

Transforming Physician Relations: The Why, the How and the Results

Becky Lathrop | Director Physician Liaisons | IU Health

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Agenda

- Getting to the “why”
- Transform, transition or tweak?
- The IU story
- Your questions

“THE SECRET OF
CHANGE IS TO FOCUS
ALL OF YOUR ENERGY,
NOT ON FIGHTING THE
OLD, BUT ON BUILDING
THE NEW.”

— SOCRATES

Learning Objectives

1. **Discover a process for assessing** where you are, where you need to be and what to do to get there
2. **Gain leadership buy-in** and support when transforming your strategies and infrastructure
3. **Develop a high performing team** and share the impact the transformation has made

What's Happening...

76% of hospital CEOs and leaders are growing their networks by more than **25%** and will likely do so for the next 5 years

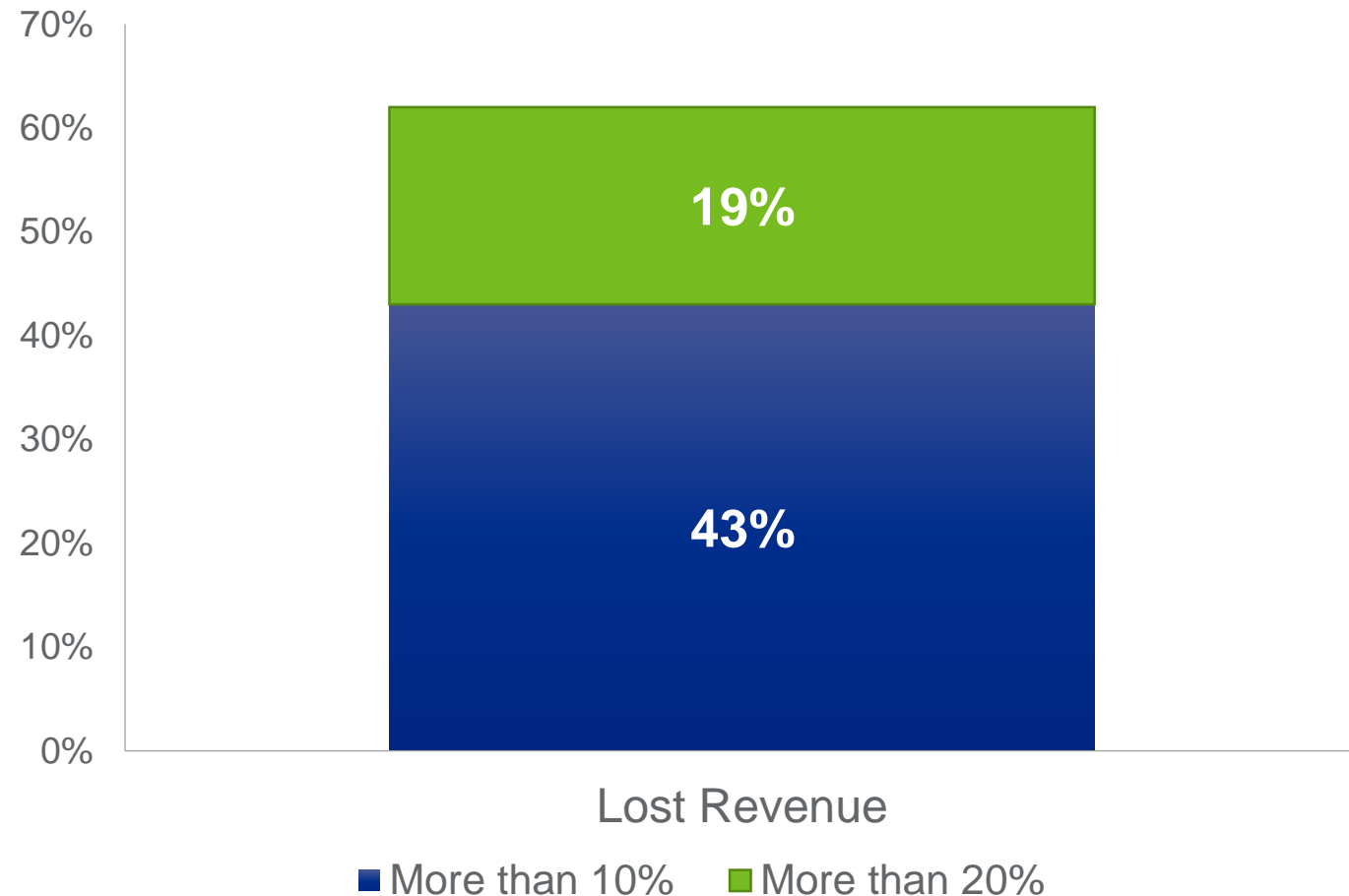
What does that mean for physician relations?

Are We Getting Better at Controlling Leakage?

According to a recent study...

23% don't track or don't know

Fibroblast Study conducted by Sage Growth Partners, August 2018



Physician Relations is changing but is it enough?

2/3+ of programs have increased their attention and focus on meeting growth goals

Conversations

with physicians is the most effective field tactic

But... Liaisons spend the majority of their time on office visits

Significant challenges physician relations programs will face in the future...

Top three responses:

- Access to meaningful data (57%)
- Access/time with physicians (52%)
- Capacity and Access (45%) **New!**
- Measuring ROI (40%)

When and Why

When: *All the time*

Why: What's changing in the market?

What does my organization need that physician relations *only* can provide?

What needs to change in physician relations to provide greater value?

- Do I need to transform, transition or tweak?
- Don't be afraid to course correct
- Make the difficult decisions
- Establish performance standards that are consistently met
- Constantly improve! Tie your change to changes in strategic direction

How.

- **Situational audit** is a type of SWOT analysis in which specific elements of the business are analyzed- market factors, competitive factors, environmental factors and internal look at strengths and weaknesses
- A **strategic audit** is an in-depth review to determine whether your department is meeting its organizational objectives in the most efficient way. It also audits whether the company is utilizing its resources fully



Situational Audit

Where do you excel?

Where do you struggle?

Best Practice	Score	Attributes
Targeted, data-driven		<ul style="list-style-type: none">• Measurable goals• Data-driven physician targets lists
Field growth focused		<ul style="list-style-type: none">• 75% of the time in the field having conversations with physicians
Differentiation		<ul style="list-style-type: none">• Can articulate key messages of differentiation
Measures		<ul style="list-style-type: none">• Meaningful success measures in place and reported
Clinical depth		<ul style="list-style-type: none">• Deep understand of clinical content with the ability to ask the right questions to uncover needs
Talent		<ul style="list-style-type: none">• Strategic business growth thinkers• Natural sales aptitude
Leadership involvement		<ul style="list-style-type: none">• Credibility with leadership• Buy-in, support and get-it factor
System thinking		<ul style="list-style-type: none">• No siloes and/or turf wars

“Transform, Transition, Tweak” Checklist



1

Strategy

Physician relations is called out in the strategic plan



2

Team Development

The field team are strategic growth leaders that uncover physician needs and proactively position your priority products and service



3

Internal Engagement

Leadership seeks out the field intelligence provided by the field team



4

Results

Physician relations connects activity to results and consistently plays a significant role in growing business

Tell us where you are...



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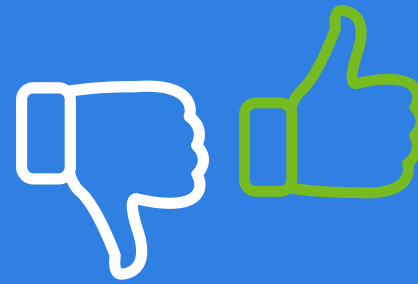


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A Strategic Must Have



Strategy

1

Advanced?

- Advanced, strategically-driven physician relationships
- Driving change in the organization based on strategic field intelligence
- Using data to uncover referral/growth opportunities
- Ability to uncover unmet needs
- Quantifiable results
- Forecasting

Struggling?

- No seat at the table for strategic growth conversations
- Doing everything “physicians”
- Concierge only focus
- Fixing problems
- Tell and sell in the field
- Liaison skillset treading water

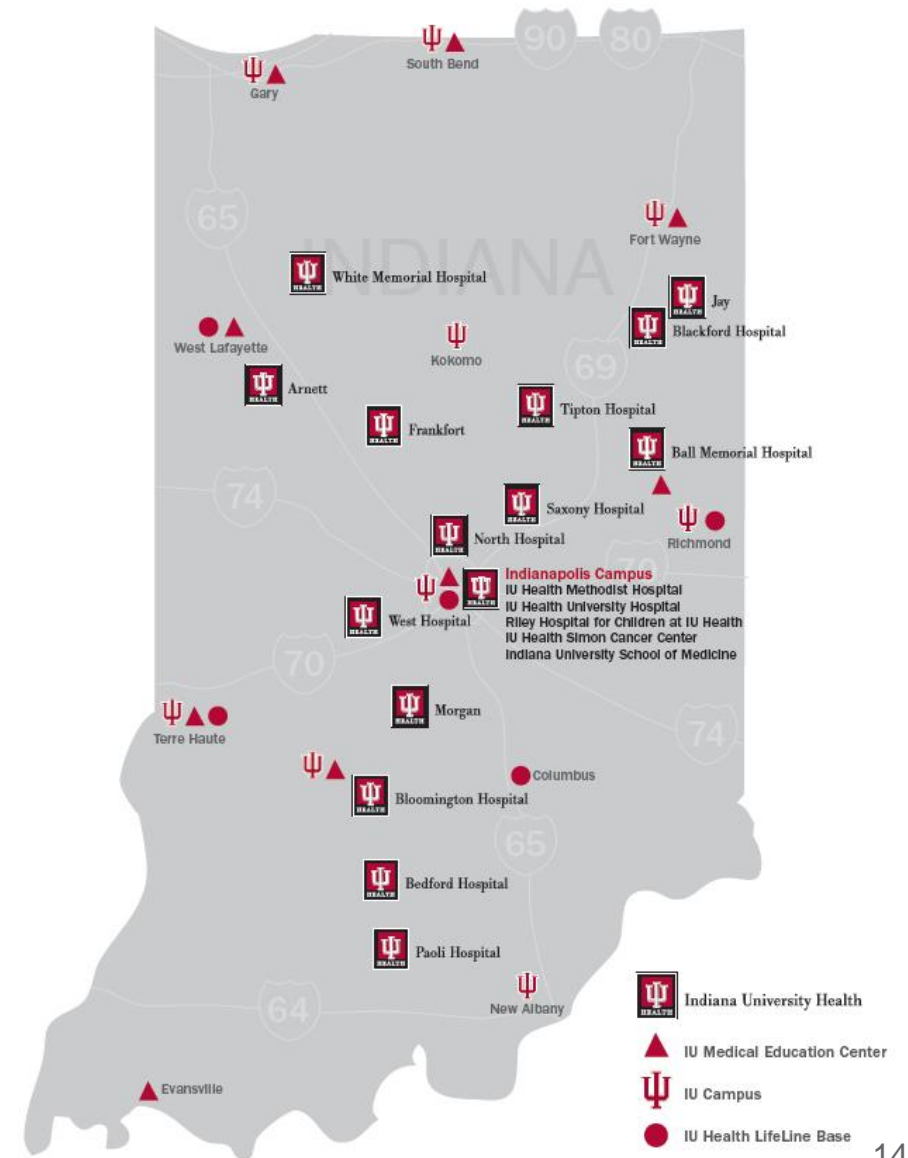
The IU Health Story

Becky Lathrop
Director Physician Liaisons

Who We Are

Indiana's Largest and Most Comprehensive Health System

- Statewide system with 15 hospitals plus health centers, physician practices, and affiliates around the state
- Affiliated with IU School of Medicine—one of the nation's largest medical schools and a national leader in medical education and research
- IU Health Methodist houses one of only two Level 1 Trauma Centers in Indiana
- Riley at IU Health houses Indiana's *only* Level 1 Pediatric Trauma Center
- IU Health Transplant is one of the nation's largest transplant programs



IU Health Physician Liaison Team

Leader/Other

Primary Care

Specialty



Becky Lathrop
Director, Physician Liaisons



Ryan Monesmith
East Central PL



Julie Simonton
Central/Morgan PL



Lucy Keller
Suburban Indy PL



Heidi Sturgeon
West Central PL



Heath LaGrange
South Central PL

Donna Grider
Specialty PL



Shawna Aliano
Specialty PL



Amy Wozniak
Specialty PL



Kelley Carreon
Pediatrics South PL



Kelisa Walker
Pediatrics North PL



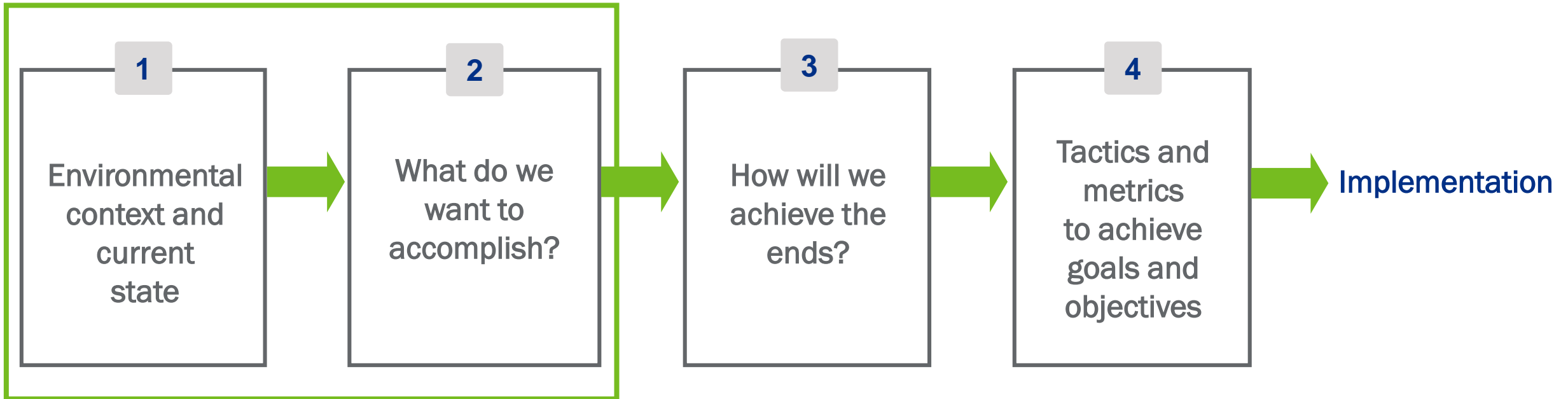
Role in Strategic Planning



Strategy

1

Strategic Plan for HPB Surgery



Who is Involved in Planning



Strategy

1

Key Functions

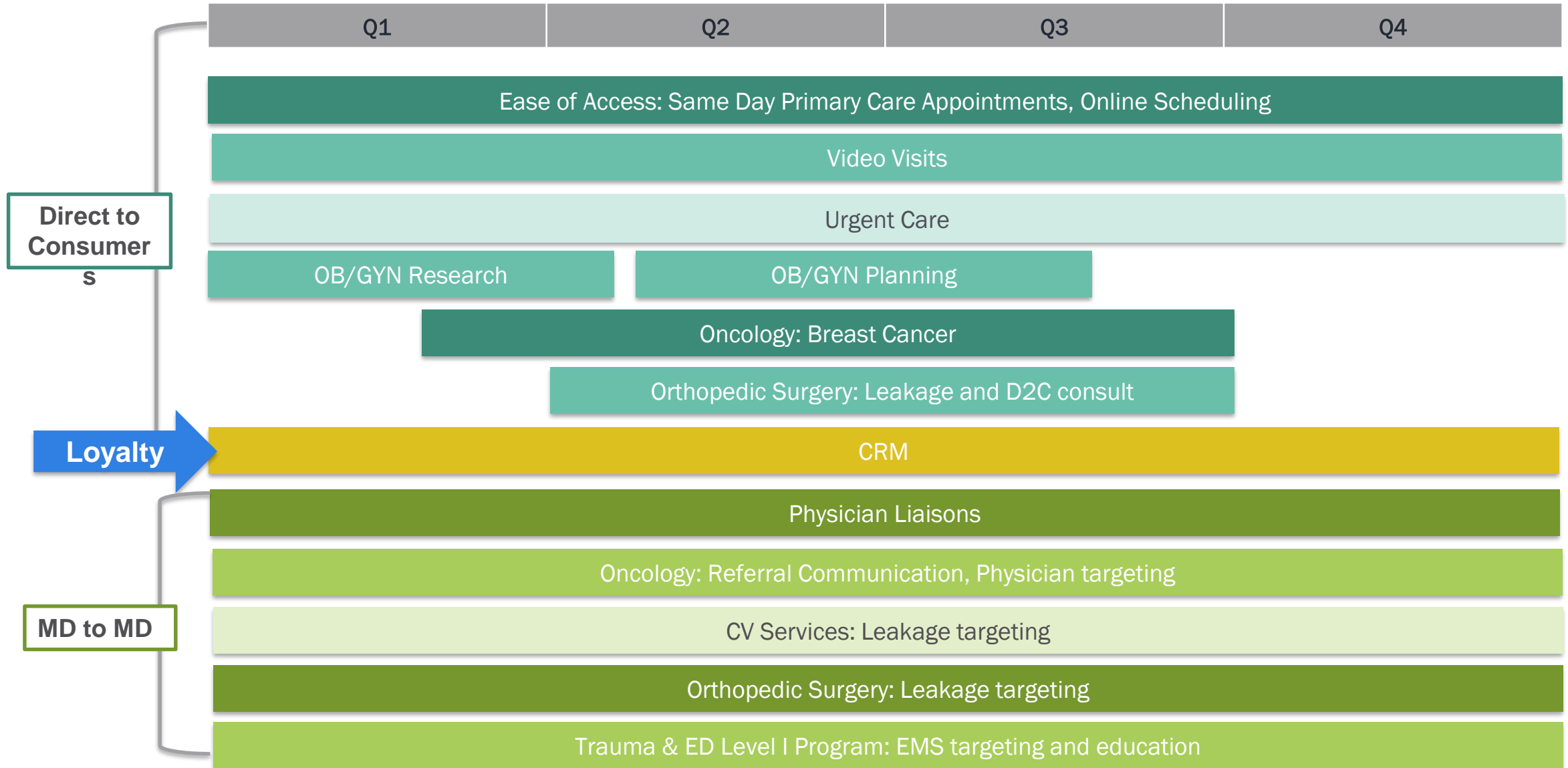
- Marketing & Communications Strategy
- Brand Asset Management
- Experience Design
- Business Unit Marketing

Key Channels

- **Physician Liaisons**
- Public Relations
- Social Media
- Internal Communications
- Digital Properties (portals, iuhealth.org, apps)
- Patient Communities

**Socialization of final plan includes:
System executives, regional business unit leaders and service area leaders**

2019 In-Market Timeline - Proposed



Strategic Change



Strategy

1

New Goal Defined after Liaison Input

- Increase overall attending revenue into the system for the Digestive & Liver Disorders (DaLD) Service Area
 - Grow: number of patients referred into DaLD (top of the funnel)
 - Grow: 4% growth goal in volume of HPB Surgeries
 - Grow: 1.4% growth goal in Attending Revenue for DaLD Service Area

Service Line Prioritization Criteria for HPB Surgery



Strategy

1

Does this service area (HPB surgery) grow profitable volume for the system?

Area	Question	Answer
Operating Margin	Will these specialty areas grow revenue for the system?	YES (significant contribution margin)
Access	Do we have the capacity to take on more volume in this area?	YES
	How long are new patients waiting for this specialty? Look at Median Lag time to next appointment	LESS THAN ONE WEEK
Star Rating	How are our service ratings within this specialty? Are we currently delivering above average service (>4.63), average service (4.63), or below average service (<4.63)? Patient experience matters to referring providers as well	YES – above average
Liaison Input	What are the attitudes/beliefs of the referring providers (perhaps not demonstrated in the data)? What is the referral pattern? Is there any additional competitive intelligence that should be considered?	Gastroenterology is the primary referral source – therefore consideration should be given to promotion of the entire service line (Digestive & Liver Disorders). Cannot go into referring provider and only focus on HPB Surgery.

Tell us where you are...



Strategy

Physician relations is called out in the strategic plan



Team Development

The field team are strategic growth leaders that uncover physician needs and proactively position your priority products and service



Internal Engagement

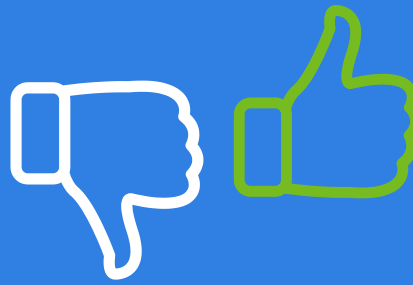
Leadership seeks out the field intelligence provided by the field team



Results

Physician relations connects activity to results and consistently plays a significant role in growing business

Field Talent and Skills



Team
Development

2

Advanced?

- Strategic “growth” thinkers
- Driven by the “sale”
- Gets the data they need, knows what to ask for and what to do with it
- Eager to learn
- Sees a challenge as an opportunity
- Sells to internal stakeholders
- Growth/volume/quality focus

Struggling?

- Not having conversations with physicians
- No strategy or sales plan for how they plan to achieve their goals
- Complains about [fill in the blank]
- “I could do better if “you” would_____”
- Uncomfortable with ride-alongs
- Customer service focus

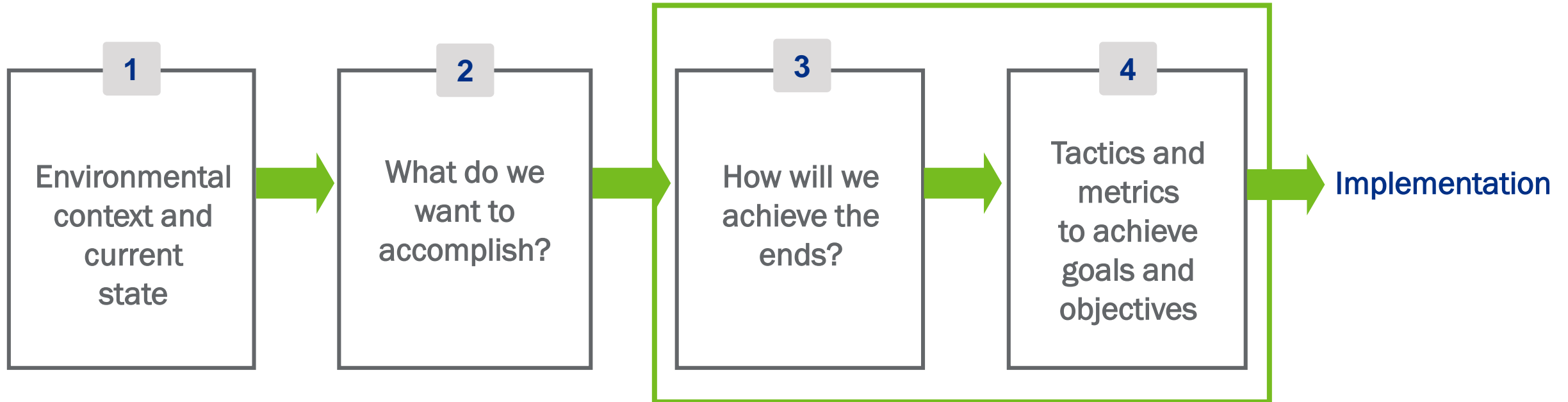
Team Restructure



Team
Development

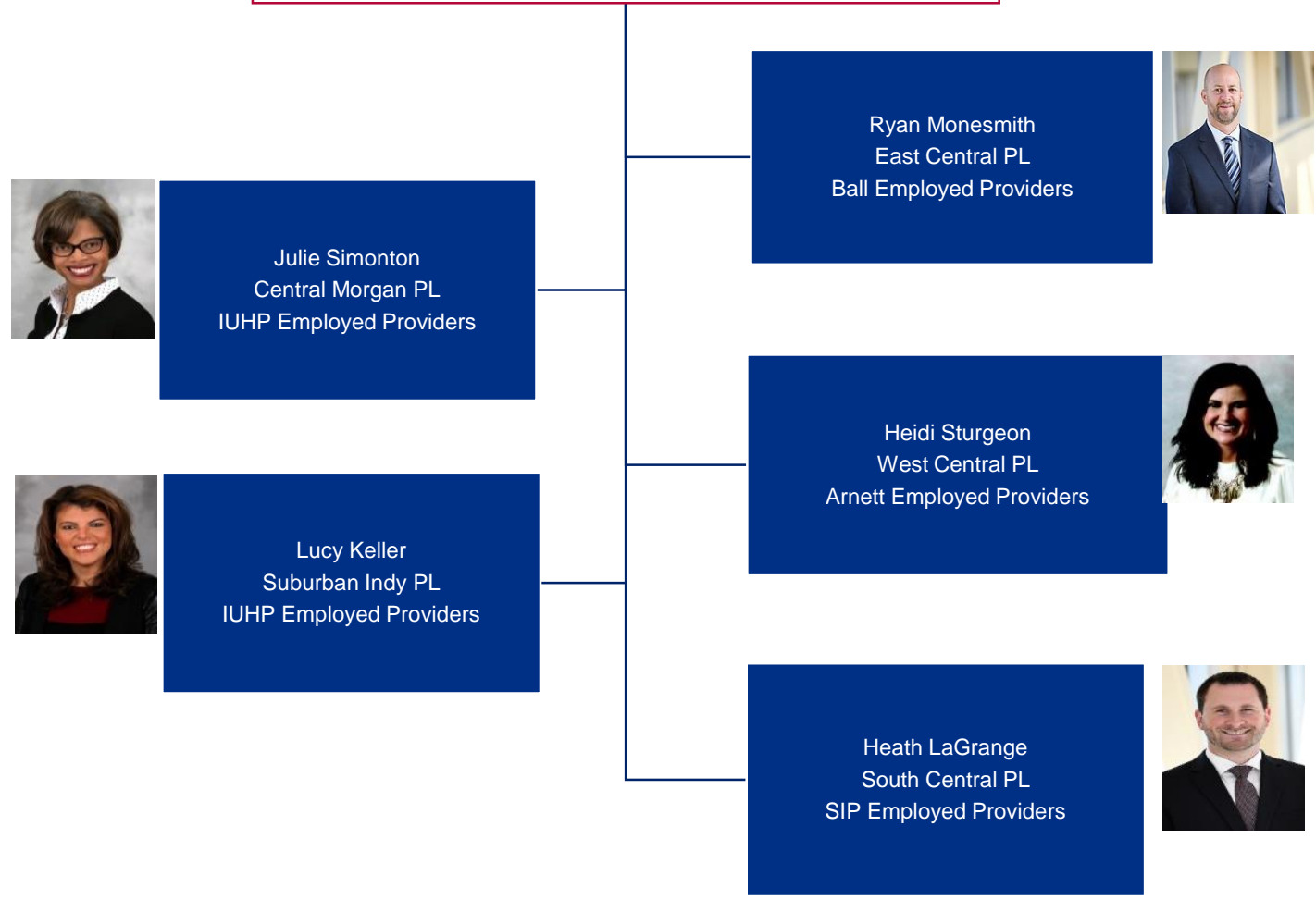
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“Retention” Growth Strategy for Physician Relations

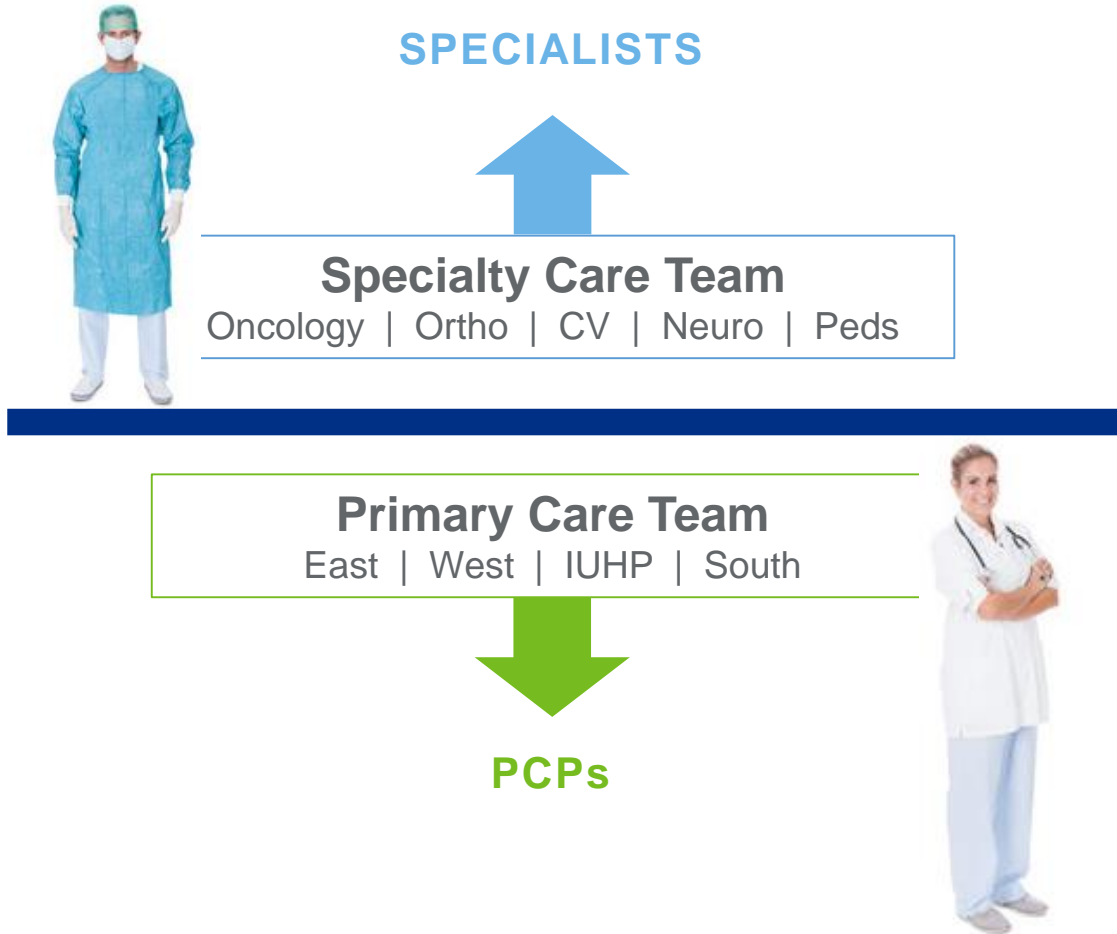




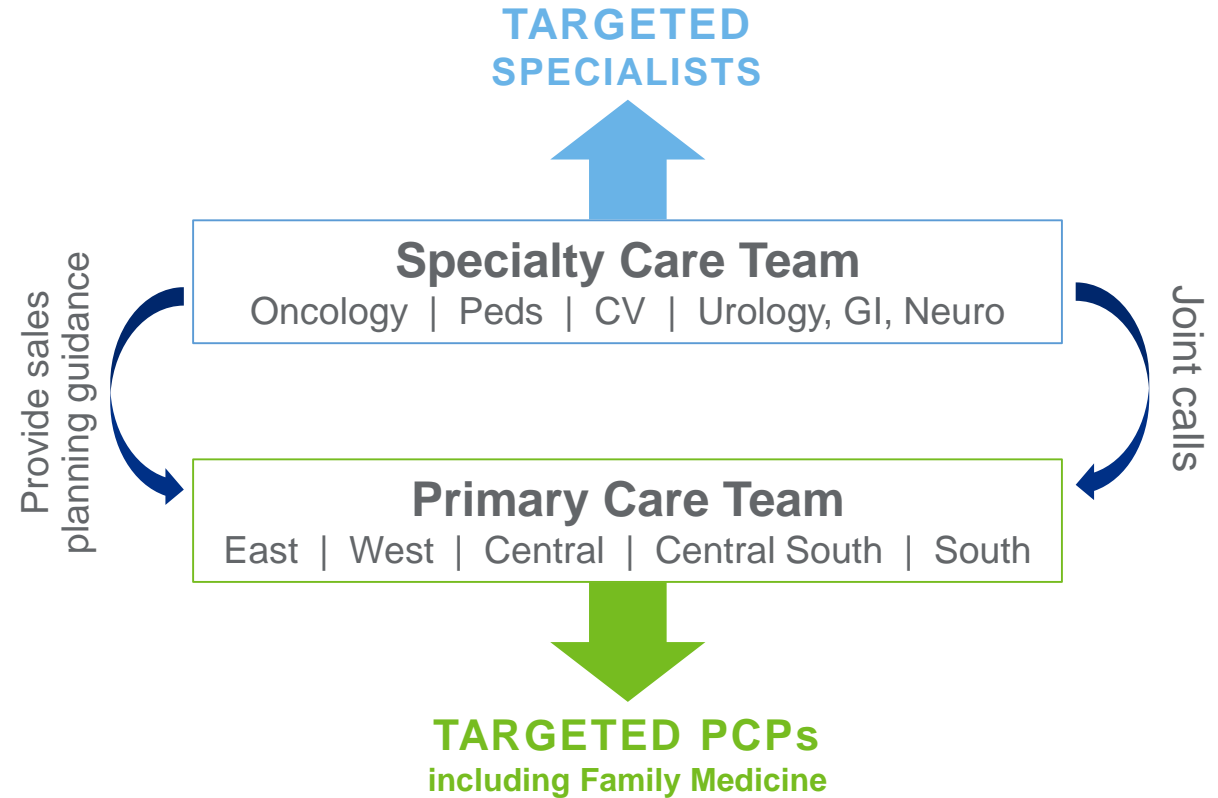
Primary Care Liaison Team IU Health Physician Liaisons



Before (2017)



After (2018)



Additional Changes:

- Eliminated Ortho Specialty
- Added another PCP liaison
- Provided hierarchy for career development/accountability with cross-functional role of Specialty Liaison

Primary Care Physician Liaison Targeting



Team Development

2

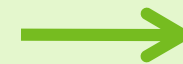
Step 1

Identify Revenue Flow & Referral Relationships

PCP \$\$\$



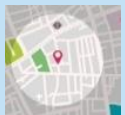
Referring Specialist \$\$



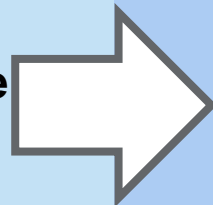
Attending Specialist \$

Step 2

Apply Filters*



- Employment – include all IUH PCPs
- Geography
- Leakage
- Share of Revenue
- Payer Mix



Step 3

Review Targets



Physician Liaison & Business Units review

Step 4

Track Revenue

PCP: % IUH referral revenue



Quarterly Revenue Growth Report

*Goal is 150-175 physician targets per Physician Liaison

Leakage Dashboard – Service Line Specific

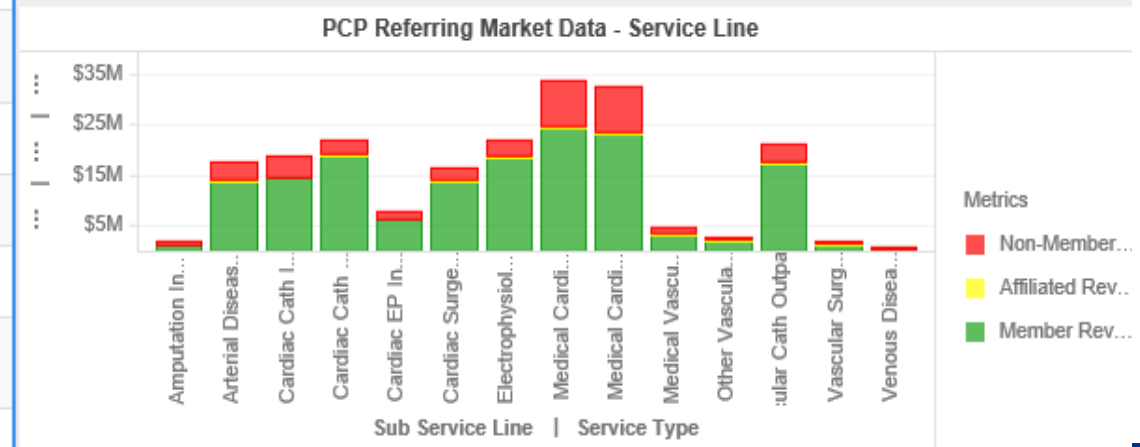


Team Development

Referring Market Data - Physician Information						
Employment Status	Name	Physician Employment Status	Est. IUH Rev	Est. Affiliated Rev	Est. Comp Rev	Est. Total Rev
			\$160,711,968	\$869,993	\$41,986,863	\$203,568,825
		IU Health Physicians	\$5,338,353	\$1,904	\$385,615	\$5,725,872
		IU Health Physicians	\$1,831,234	\$358	\$1,696,586	\$3,528,178
		IU Health Physicians	\$3,238,354	\$1,504	\$64,148	\$3,304,006
		IU Health Arnett Physicians	\$1,894,390	\$32,727	\$1,249,816	\$3,176,934
		IU Health Arnett Physicians	\$1,625,292	\$23,104	\$1,282,831	\$2,931,227
		IU Health Physicians	\$1,840,675	\$900	\$632,319	\$2,473,894
		IU Health Physicians	\$2,145,059	\$684	\$119,272	\$2,265,015
		IU Health Physicians	\$1,536,789	\$565	\$672,514	\$2,209,867
		IU Health Arnett Physicians	\$1,289,945	\$7,563	\$722,036	\$2,019,545
		IU Health	\$1,655,131	\$656	\$332,686	\$1,988,473

PCP Downstream Facility				
Facility	Est. Member Rev	Est. Affiliated Rev	Est. Comp Rev	Est. Total Rev
Total	\$160,711,968	\$869,993	\$41,986,863	\$203,568,825
Hospital A	\$62,160,780	\$0	\$0	\$62,160,780
Hospital B	\$22,048,735	\$0	\$0	\$22,048,735
Hospital C	\$14,140,474	\$0	\$0	\$14,140,474
IU Health Bloomington	\$13,986,488	\$0	\$0	\$13,986,488

Service Type		
(All)	Inpatient	Outpatient



Leakage Dashboard – Provider Specific



Team Development

2

PCP Referring Market Data - Physician Information

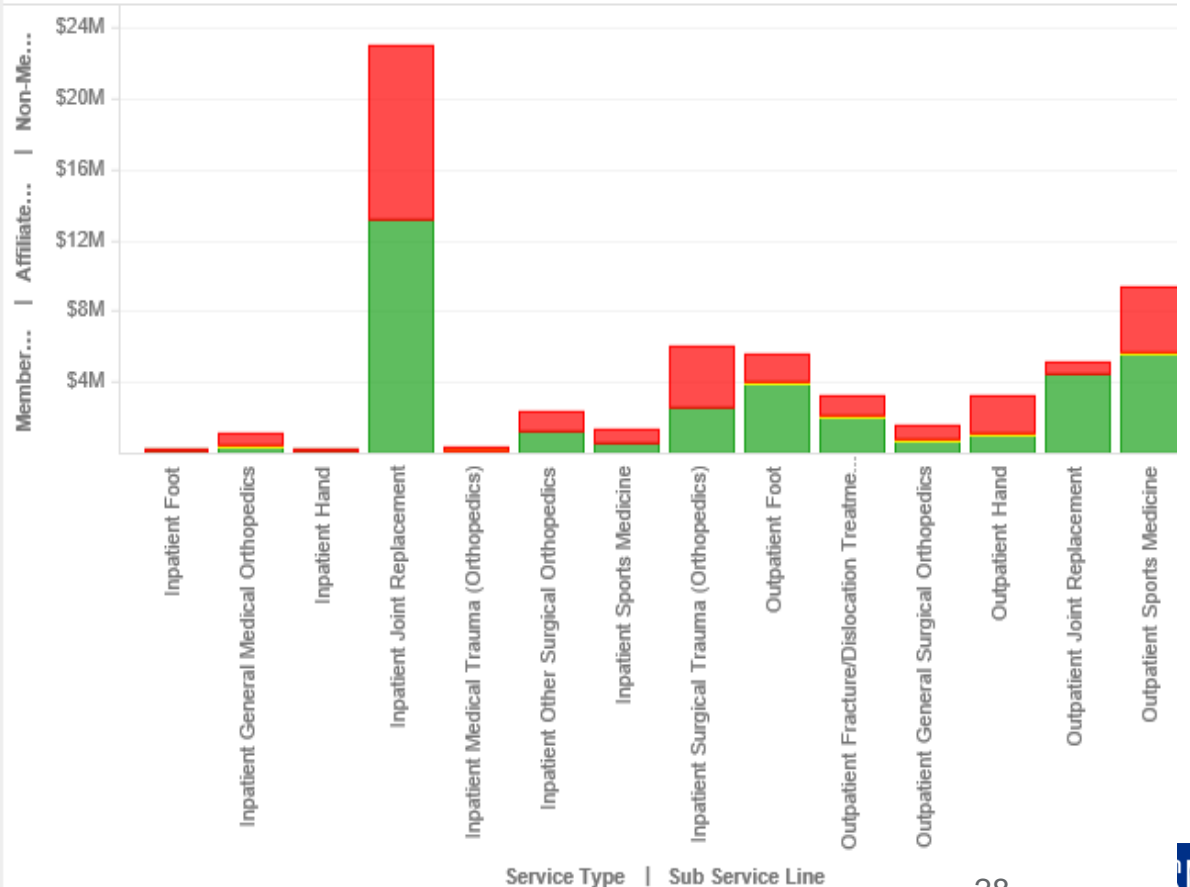
Physician Name	Est. IUH Rev	Est. Comp Rev	Total Revenue (PCP/Referring)	Est. IUH Rev Share
Total	\$36,381,427	\$25,934,878	\$62,435,540	58.46%
Dr. A	\$87,846	\$821,677	\$909,523	9.68%
Dr. B	\$69,811	\$8,114	\$78,458	89.66%
Dr. C	\$775,958	\$357,546	\$1,133,504	68.46%
Dr. D	\$1,228,829	\$304,438	\$1,534,942	80.17%
Dr. E	\$495,137	\$61,279	\$556,416	88.99%
Dr. F	\$463,356	\$205,626	\$669,621	69.29%
Dr. G	\$139,338	\$20,409	\$164,041	87.56%

PCP Downstream Facility

Facility	Est. Total Rev	Est. IUH Rev	Est. Comp Rev
Total	\$62,435,540	\$36,381,427	\$25,934,878
Hospital A	\$9,557,359	\$0	\$9,557,359
Hospital B	\$9,223,546	\$9,223,546	\$0
Surgery Center A	\$6,740,241	\$6,740,241	\$0
Hospital C	\$4,906,016	\$4,906,016	\$0
Hospital D	\$3,789,795	\$3,789,795	\$0
Hospital F	\$3,533,456	\$3,533,456	\$0
Hospital E	\$3,327,189	\$3,327,189	\$0

Orthopedics - Inpatient, Orthopedi... ▾

PCP Referring Market Data - Service Line



Tell us where you are...



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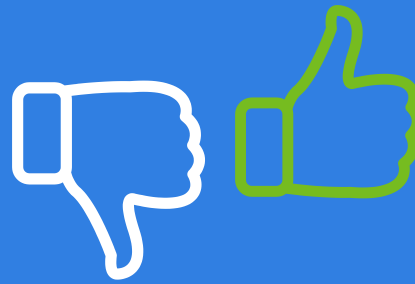


4

Results

Physician relations connects activity to results and consistently plays a significant role in growing business

Leader Perceptions



Internal
Engagement

3

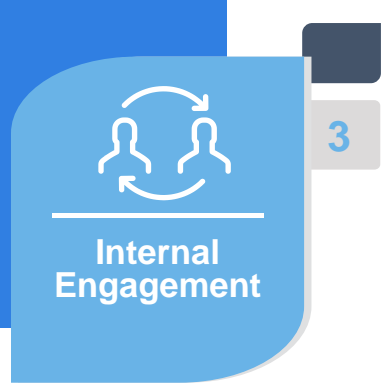
Advanced?

- Key department heads want the interaction and rely on it to grow
- Entire C-suite at the hospital understands the role and is personally involved in supporting it
- Physician relations is asked to participate in senior strategy meetings AND...Sits at the table on new initiatives
- Provide strategic intelligence to leadership that informs strategic decisions

Struggling?

- Limited involvement from C-suite
- C-suite unable to determine value
- Unable to tie activity to results
- At risk during budget season
- Not at the table...Waiting to be asked
- Provide tactical intelligence
- Passive – “we are being replaced by X”

Engagement from Leadership with IU Health Liaison Team



- ✓ Quarterly “In Person” Meetings with Regional and System Leadership
 - Ensure alignment on strategy
 - Two Way Conversation
- ✓ Invitation by IUHP Physician Leadership for Liaisons to attend workshops to address physician leakage
 - Subsequent LEAN focused events for opportunities identified – inclusion of liaison
- ✓ Monthly Field Reports
 - Address Topics (Access, Communication, Intel, Misc, Peer to Peer engagements)
 - Numerous reports created (Overall System Report, Business Unit Reports)
 - Leaders utilizing reports for countermeasure reporting across service areas

Monthly Issues Report – with follow up.



Internal Engagement

3

Department	Division	Topic	Notes	Status	Additional Follow-up By Department
Surgery	General Surgery	Communication	Oncologist referred a patient to colo-rectal surgeon at the downtown location. After two weeks of both referring physician and patient trying to schedule an appointment, the patient was considering seeking treatment at a competing health care system.	Oncology liaison reached out to Downtown Oncology leaders and Downtown General Surgery for assistance. Patient was finally scheduled.	From General Surgery Leadership: Education was provided to scheduling and service recovery has been completed.
Medicine	Pulmonary Critical Care	Access	Dr. A (IUHP Practice B) had a patient who was discharged from IU Health Emergency Department with instructions to be seen by a pulmonologist within 3-4 days. Dr. A's office put in an urgent referral and was given an appointment of 5 weeks out.	Donna, Specialty Care Physician Liaison worked with the Pulmonology office to get the patient seen with a week.	

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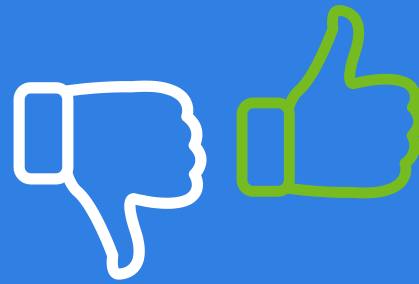


4

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Physician relations connects activity to results and consistently plays a significant role in growing business

Getting Results



Results

4

- Know how leaders evaluate success
- Field team can clearly articulate their expectations and they are a match to the organization's priorities
- A proactive team that embraces change
 - Demonstrated in our actions and communication

- Do you have defined goals that can be measured?
- Can you tie activity to results?
- Do your leaders believe?

Results – Case Study #1



Results

4

- Focused on entire Digestive & Liver Disorder service line – not just the sub-specialty HPB surgery
 - Fills “top of funnel” for possible HPB patients
 - Ensuring that comprehensive calls on referring Gastroenterologist can be made effectively
- Tactics Utilized
 - Calls on targeted Gastroenterologists across Indiana
 - Ensure employed PCP referrals for DaLD stay in system
 - Key MD2MD engagements for HPB Surgeons

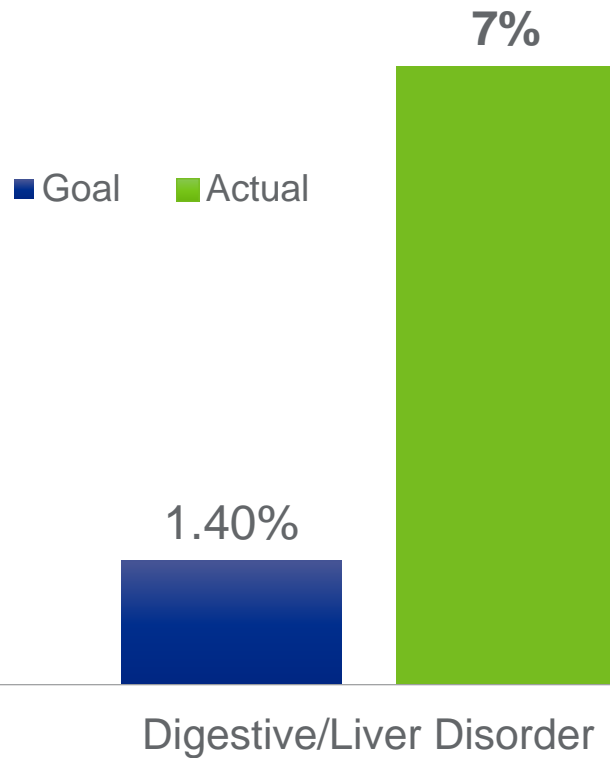
Results – Case Study #1



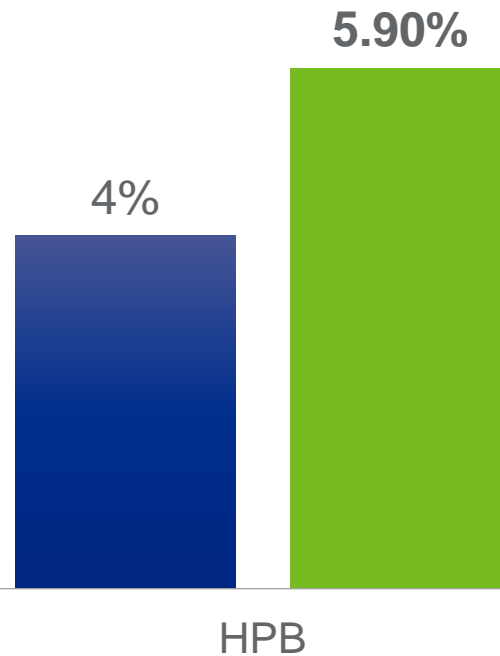
Results

4

Attending Revenue 2017-18



Surgical Procedures 2018



Additional Results:

Service area reported that after just two months of liaison focus, they experienced a 2000/month increase in referral calls into the DaLD referral line

Results – Case Study #2 “Retention” Focus

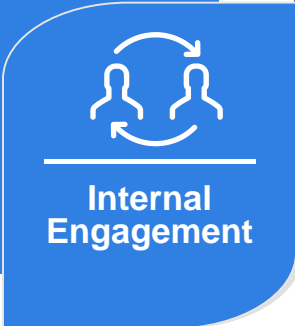


Results

4

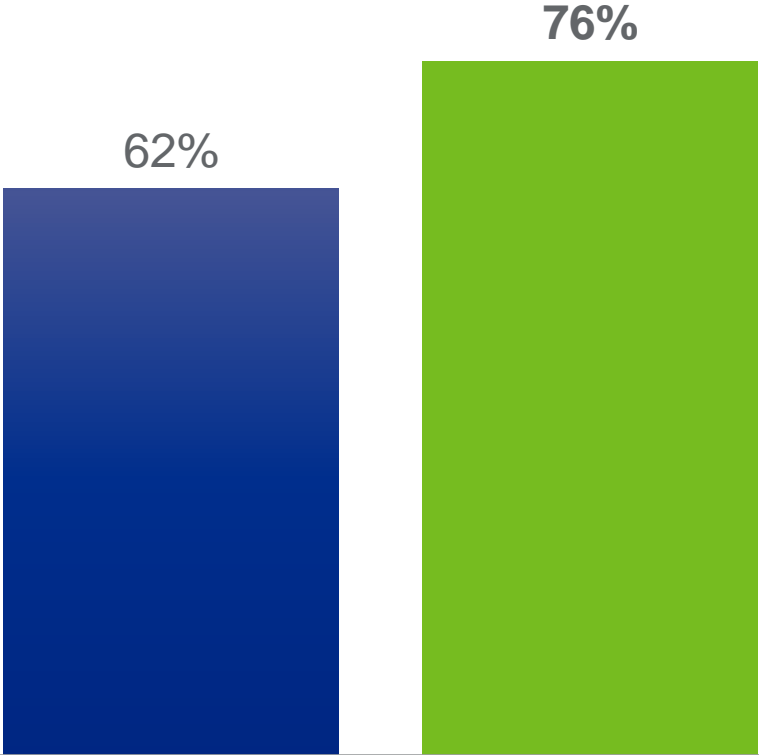
- Restructured Primary Care Liaison team to ensure all IUHP Employed Primary Care providers were targets
- Ensured targeting process reflected this change
- Continual focus on key providers utilizing Leakage Dashboard

Results – Case Study #2 “Retention” Focus



Keepage

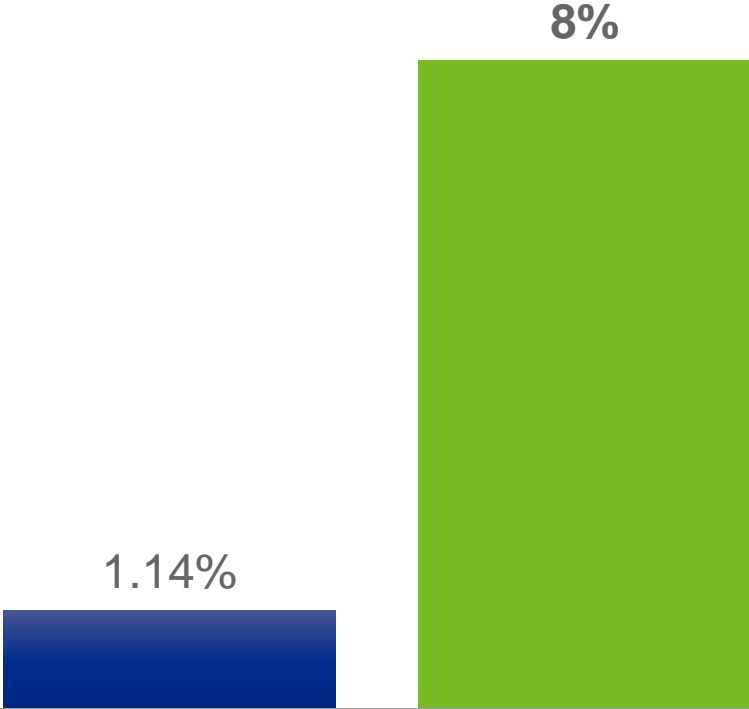
■ 2017 ■ 2018



Keepage for IUHP Providers

Referral Revenue

■ Goal ■ Actual



Referral Revenue from IUHP PCPs

** Data from Crimson Market Advantage (CMA)

Where Do We Want to Be in Future

- **Growth from independent providers.** Retention growth strategy has been successful. While it continues to be important we need to look outside to independent providers for growth throughout the state.
- Flexibility in the Specialty Care team in that we are able to **capitalize on business opportunities** that present themselves to our system in service areas that may not currently be a priority
- Continue to be a **key player in the strategy and business planning** development for the system and regions.
- **Career development ladder for the liaison team** – need to encourage and provide growth and advancement opportunities within the liaison team

Key Take-Aways

- Assess your effectiveness *all the time*
- Select those areas where you have the greatest vulnerability and are the most important to your organization
- Determine whether you need to transform, transition or tweak
- Challenge yourself. Make the difficult decisions. And constantly elevate your program to greatness!

We cannot
become what
we want to be
by remaining
what we are.

Max DePree

Questions?

Please be sure to complete the session evaluation on the mobile app!

Speaker Biography

Becky Lathrop serves as the Director for Physician Liaisons for Indiana University Health in Indianapolis, IN. Becky is responsible for a team of 10 liaisons for the 16 hospital healthcare system. She works closely alongside key business unit leaders, C-suite executives and marketing colleagues across the system to ensure coordinated strategy, focus, feedback and follow through on specific key business objectives. Simultaneously, she provides continuous sales coaching and professional development opportunities for direct reports leading to the achievement of both their personal developmental and departmental goals.



Becky Lathrop
Director, Physician Liaisons
IU Health
rlathrop@IUHealth.org



Speaker Biography

Susan Boydell, a partner with Barlow/McCarthy, has deep experience and brings a practical yet inventive strategic thinking to healthcare organizations and physician practices nationwide. Passionate about “listening” to the “voice of the customer” Susan helps clients discover what physicians want and expect. She then translates those insights into customized solutions for referral development, leakage improvement, evolving teams and keeping organizations one step ahead of trends.



Susan Boydell
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