



# Valley Baptist Health System



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## Physician Community Collaboration

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GE Healthcare



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# Today's Talk

Valley Baptist Health System Background

Physician Community Strategy

- **Why the Need?**
- **How Did We Develop the Strategy?**

Why GE is Our Prime Vendor Solutions Partner

Valley Baptist Health System's Business Model

Lessons Learned

Questions & Answers



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# Valley Baptist Health System Background

Faith-based, Not-for-Profit, Regional Integrated Delivery System based in Harlingen, Texas:

- 2 hospitals of 843 operating beds total:
  - **Valley Baptist Medical Center –Harlingen (600 Beds) and Valley Baptist Medical Center – Brownsville (243 Beds)**
- From a primary coverage area of 4 counties, Cameron, Hidalgo, Willacy, and Starr Valley Baptist Health System served in 2005:
  - **Approximately 38,040 inpatient admissions**
  - **Over 127,098 outpatient registrations, including 70,282 ED visits across the system**
- Ambulatory Surgery and Imaging centers
- Community Reference Laboratory
- Physician Hospital Organization (Valley Health Care Network) – 350 members
- Long-term care and assisted living (Golden Palms)
- Home health, Hospice and Durable Medical Equipment
- Long-term Acute Care Facilities
- Wellness Center
- Valley Health Plan (Insurance Company)



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# Valley Baptist Health System

## MISSION – Why VBHS exists:

- *Valley Baptist Health System is a community health service performing spiritually based health, education and charitable programs in accordance with the teachings and healing ministry of Jesus Christ.*

## VISION

- *Valley Baptist Health System will be a faith based regional health care system serving patients and people throughout South Texas. It will be distinguished by high quality care, outstanding service and excellent operations.*

## STRATEGY

- *As Valley Baptist Health System moves toward the future, we focus on five strategic initiatives in order to achieve a shared vision to accomplish our mission as the leading health care provider in South Texas:*
  - Integration
  - Simplicity
  - Six Sigma
  - Relentless Service
  - Service Expansion and Regionalization



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# Physician Community Strategy



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# Why the Need .....

Government Moving in that Direction

- Bush's Mandate 01/2004
  - **Electronic health information infrastructure within 10 years**

Integral part of VBHS' organizational strategy surrounding integration

Requirement for Pay for Quality program for Valley Health Plans

Recruitment of new MDs

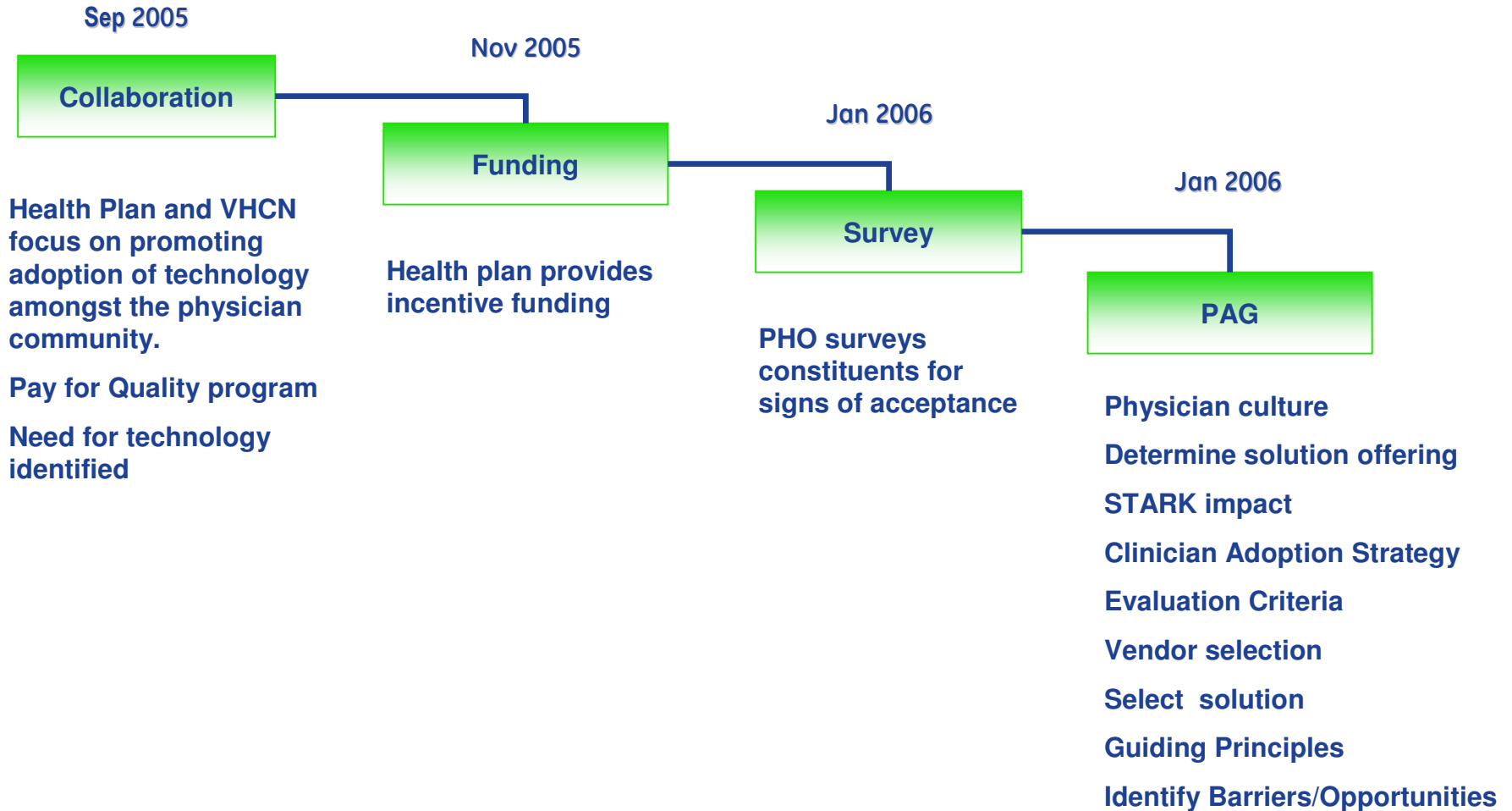
Office Practice Efficiencies

Patient Safety



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# Strategy Process



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# Physician Community Strategy

What Physician Barriers and Opportunities were Identified?

What was the best model that would give us the greatest flexibility to meet the physician community needs as well as achieve our strategic initiative of INTEGRATION?

- **Standalone**
- **Hybrid**
- **Integrated**



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# Physician Community Guiding Principles

VBHS will use technology to redefine the delivery of healthcare in South Texas by aligning with the acknowledged fundamentals of highest quality patient care:

## Six Areas of Concentration

- *Reduce Waste and Cost*
- *Increase Clinician Productivity & Satisfaction*
- *Improve Quality*
- *Enhance Patient Safety*
- *Improve Management of Chronic Diseases*
- *Speed of New Knowledge to the Market*

## Design Considerations

- *Patient & Physician Centric*
- *Ease of Use & Accessibility*
- *Evidence-Based Medicine*
- *Integrated Solution*
- *Standardization*
  - *Pay for Quality Program(s)*
  - *Data*
  - *Formats*

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# Physician Barriers & Opportunities Identified

## Barriers

- Financial Outlay
- Time Costs (Doctor/Staff)
- Confidentiality and Security (HIPAA)
- Workflow Disruption
- Interfere with doctor-patient communications
- Learning of new technology
- Lack of technical support
- Lack of perceived benefits
- Lack of standards MD Culture

## Opportunities

- Process Efficiency – Workflow Redesign
- Lower Overhead
- Increased Reimbursement
  - More accurate coding & recovery
  - Increased patient throughput
  - Pay for Quality Incentive Programs
- Increase proactive management of Chronic Diseases
- Increase in availability and accessibility of data/information
- Increase in patient safety through more accurate and timely information

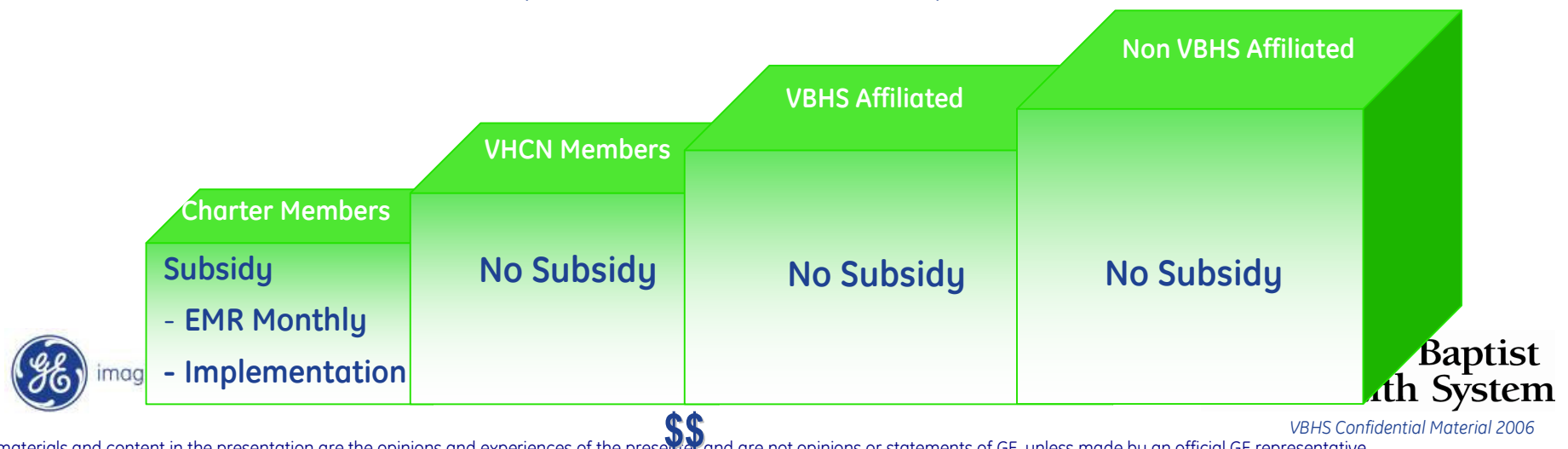


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# Physician Community Strategy

What would the model look like?

- Organization Structure
- Delivery Approach
- Offering
  - EMR Only
  - EMR & PM
- Pricing structure
  - Charter Members – (Members of PHO responding by deadline)
  - VHCN Members – (Members of PHO *not* responding by deadline)
  - VBHS Members – (Physicians associated with VBHS but not PHO members)
  - Non-VBHS Affiliated – (No affiliation with VBHS)



# The Outcome of Our Strategy Sessions .... A Comprehensive Integrated Solution



## *Software*

- EMR
- Practice Management
- Reporting
- Coding
- Document Imaging



## *Devices*

- Notebooks
- PDAs
- Tablet

## *Integration*

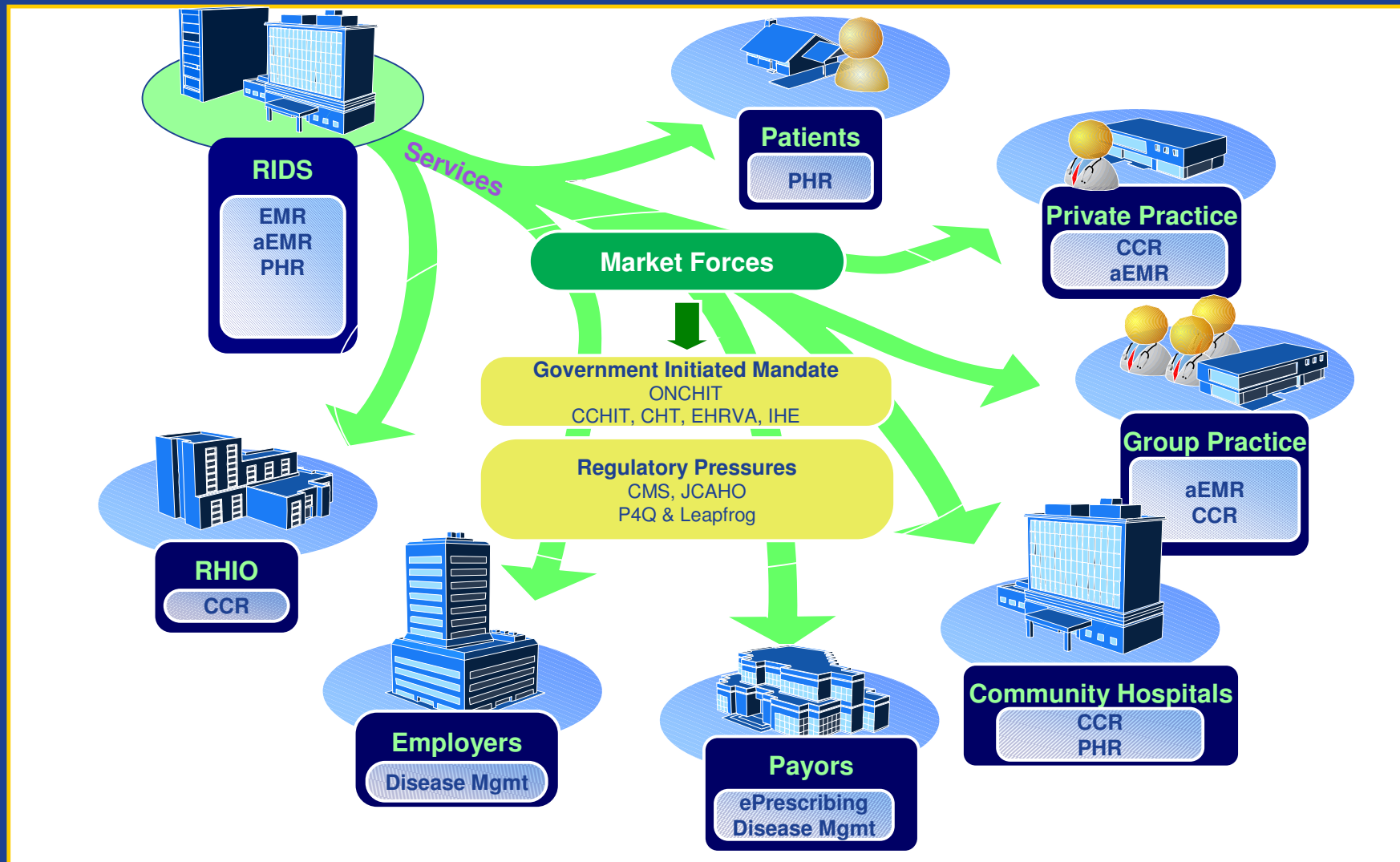
- Transcription
- Lab
- Radiology
- Health System



## *Physician Portal*

- Messaging
- E-Health
- E-Prescribe

# ...with an Regional Integrated Delivery System (RIDS) as a hub connecting the various stakeholders



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Source: GE Healthcare IT Solutions

# Why GE Healthcare?



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# Why GE Healthcare ?

Overall GE Healthcare scored well on our evaluation criteria:

- **VBHS Short & Long-Term Strategies, I/T Guidelines, Partnership, Vendor Viability, Functionality, Technology, Cost and Certification by the Certification Commission for Healthcare Information Technology (CCHIT)**
  - CONCERN: GE's ability to integrate the Centricity EMR functionality with Centricity Enterprise

External due diligence and additional customer insights validated key aspects of GE Healthcare:

- **Integrated solutions are very powerful especially when coupled with Centricity Enterprise**
- **Internet technology is a GE cornerstone**
- **Proven support of integrated information exchange**
- **Certification from CCHIT**
- **Longevity in marketplace**

Valley Baptist Health System is well leveraged to maximize our GE relationship and is positioned to take advantage of further solution integration and other programs such as RHIOS, P4Q, etc.



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# Application of the Business Model



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# Application of the Business Model

## Marketing & Delivery Team

- PHO & Physician Liaisons (marketing)
- IT Director (delivery)
- Internal/External resources

## Letter Of Intent (LOI) to physicians

- Gauges interest
- Reserves slot in the site assessment queue
- Establishes a relationship with the practice

## Site Assessments

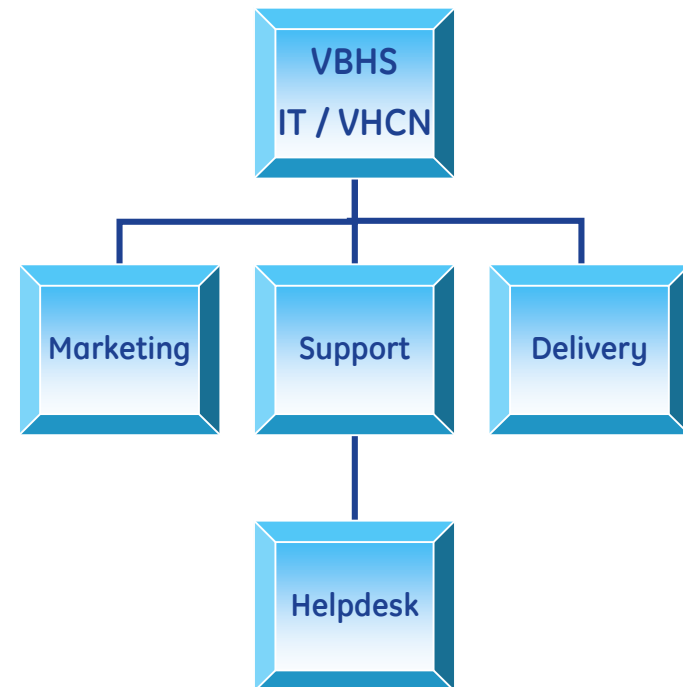
- Identify hardware & networking needs
- Identify conversion needs
- Identify interface needs

## Assessment Results

- Requirements documented
- Pricing provided

## ASP agreement

- Reserves slot for implementation



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# Where are we today?

Marketing effort is ramping up

- On site demos being requested by physicians every week
- Larger audience sessions planned
- Establishing relationship with each office

32 LOIs to date (92 physicians)

- **22 site assessments completed**
  - Large Community Health Clinic
  - Podiatry
  - Plastic Surgery
  - Neurology
  - Large multi-specialty clinic
  - Pediatric
  - Women's Health
  - Pain Center
  - Nephrology
  - Allergists
  - Orthopedics
  - Gastroenterology
  - Oral Surgery
  - Ophthalmology

Implementations (pending site assessment results)

- **4 - 1 physician practices poised for PM implementation by Jan; EMR will follow**
- **1 - 32 physician clinic w/3 satellite sites poised for PM implementation by Jan; EMR will follow**



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# Lessons Learned



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# Lessons Learned

## ***People***

- Get the right resources for the team – style; knowledge and experience
- Physicians and their practice personnel must embrace and accept ownership of product content
- Utilize awareness seminars and on site demonstrations
- Know who are primary support back-up and know the implementation model. Tweak it as necessary to fit within your culture
- Understand how physicians and clinicians use information to support decision making
- Establish relationships with physicians early on (especially office manager)

## ***Process***

- Internal/external legal review of documents prior to offering solution
- Appoint operational process owners
- Develop and implement documentation standards

## ***Technology***

- Spec hardware appropriately - don't underestimate the demand



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For additional information please contact:

Bryant Castelton  
GE Sales Executive

[Bryant.Castleton@ge.com](mailto:Bryant.Castleton@ge.com)

210-483-9448 (W)

210-884-9079 (Mobile)



# Upcoming Centricity EMR Webinar:

Please join us for a Webinar event featuring: Centricity®  
Electronic Medical Record (EMR):

**Thursday, November 16<sup>th</sup> 2:00 pm Eastern, 1pm Central (1 hr)**

*Designed by clinicians, for clinicians*, this system fits the needs of both providers and administrators. Learn how Centricity Electronic Medical Record (EMR) can help to eliminate the chart chase, streamline patient visits, increase the accuracy and accessibility of documentation, and improve patient care and provider satisfaction.

**To register, please email [samantha.stetson@ge.com](mailto:samantha.stetson@ge.com)**



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