

Healthcare Workforce Strategic Planning Taskforce

June 15, 2011 – Minutes

Thursday, June 23, 2011

ACHI – Lake Ouachita Conference Room

Convener: Suzanne McCarthy
Leaders: Dan Rahn & Joe Thompson
Invited Guests: William Golden, Bob Griffin, Beth Hennessey (conference call presentation)
Attendees: Omar Atiq - AMS, David Wroten – AMS, Ann Bynum-UAMS-Regional Programs, Ed Franklin – AATYC, Susan Hanrahan – ASU, Linda McIntosh-ANA, Mark Riley-APA, Billy Tarpley, ASDA, Jean Zehler-ANA.
ACHI Staff: Arlo Kahn, Kenley Money, Shanoa Miller, Craig Wilson, Rhonda Hill, Hannah Vogler
Guests: Gene Gessow, Vic Snyder

Welcome: Dr. Rahn

Blue & You Grant: Suzanne McCarthy

- Enables ACHI to :
 - Look at primary care, specialists, subspecialists: FTEs, practice sites, third party payers
 - Conduct a consumer survey
 - Look at APNs educational process and practice locations

Ten Year Age Adjusted Mortality Rates for Arkansas: Kenley Money

- Will use HDI data and expand to areas of interest
- Will extrapolate on workforce needs
- Will complete analytical plan by mid-July.
- Will include primary care, specialists, APNs, PAs and other health care providers
- Will look at the validity of the data

Goals and Expectations of the Strategic Plan: Dr. Joe Thompson

- Payment System Reform
 - Review of ACA timeframe and expansion of Medicaid and uninsured populations
 - Issues for workforce – focus on primary care locally and specialists regionally
 - Only legislative opportunity will be in 2013

Payment System Improvements

- Presentation by William Golden, MD, Professor of Medicine and Public Health, UAMS; Medical Director, Arkansas Medicaid Enterprise, ADHS. “Shaping the Future” [..\..\Workforce Resources\110615 Shaping The Future Dr. Golden PP.pptx](#)
 - Key Concepts of Health Care Reform
 - Arkansas Issues
 - Decisions on how to deliver services

- Discussion by Joe Thompson, MD, Surgeon General and Director, Arkansas Center for Health Improvement. Impact of workforce and workforce development/private sector
 - Arkansas moving from fee- for- service to payment bundling
 - ACA push to team based care, coordinated payment and EHR
 - Initial areas of potential public and private sector group bundling – pregnancy, neonatal services, high utilizers - chronic disease patients
 - Movement toward patient centered medical home

- Discussion by Robert Griffin, MD, Senior V.P. and Chief Medical Officer, Arkansas Blue Cross Blue Shield. Impact of workforce and workforce development/private sector
 - Margins of expense and profits
 - Arkansas BCBS's goal is to support Arkansas
 - General Strategy: change health care reimbursement to reward quality and outcome more than procedures and services.
 - Things to address:
 - Private payer methodology
 - Aging providers/delay retirement
 - Encourage more providers into the workforce
 - Cost of care including over and under utilization of services
 - Strong evidenced based policies
 - Improvement in health literacy
 - Teaching and educating patients.

- General Discussion on Impact of ACA
 - Payment reform focus on current cost drivers exceeding our ability to pay
 - Workforce group focus on delivering care to influx of uninsured to insured
 - Integration/coordination of care
 - Use of technology
 - Use of teams
 - Assumed maldistribution of providers
 - Assumed – providers not practicing to the top of their abilities
 - How do we get ready for 2014 with the most efficient use of financial and health care resources?
 - Issues of prevention, patient navigation, reductions in cost for high risk care, hospital readmissions, community settings for LTC - can be addressed under patient centered medical homes
 - Additional data/infomation requested:
 - claims data for RNs
 - capacity of the system

Care Coordination

- Presentation by Beth Hennessey, RN, MSN, Executive Director of Integrated Chronic Care at Sutter Care at Home - "There's a New World Emerging" . <..\..\Workforce Resources\110615 Beth Hennessey PP presentation.ppt>
 - Care Coordination
 - Reversing the flow of health care with the patient needs at the center
 - innovative model of care for effective care coordination and positive outcomes
 - need for care coordination when patient see multiple doctors, are prescribed many medications and are given a variety of care instructions
 - Goals
 - Improvement in rehospitalization rates
 - Positive patient experience, quality outcomes and cost control
 - Coordination of the health care team, patient, and family/care givers for optimum outcomes
 - Maximize use of technology for the team and the patient
 - Retool health care providers to implement uniform best practices and encourage patient self-management

Summation/Closing Comments

- Use the current health system change as an impetus to realign the system so that physicians aren't in the position of getting further reimbursement reductions while being expected to respond to the anticipated increases in patient volume.
- Use this as an opportunity for physicians to practice at the top of their capacity.
- Physicians need to feel a level of trust and confidence in the direction that health care system change is moving and the leadership that is driving the process.

Upcoming Meetings:

- Stakeholders Meeting: Thursday, June 23rd from 4:00-5:30. UAMS I. Dodd Wilson Bldg/Rm 126
- Workforce Core Group Meeting: July 13th from 4:00 – 5:30. ACHI – Lake Ouachita Rm.

ADDENDUM:

- Integrated Chronic Care Management (ICCM) Document Submitted by Beth Hennessey: [110615 Integrated Chronic Care Management - Beth Hennessey.pdf](#)
- Follow- up Questions from the Workforce Core Group to Beth Hennessey: [110705 Responses by Beth Hennessey to Core Group Questions following presentation.docx](#)

Meeting Notes by Pat Russell