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# STRONG RELATIONSHIPS FOR PHYSICIANS AND EXECUTIVES

Recommendations for Building on Common Concerns

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ike leaders throughout Catholic healthcare organizations, physicians are feeling uncertainty and a sense of loss in the face of trends that are changing the delivery of healthcare. At a one-day "think tank" convened by the Catholic Health Association, 16 physicians and 3 healthcare executives discussed the personal transitions they are making and developed recommendations for themselves and for healthcare organizations that are planning initiatives to strengthen their relationships with physicians.

#### FEELINGS OF LOSS

According to meeting participants, an underlying problem for physicians is their sense that the aspects of medical practice that drew them to the profession originally are being eroded by several interrelated trends:

- Increasing influence of marketplace considerations on practice patterns
- Loss of autonomy and choice for physicians and patients
  - Consolidation of healthcare organizations
  - · Growth of capitation and managed care

### PHYSICIAN LEADERSHIP THINK TANK PARTICIPANTS

#### Margaret Barron, MD

Director of Emergency Medicine Providence Hospital Washington, DC

#### William J. Bazan

Executive Director, Policy/ Educational Development Catholic Health Association of Wisconsin Milwaukee

#### John C. Bull, Jr., MD

Vice President, Medical Affairs St. Joseph's Hospital & Medical Center Phoenix

#### W. Hayden Childs, MD

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#### Thomas Q. Davis, MD

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#### Richard Farrell, MD

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#### Ralph P. George, MD

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#### John M. Gibbons, Jr., MD

Senior Vice President for Medical Affairs Saint Francis Hospital and Medical Center Hartford, CT

#### Bruce Jensen, MD

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#### Matthew Lambert III, MD

Vice President for Medical Affairs Catholic Health Partners Chicago

#### James G. Mann, MD

Vice President, Quality Resources Provenant St. Anthony Central Denver

#### Stephanie McCutcheon

Regional President/System Vice President SSM Health Care System

#### Gerald McShane, MD

Practice Management Committee OSF Healthcare System Peoria, IL

#### Ken Ozawa, MD

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#### Joseph B. Perez, MD

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#### Ronald N. Riner, MD

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#### Robert Simmons, MD

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#### Ed Van Bramer, MD

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- Oversupply of physicians and greater competition for patients
- Changing relationships among specialists and primary care physicians with an increasing emphasis on primary care and outpatient treatment
- Growing demand for clear definitions of highquality medicine, treatment protocols, and demonstrated outcomes
  - Incentives to limit treatment
- New roles for physicians as leaders, as employees, and as managers
- Lack of national health policy regarding access to care and the promotion of healthy life-styles and preventive care

Physicians resent the growing influence of insurers in defining quality. As payers influence treatment decisions, which are often made on the basis of revenues and costs, physicians are finding it increasingly difficult to stand as advocates for their patients. Doctors must take a greater leadership role than they have so far in defining quality.

Physicians, as well as executives, feel pressure to assume new roles in organizational management and governance, but many find themselves inadequately prepared—and sometimes reluctant—to deal with many issues. Also, the time required to balance clinical practice activities with new administrative duties places significant personal and professional challenges on physicians.

#### DIRECTIONS FOR THE FUTURE

To function effectively in the new world of healthcare, the participants said, physicians need four essentials: (1) partners who share their values in patient care, (2) leadership development, (3) understanding of the management of large organizations, and (4) the ability to be advocates for their patients and themselves at institutional and governmental levels.

Participants were optimistic that physicians and other providers can resolve some concerns and build satisfying relationships—if they respond actively. They made the following recommendations.

Compatible Partners Physicians and provider organizations should develop collaborative strategies that increase provider leverage with payers. Organizations should bring physicians to the table for decision making. But physicians should also discuss their patient care concerns with selected payers and develop relationships with them.

Both physicians and provider organizations should explore the opportunities offered by provider-sponsored networks and work toward establishing them.

Leadership and Management Education Provider organizations can develop "physician academies" to educate

## IS YOUR ORGANIZATION A GOOD CANDIDATE FOR PHYSICIAN PARTNERSHIP?

How well does your organization measure up to physicians' description of a good partner? Here are some questions to consider:

- Collaborative strategies. Will a relationship with your organization help to align incentives of physicians and hospitals and enhance physicians' position in the evolving managed care market?
- Shared decision making. Does your organization involve physicians in policy and decision making, beyond simply allowing them to review and comment on policies and decisions after the fact?
- Patient focus. Does your organization put patients' concerns first?
- **High-quality care.** Does your organization provide ways for physicians to remain involved in defining quality through such means as outcomes measures and treatment protocols?
- Opportunities for leadership and personal development. Does your organization provide physicians with opportunities to acquire the skills and attributes they need to function effectively in the new environment?
- Advocacy. Does your organization share physicians' concerns that third-party organizations are driving the changes in healthcare delivery, often for monetary gain, and does the organization have experience and knowledge to advocate physicians' views effectively?
- Leadership positions. Does your organization offer physicians roles in management, beyond the traditional medical staff concerns?

physician leaders about management, operations, and market issues. Providers can also call on medical schools to offer such courses or urge physicians to take courses currently available through the American College of Physician Executives. Physician leaders with experience in these areas should be mentors for their colleagues.

**Advocacy Skills** Physicians need to be at the forefront of lobbying efforts for legislative measures that ensure universal access to care and high-quality care. They should also seek antitrust legislation that allows regionalization of healthcare delivery, especially through provider-sponsored networks.

As advocates for patients, they should press for uniform quality definitions and standards and patient-centered care that is coordinated across the continuum.

#### Build on Common Ground

The think tank revealed that physicians and health-care executives often stand on common ground. Both groups are grieving for what they have lost, and both are defining new roles and working relationships. Working together, these two groups can find new approaches to the problems they share and support each other as they search out renewed meaning in their professions.