

# Innovative Strategies to Influence Population Health

A Governance Institute Webinar

*presented by*

**Steven Spalding, M.D.**

Physician Vice President, Population Health  
Akron Children's Hospital

February 13, 2019



**The Governance Institute®**

A SERVICE OF **nrc**  
HEALTH

# Today's Presenter



Dr. Spalding received his medical degree from Wright State University School of Medicine in Dayton, Ohio, and completed his pediatric residency and pediatric rheumatology fellowship at Children's Hospital of Pittsburgh at UPMC. Following fellowship, Dr. Spalding joined Cleveland Clinic where he built their first Center for Pediatric Rheumatology, acting as the Center Director for five years. While at Cleveland Clinic, Dr. Spalding also served as the Medical Director for Analytics and Business Intelligence. During his time as the Physician Leader for Analytics, Dr. Spalding and his team played a central role in the design and implementation of multiple analytical capabilities to support Cleveland Clinic's value-based care strategy. In 2015, Dr. Spalding joined Phoenix Children's Hospital as their Chief Clinical

Integration Officer and Chief Medical Officer. In this role, Dr. Spalding oversaw the integration of hospital and practice-based quality improvement and care redesign efforts with Phoenix Children's Clinically Integrated Network.

A native Ohioan, Dr. Spalding returned to his roots to help lead Akron Children's Hospital as Physician Vice President of Population Health. Dr. Spalding is helping lead the design and implementation of Akron Children's strategy to align their payment and care delivery models. Additionally, Dr. Spalding is the Division Director for Rheumatology at Akron Children's Hospital and is guiding the expansion of the hospital's Rheumatology services while working to enhance the patient and provider experience.



The Governance Institute®

A SERVICE OF **nrc**  
HEALTH

# Learning Objectives & Continuing Education

After viewing this Webinar, participants will be able to:

- Define population health in today's healthcare landscape.
- Identify children's hospitals' role in population health.
- Explain how value-based payment can be used to advance pediatric population health.
- Apply Akron Children's population health model to your own situation.

## Continuing Education Credits Available:

**Jointly Accredited Provider:** The Governance Institute, a service of NRC Health, is accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC) to provide continuing education for the healthcare team.

The Governance Institute, a service of NRC Health, designates this live activity for a maximum of **1 AMA PRA Category 1 Credit(s)**<sup>™</sup>. Physicians should claim only the credit commensurate with the extent of their participation in the activity.



The Governance Institute<sup>®</sup>

A SERVICE OF **nrc**  
HEALTH

# Continuing Education (continued)

The Governance Institute is authorized to award **1 hour of pre-approved ACHE Qualified Education credit** for this program toward initial advancement, or recertification, of FACHE. Participants in this program who wish to have the continuing education hours applied toward ACHE Qualified Education Credit must self-report their participation. To self-report, participants should log into their MyACHE account and select ACHE Qualified Education Credit.

Program level: Overview

No advanced preparation required

Field of Study: Business Management and Organization

Delivery method: Live Internet

Maximum potential CPE credits: 1.0

**Criteria for successful completion:** Webinar attendees must remain logged in for the entire duration of the program. They must complete the evaluation survey and include their name and degree (M.D., D.O., other) at the end of the survey in order to receive education credit. Evaluation survey link will be sent to all registrants in a follow-up email after airing of the Webinar.



The Governance Institute®

A SERVICE OF **nrc**  
HEALTH



# Disclosure Policy

As a Jointly Accredited Provider, The Governance Institute's policy is to ensure balance, independence, objectivity, and scientific rigor in all of its educational activities. Presentations must give a balanced view of options. General names should be used to contribute to partiality. If trade name are used, several companies should be used rather than only that of a single company. All faculty, moderators, panelists, and staff participating in The Governance Institute conferences and Webinars are asked and expected to disclose to the audience any real or apparent conflict(s) of interest that may have a direct bearing on the subject matter of the continuing education activity. This pertains to relationships with pharmaceutical companies, biomedical device manufacturers, or other corporations whose products or services are related to the subject matter of the presentation topic. Significant financial interest or other relationships can include such thing as grants or research support, employee, consultant, major stockholder, member of the speaker's bureau, etc. The intent of this policy is not to prevent a speaker from making a presentation instead, it is The Governance Institute's intention to openly identify any potential conflict so that members of the audience may form his or her own judgements about the presentation with the full disclosure of the facts. It remains for the audience to determine whether the presenters outside interests may reflect a possible bias in either the exposition or the conclusion presented. In addition, speakers must make a meaningful disclosure to the audience of their discussions of off-label or investigational uses of drugs or devices.

All faculty, moderators, panelists, staff, and all others with control over the educational content of this Webinar have signed disclosure forms. The planning committee members have no conflicts of interests or relevant financial relationships to declare relevant to this activity. *The presenter has no financial relationship with The Governance Institute or NRC Health.*

This educational activity does not include any content that relates to the products and/or services of a commercial interest that would create a conflict of interest. There is no commercial support or sponsorship of this conference.

None of the presenters intend to discuss off-label uses of drugs, mechanical devices, biologics, or diagnostics not approved by the FDA for use in the United States.



The Governance Institute®

A SERVICE OF **nrc**  
HEALTH

# Define Population Health in Today's Healthcare Landscape



[www.populationhealthnews.com](http://www.populationhealthnews.com)

# Define Population Health in Today's Healthcare Landscape

## Population Health

*"...the health outcomes of a group of individuals, including the distribution of such outcomes within the group."*

Kindig & Stoddart, 2003

## Population Health Management

*"...[R]apid changes of the last five to seven years in policy-level decision making, payment structures, and provider alignment have shifted the focus from care provided and paid for at an individual level, to managing and paying for healthcare services for a discrete or defined population - an approach known as **population management**. **The term population management should be clearly distinguished from population health (which focuses on the broader determinants of health)**.*

Institute for Healthcare Improvement, 2014

<http://www.ihc.org/communities/blogs/population-health-population-management-terminology-in-us-health-care>

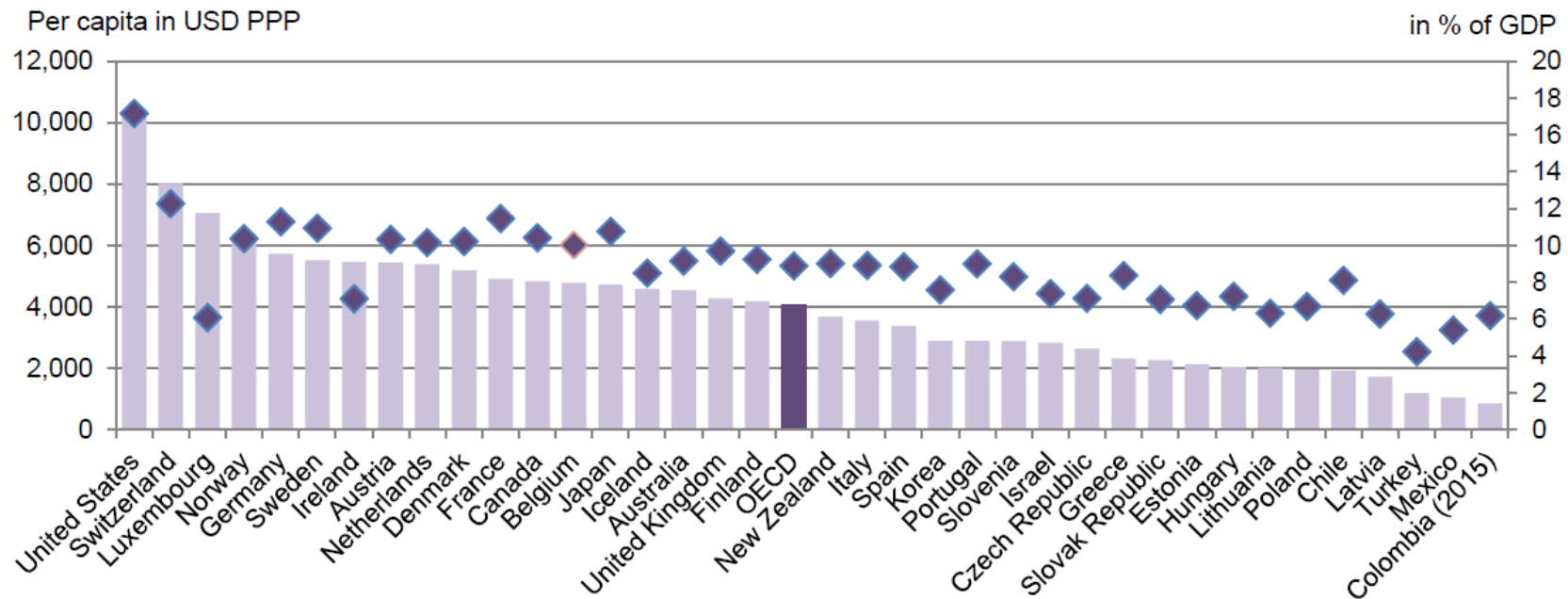
# Define Population Health in Today's Healthcare Landscape

- **“Population health”** = the outcome of healthcare delivery and public health efforts.
- **“Population health management”** = strategy and tactics to integrate healthcare delivery and public health efforts to deliver “population health.”

# Define Population Health in Today's Healthcare Landscape

## Population Health: Why Now?

Health spending per capita and as share of GDP, 2017

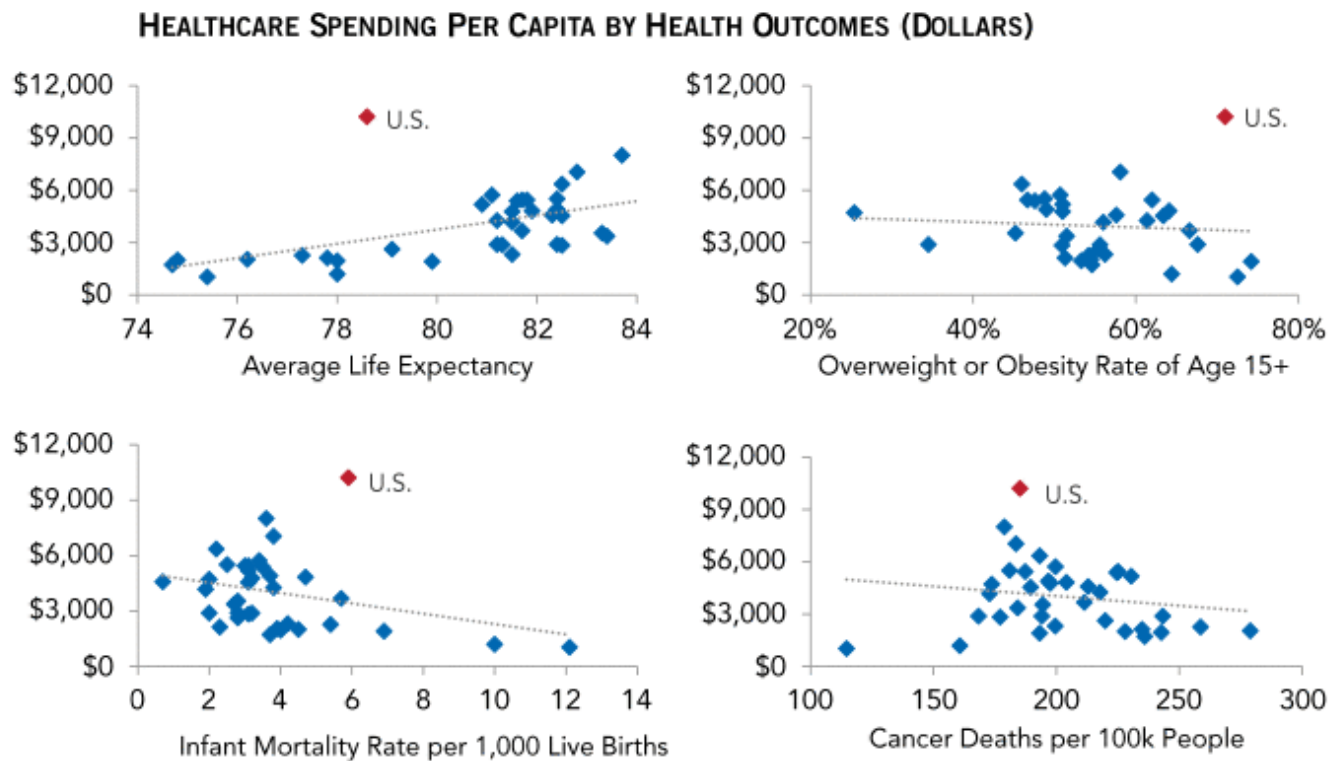


Notes: Data for 2017 was estimated by the Secretariat for those countries that were not able to provide this information. PPP stands for Purchasing Power Parities and adjusts health expenditure for differences in price levels between countries. Source: Organization for Economic Co-operation and Development, *OECD Health Statistics*, 2018.

# Define Population Health in Today's Healthcare Landscape

## Population Health: Why Now?

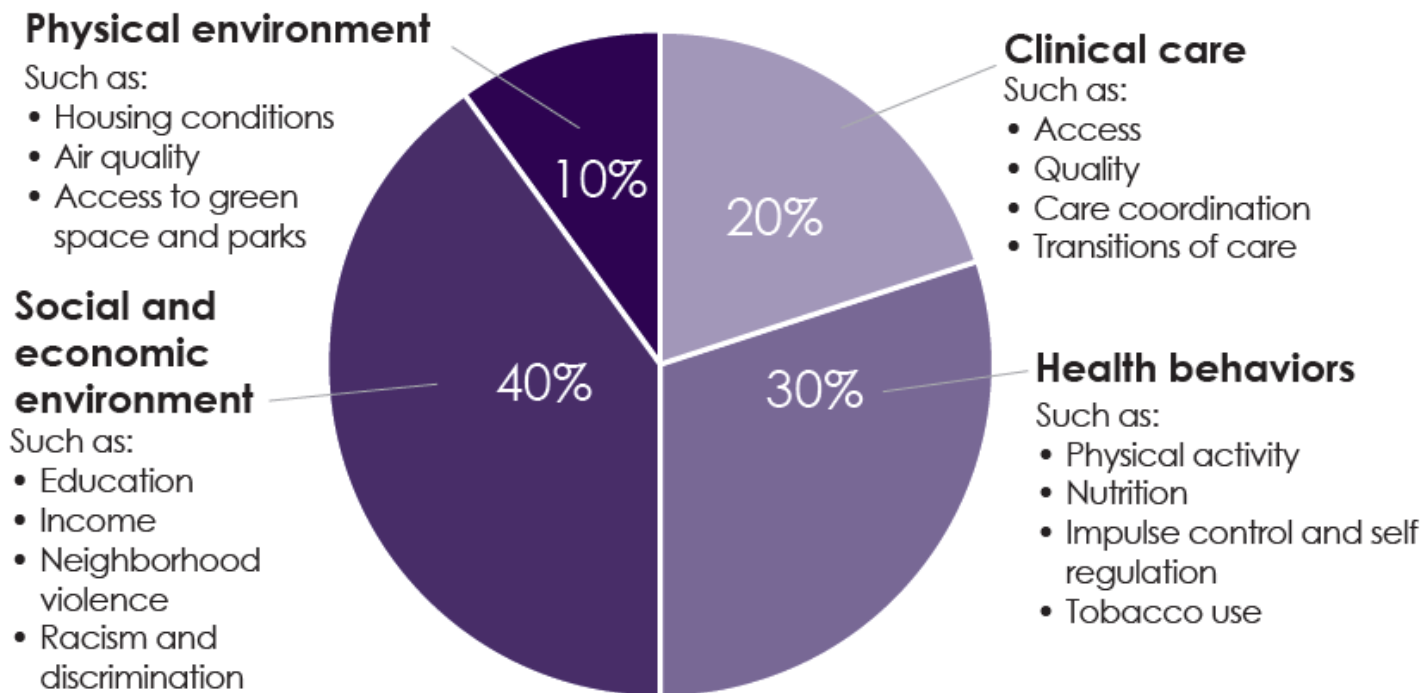
Despite higher healthcare spending per capita, the U.S. generally does not have better health outcomes



Source: Organization for Economic Co-operation and Development, *OECD Health Statistics*, June 2018. Compiled by PGPF.  
Note: Data are for 2017 or latest available for all OECD countries. © 2018 Peter G. Peterson Foundation [www.pgpf.org](http://www.pgpf.org).

# Define Population Health in Today's Healthcare Landscape

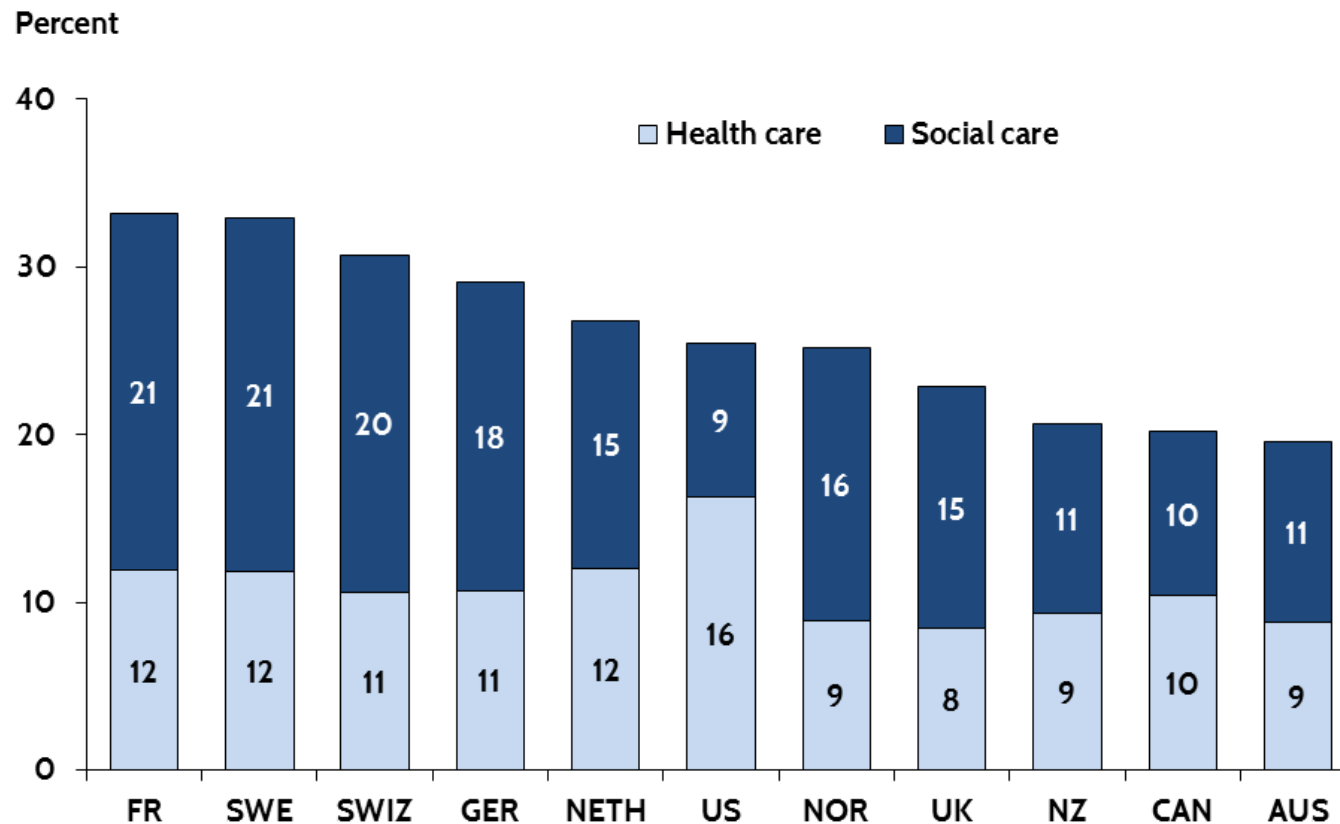
## Factors contributing to (population) health



Source: Booske, Bridget C. et al., *County Health Rankings Working Paper: Different Perspectives for Assigning Weights to Determinants of Health*, University of Wisconsin Public Health Institute, 2010.

# Define Population Health in Today's Healthcare Landscape

## Health and Social Care Spending as a Percentage of GDP

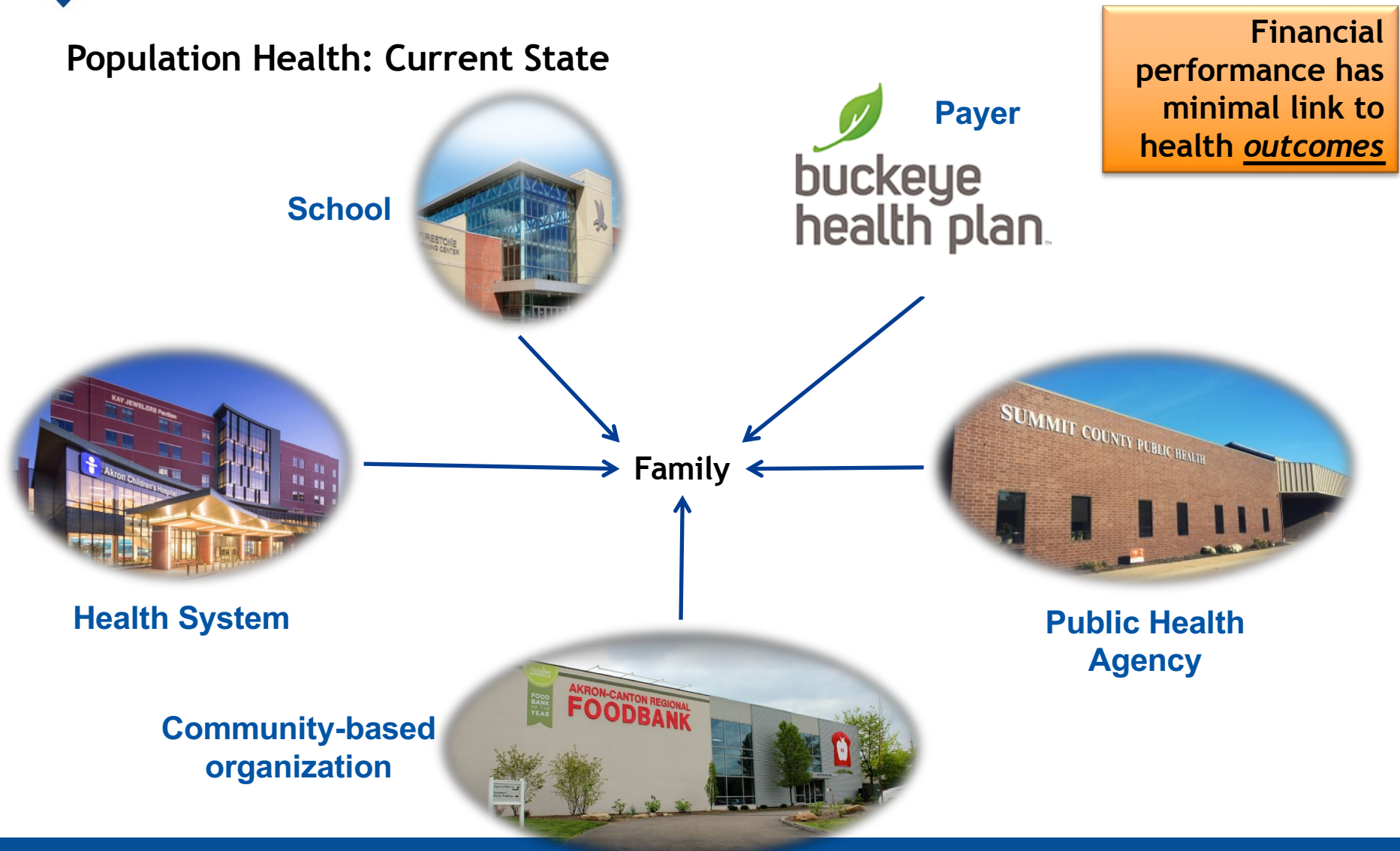


Source: E.H. Bradley and L.A. Taylor, *The American Health Care Paradox: Why Spending More Is Getting Us Less*, Public Affairs, 2013.



# Define Population Health in Today's Healthcare Landscape

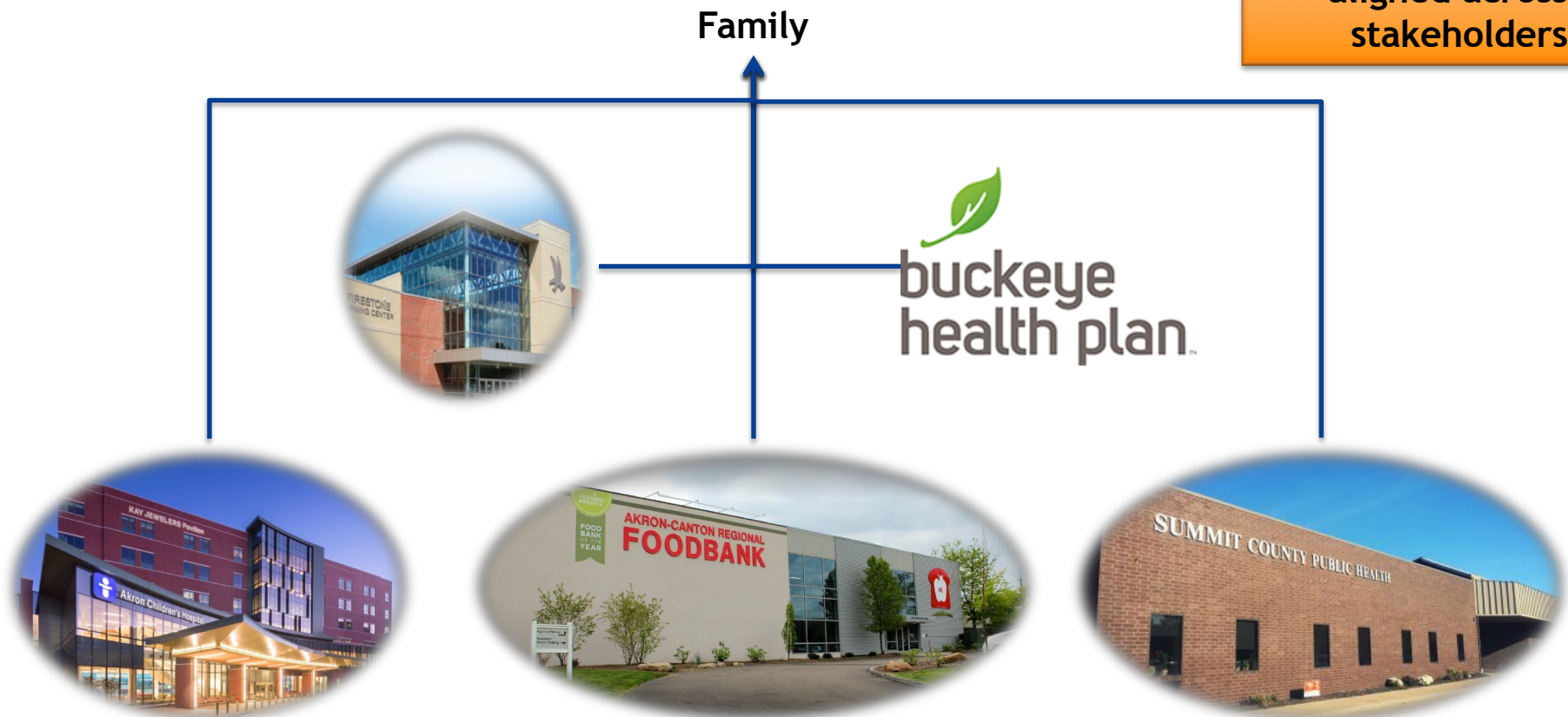
## Population Health: Current State



# Define Population Health in Today's Healthcare Landscape

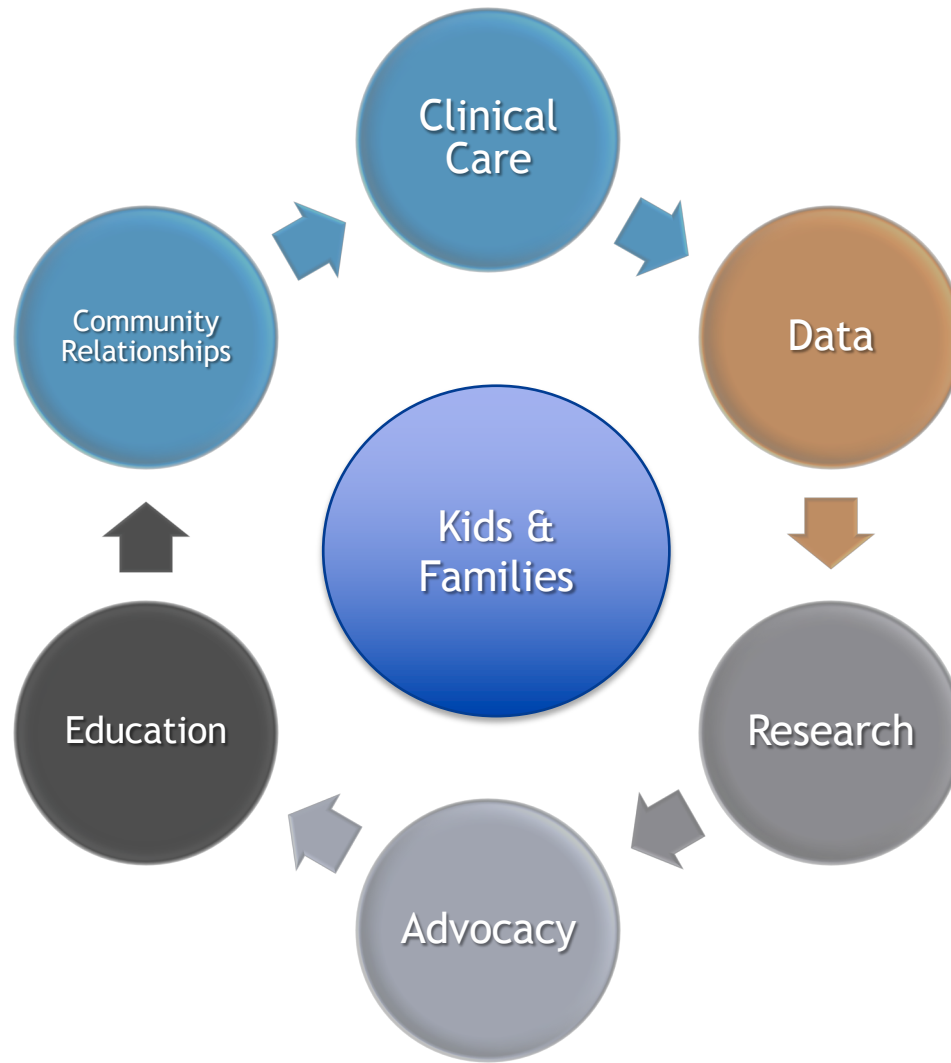
Population Health: Future state

Payment linked to outcomes aligned across stakeholders



Key Leadership Question: What can your organization do to align public health, community-based organizations, and healthcare delivery systems to address social determinants of health?

# Identify Children's Hospital's Role in Population Health



# Using Value-Based Payment Models to Advance Health

- How can value-based payment models advance (population) health?

Current State  
Payment Model:  
Fee-for-Service

- Each activity = revenue
- No link between payment & outcomes
- Rewards activity, not health



Key Leadership Question: How can we move to a model where the financial position of children's hospitals is strengthened by the health and well-being they create?

Mission of  
Children's  
Hospitals:  
**Improve the  
health and well-  
being of  
children**

- Research
- Advocacy
- Clinical care
- Education

# Using Value-Based Payment Models to Advance Health

- **How do business models/financial incentives align with organizational mission across industries?**



We strive to offer our customers the lowest possible prices, the best available selection, and the utmost convenience.



Apple designs Macs, the best personal computers in the world, along with OS X, iLife, iWork, and professional software. Apple leads the digital music revolution with its iPods and iTunes online store. Apple has reinvented the mobile phone with its revolutionary iPhone and App store, and is defining the future of mobile media and computing devices with iPad.



The mission of Southwest Airlines is dedication to the highest quality of Customer Service delivered with a sense of warmth, friendliness, individual pride, and Company Spirit.



United Way improves lives by mobilizing the caring power of communities around the world to advance the common good.

**Key Leadership Question: How does your organization's mission statement align your business model with financial incentives?**

# Using Value-Based Payment Models to Advance Health

- How can government payers use value-based payment models to advance (population) health?

Current State Payment Model:  
Fee-for-Service

- Each activity = revenue
- No link between payment & outcomes
- Rewards activity, not health



Key Leadership Question: How can we move to a model where spending on child health to promote wellness & prevention is seen as a cost-saving strategy for state-funded healthcare?

Mission of Medicaid Programs:

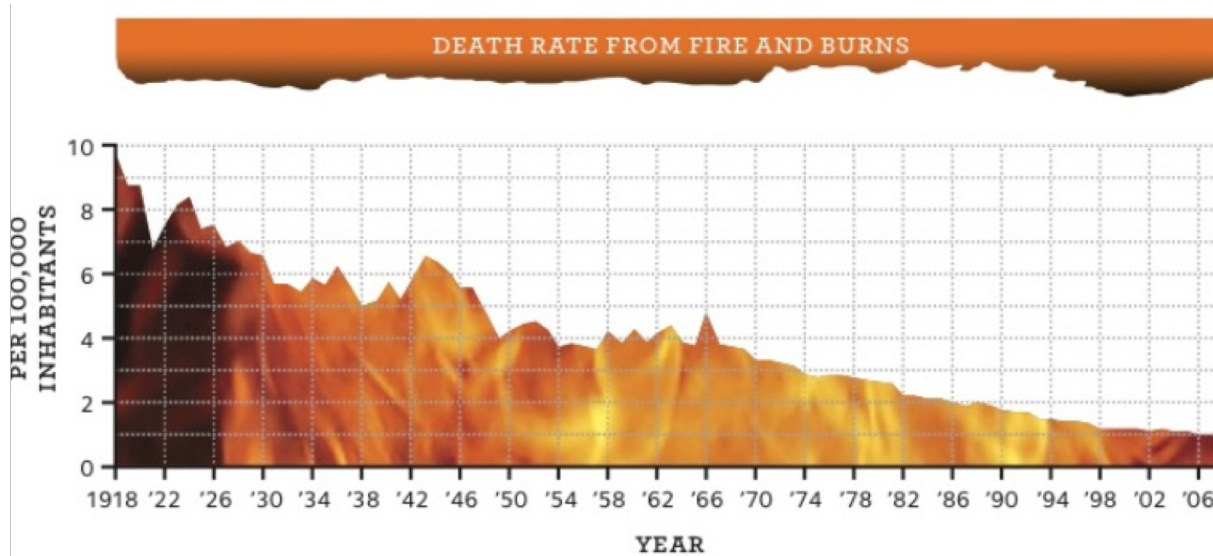
**Improve the health and well-being of citizens**

Children: 40% of members; <20% of spend

Majority of spend on acute care & chronic disease



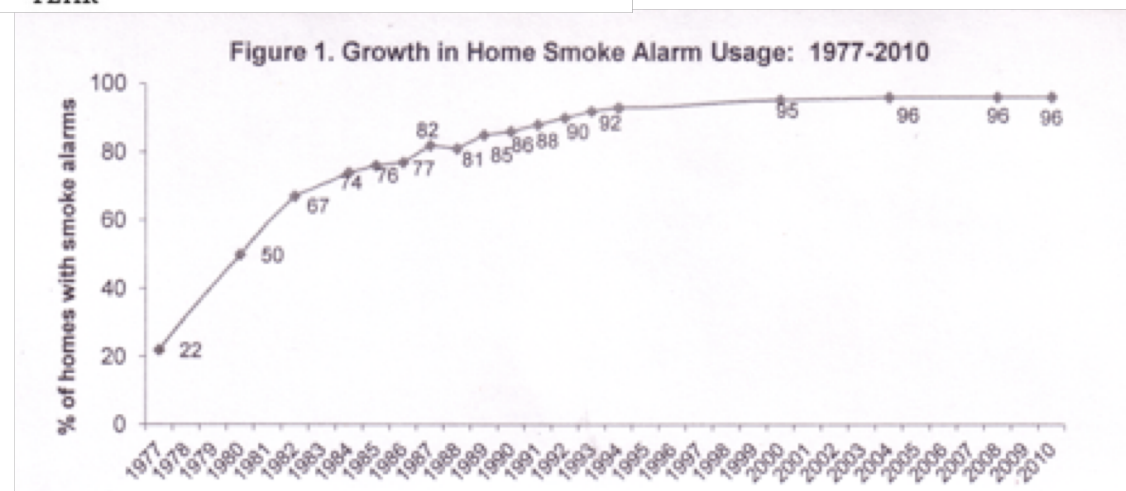
# Using Value-Based Payment Models to Advance Health



## Acute Care & Chronic Disease Management



## Wellness & Prevention



# Apply Akron Children's Model to Your Organization

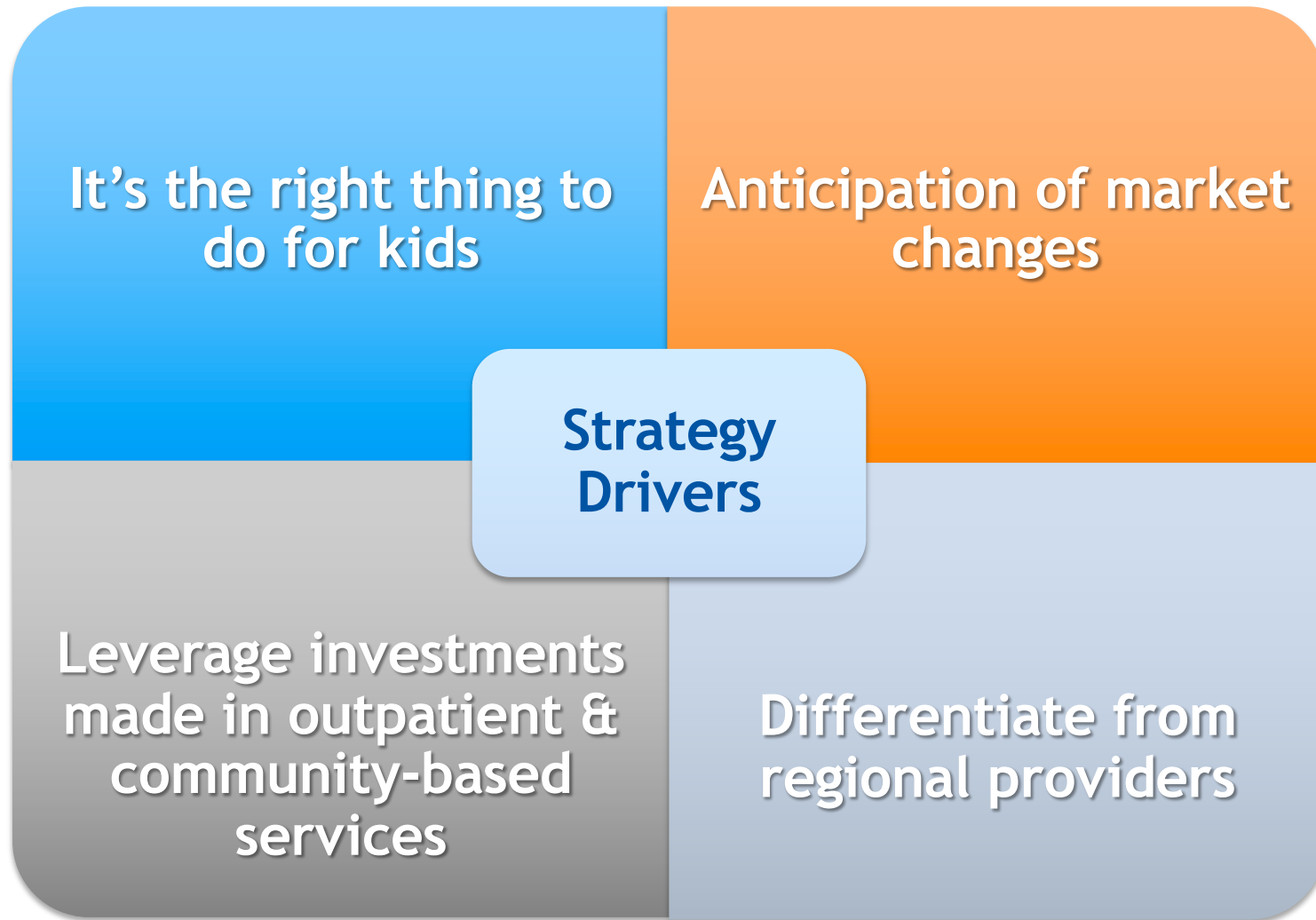
## Akron Children's Hospital

- Founded in 1890
- Independent, integrated, community-governed pediatric healthcare delivery system
- Key stats:
  - 600 providers
  - 434 beds
  - 9,800 discharges and 18,000 surgeries
  - 104k ED and 30k urgent care encounters
  - 465k primary care and 320k subspecialty visits





# Apply Akron Children's Model to Your Organization



# Apply Akron Children's Model to Your Organization

## What does Akron Children's population health strategy hope to accomplish?

### Vision for Population Health

- Achieve maximum potential of all children and families in our region/Ohio

### Goals of Population Health Strategy

- Provide timely and optimal access to health services and information.
- Create an integrated, coordinated, and reliably high-quality continuum of care.
- Improve health outcomes through care delivery transformation.
- Partner and collaborate within communities to advance health and wellness, including the social determinant of health.
- Advance population health delivery, clinical interventions, and outcomes through research.
- Reduce the total cost of care for pediatric populations.
- Lead as the preferred pediatric provider and payer networks.
- Develop and implement aligned payment and care delivery models to enhance pediatric population health.

# Apply Akron Children's Model to Your Organization



# Apply Akron Children's Model to Your Organization

## What have we accomplished?

- Alignment of enterprise-wide quality improvement efforts
  - Well-child visits
- Integrated care coordination model
  - Community health workers
- 2020 goals
- Organizational education, awareness, understanding

# Apply Akron Children's Model to Your Organization

## Lessons Learned:

- Words matter
  - “Population health” vs. “population health strategy” vs. “Department of Population Health Management”
- Alignment is critical
- Go slow to go fast

## Conclusions

- The best thing we can do to deliver population health and promote health and well-being in children is to change the way we pay for healthcare.
- Social determinants matter - partner whenever possible.
- “I skate to where the puck is going, not where it has been.”



# Questions & Discussion

## Contact Us...



**Steven Spalding, M.D.**  
Vice President of Population Health  
Akron Children's Hospital  
(330) 543.0734  
[sspalding@akronchildrens.org](mailto:sspalding@akronchildrens.org)



**The Governance Institute**  
9685 Via Excelencia, Suite 100  
San Diego, CA 92126  
Toll Free (877) 712-8778  
[Info@GovernanceInstitute.com](mailto:Info@GovernanceInstitute.com)