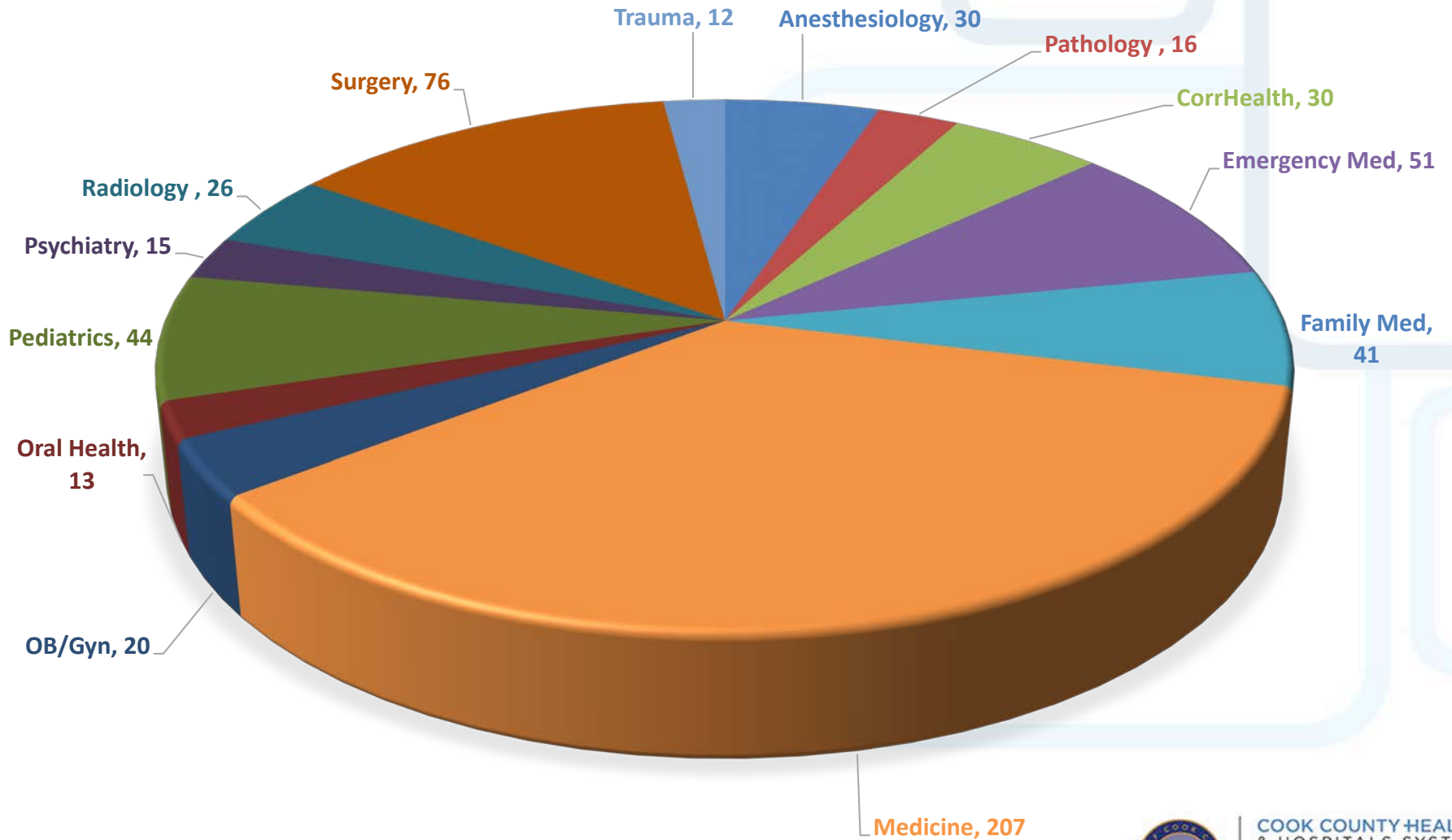
**Voluntary reporting



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CCHHS Medical Staff by Department*



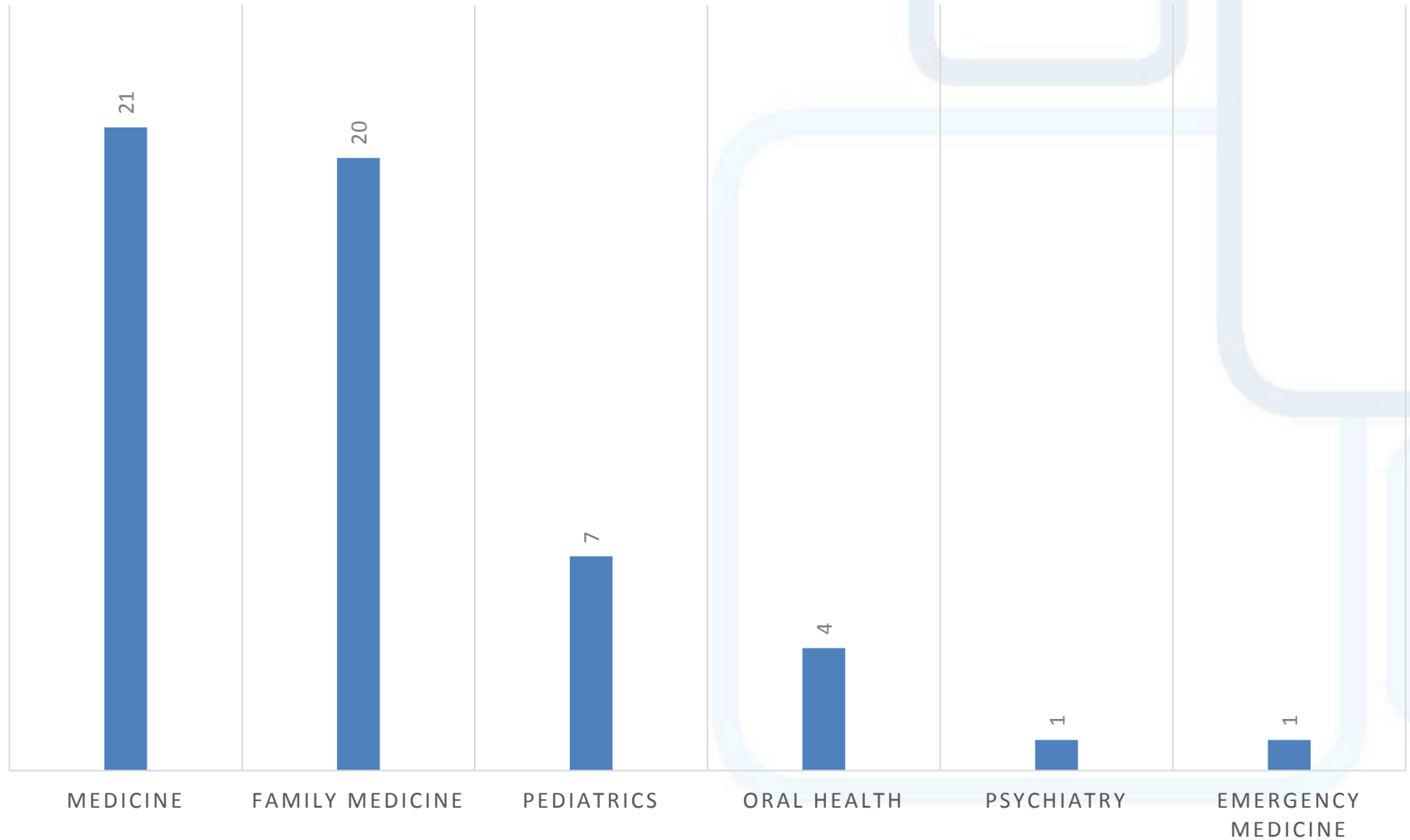
*JSH and PH, Active/Provisional only



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ACHN Budgeted* Physicians by Department



*FT Providers on ACHN budget, credentialed and privileged by respective department



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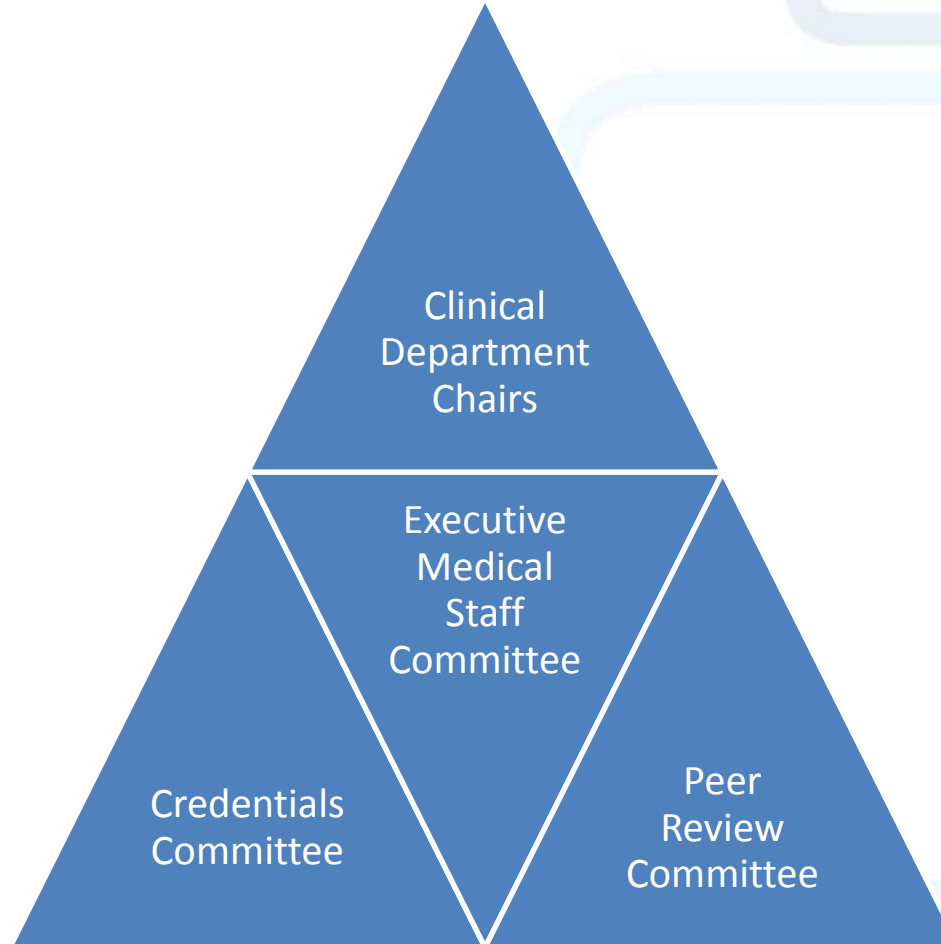
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Physicians in Ambulatory Care

- PCPs/Specialists on ACHN Budget
(credentialed and privileged by department of specialty)
- PCPs on Department of Medicine Budget
- PCPs on Department of Family Medicine Budget
- PCPs on Department of Pediatrics Budget
- Specialists on Budgets of Respective Departments



Quality Partnership



Quality Partnership

Department Chair

- Recruits and hires
- Recommends criteria for clinical privileges
- Conducts Individual performance evaluation Focused Professional Practice Evaluations/ Ongoing Professional Practice Evaluations(FPPE/OPPE)
- Ensures department compliance with Medical Staff Bylaws, Rules and Regulations
- Develops policies and procedures governing department operations and clinical practice
- Monitors, evaluates and reports on quality assurance activities

Credentials Committee

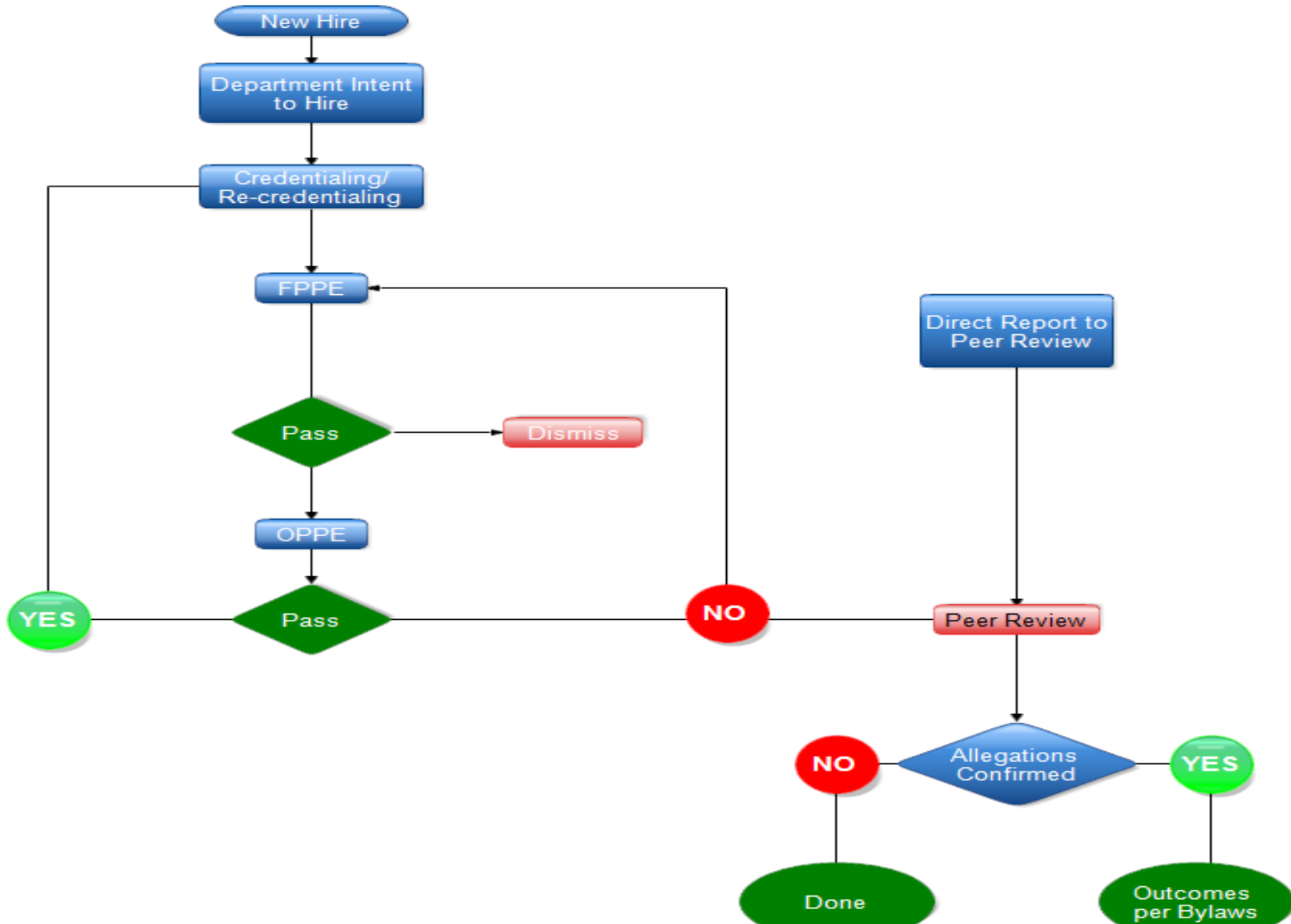
- Performs detailed review of applications/re-applications, evaluations and related documentation
- Make recommendations to appoint/re-appoint to Executive Medical Staff/Medical Executive Committee (EMS/MEC)

Peer Review Committee

- Investigates complaints/concerns reported to the committee
- Makes recommendations to EMS/EMC



The Review Process



Credentialing



"My credentials? Well, I once sat through a taping of the Dr. Phil show."



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Credentialing and Privileging

Primary Source Verification: verification from *the original source*

- Education
- Training
- Certification
- Licensure
- Experience (*current/past program directors, chairs, peers*)
- Hospital Affiliations
- Special Qualifications
- Clinical Competency
- External Queries (*NPDB, OIG, SAMs*)



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Medical Staff Credentials Committee

Duties

- Review the credentials of all Applicants and Members applying for initial appointment, reappointment, and clinical privileges. Review information on applications for appointment and reappointment and communicate with references where appropriate
- Review any reports referred by the Executive Medical Staff Committee, Medical Information Committee and the Hospital Quality Improvement and Patient Safety Committee that may concern the professional or clinical competence of Members and...make recommendations to the Executive Medical Staff Committee regarding privileges of any Members



Medical Staff Credentials Committee

Duties cont.

- Review and recommend initially and biennially or more frequently, if the Committee determines this to be necessary, the extent to which Non-Member Practitioners will be permitted to exercise Collaborative Clinical Privileges in the Hospital
- Review requests for and make a written report to the Executive Medical Staff Committee on the initial and continued exercise of Collaborative Clinical Privileges for Non-Member Practitioners
- Identify any trends with OPPE that would trigger an FPPE and monitor compliance with FPPE



Professional Performance Evaluation: The Joint Commission

MS.08.01.01

The organized medical staff defines the circumstances requiring monitoring and evaluation of a practitioner's professional performance

MS.08.01.03

Ongoing professional practice evaluation information is factored into the decision to maintain existing privilege(s), to revise existing privilege(s), or to revoke an existing privilege prior to or at the time of renewal



Peer Review



"Four out of five doctors agree...
what's your problem?"



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Peer Review: The Joint Commission

MS 09.01.01

The organized medical staff, pursuant to the medical staff bylaws, evaluates and acts on reported concerns regarding a privileged practitioner's clinical practice and/or competence



Medical Staff Peer Review Committee

Duty

The Peer Review Committee shall investigate all matters brought to its attention and shall issue a report on each matter to the Executive Medical Staff Committee



Possible Peer Review Outcomes

- Dismiss allegations/concerns
- Recommend restoration of clinical privileges following a suspension
- Issue a letter of warning, admonition, censure or reprimand
- Recommend specific remedial measures (e.g. training, education, counseling)
- Recommend proctorship or specific period of probation w/ appropriate terms and conditions*
- Recommend a reduction of clinical privileges*
- Recommend a specific period of suspension or termination of clinical privileges*
- Recommend a specific period of suspension or termination of membership*

** Member has right to hearing*



The Evolving Medical Staff: Strategies for Transforming Organization and Performance



The Drivers

- Outpatient and community based care instead of hospital-centric care:
 - Economics
 - Diagnosis Related Group/Ambulatory Payment Classification (DRG/APC)
 - Managed Care
 - Evidence Based Practice
 - Technology and Other Innovations
- Affordable Care Act
 - More options
 - Consumer choice
 - Competition
- Improve Patient Experience
 - Better access
 - Standardized practices
 - Better throughput
 - Physician-Patient relationship
- Improve Provider Experience
 - Explicit expectations
 - Fulfill mission while acknowledging strengths and interests



Medical Staff Strategies

1. Unified Medical Practice
 - System/Enterprise View
 - Standard Requirements and Expectations
 - Staffing Flexibility
2. Clinical Effort Agreements
 - CART (Clinical, Administrative, Research, Teaching) Balance
3. Benchmarking Performance
 - Public Hospital Compare Groups
 - UHC Compare Group
 - Specialty-specific Compare Groups
 - Relative Value Units (RVUs)
 - Physician Scorecards



RVUs: Relative Value Units

- Medicare sets reimbursement rates for each Current Procedural Terminology (CPT) code assigned to every physician encounter
- Physicians' services are counted in RVUs
- Based on:
 - Physician work (expertise, time and technical skill)
 - Practice expense (cost to operate a medical practice)
 - Professional liability insurance expense (relative risk of services/cost to insure against the risk of loss in providing the service)



RVUs and Medical Practice

- RVUs can be used as a measure of physician performance in order to calculate physician compensation
- Advantages of using RVUs as a measure:
 - RVU is independent of physician charge schedules, patient insurance coverage, reimbursement fee schedules assigned by any payor for any CPT code, or the practitioner ability to collect reimbursement for any physician encounter
 - RVU method of measurement reflects the reality that every patient encounter is not equal



Medical Staff Strategies *(cont.)*

4. Branding and Marketing

- Physician Group Identity

5. Provider Enrollment

- Managed Care/Third Party Plans

6. Succession Planning

- Recruitment
- Retention
- Professional Development



Challenges

- Rapidly Changing External Environment
- Competitive Hiring Market
- Culture and Buy-In
- Lack of Incentivization
- Separate Medical Staffs/Bylaws
- Definition/Quantification of Effort
- Reliable Data
- Maintaining Momentum/Competing Priorities



Questions?



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APPENDIX



Stroger Hospital Credentials Committee

Name	Specialty
Fidel Abrego, MD	Obstetrics & Gynecology
Steven Bonomo, MD	General Surgery
Gail Floyd, MD	Family Medicine
Peter Hart, MD (<i>Chair</i>)	Internal Med/Nephrology
Kimberly Nagy, MD	Trauma Surgery
Zahra Naheed, MD	Pediatric Cardiologist
Isam Nasr, MD	Emergency Medicine
Thomas Patrianakos, DO	Ophthalmology
Harry Richter, MD	General Surgery
Marin Sekosan, MD	Pathology
Kyle Telander, PhD	Psychiatry
Kwyon Yoo, MD	Radiology



Provident Hospital Credentials Committee

Name	Specialty
Camille Billingslea, MD	Family Medicine
Clifford Crawford, MD	Medical Administration/Surgery
Valerie Hansbrough, MD	Obstetrics & Gynecology
Anwer Hussain, DO	Emergency Medicine
Mark Krause, MD	Anesthesiology
Angel Leake, MD	Internal Medicine
Charlene Luchsinger	Medical Staff Services
Suja Mathew, MD	Internal Medicine
Feinan Shi, MD	Pathology
Pierre Wakim, DO (<i>Chair</i>)	Emergency Medicine
Javeria Qureshi, MD	Surgery



Medical Staff Peer Review Committee

JHS Committee

Name

Mary Jo Atten, MD

Helen Straus, MD

Jennifer Blumetti, MD

Rosibell Arcia Diaz, MD

Benjamin Mba, MD

Paul Severin, MD

Abayomi Akintorin, MD - *Chair*

Specialty

Medicine

Emergency Medicine

Surgery

Pediatrics

Medicine

Pediatrics

Anesthesiology

PH Committee

Ad hoc membership (3 or more; 2 medical staff members)



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