Aurora's Quality Journey

Preparing for Value-based Purchasing

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Aurora Health Care

Pay for Performance Summit

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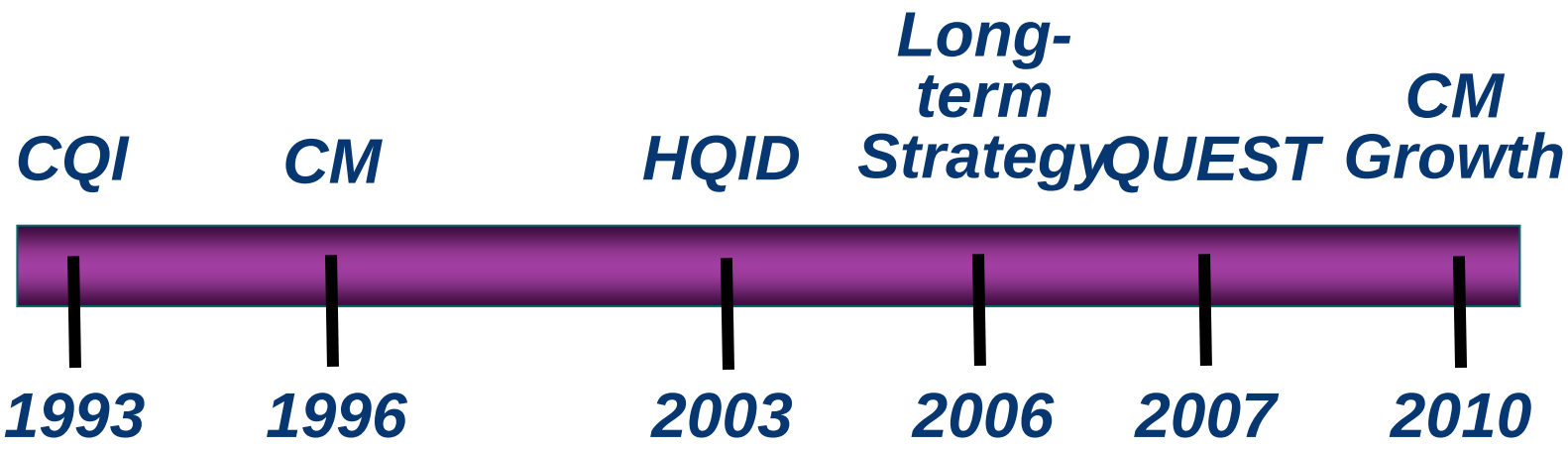
Quality

From Tactics to Strategy



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Overview

- Care Management Pre–2004
- Hospital Quality Incentive Demonstration
- Aurora's Long-term Strategy
- Our Hidden QUEST
- Pay-for-Performance
- Care Management Growth

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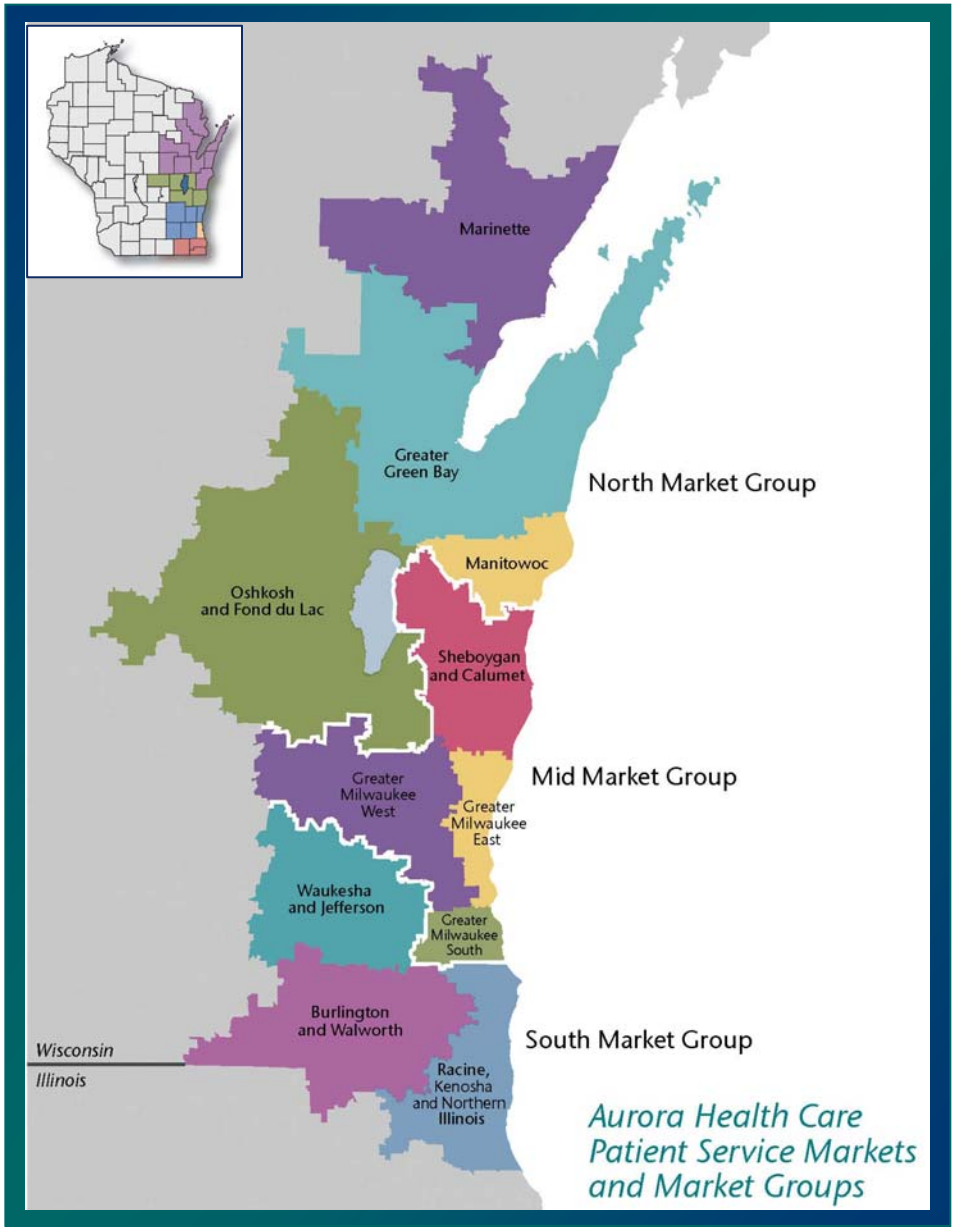
Aurora Health Care at a Glance



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Care Management Pre-2004

Increase the number of people who benefit from care management best practice

- Diabetes
- Heart Failure
- Cholesterol Management
- AMI
- CABG
- Pneumonia

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Care Management Pre-2004

- To them, not with them
- Relentless incrementalism
- Process - focused

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HQID

- CEO “volunteered” us
- Single person of accountability
- Movement to outcomes
- Rapid improvement

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Aurora's #1 Priority

Our patients deserve and expect the best care.

We will give people better results than they can get anywhere else by achieving top performance in all of our quality measures.

For Aurora, there is no alternative.

CMS
Hospital Quality Incentive Project

	AMI	CHF	CAP	HIP-KNEE	CABG
SLMC	7	4	5	7	3
SLSS	N/A	N/A	N/A	N/A	N/A
ASMC	6	8	6	7	8
WAMH	10	4	3	3	N/A
AMCWC	3	5	8	8	N/A
MHB	6	4	1	8	N/A
AMC-KEN	9	5	2	9	N/A
ALMC	4	9	2	10	N/A
ABMC	5	10	3	10	10
AMCMC	1	5	1	3	N/A
SMMC	7	3	1	4	N/A

Decile Performance
1 = Top Performer
10 = Bottom Performer

Based on 4th Q 2003 Data

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CMS
Hospital Quality Incentive Project

Achieve progress towards the 2007 goal of being in the top 20% for all Medicare (CMS) pay-for-performance measures by achieving above median performance for each one of these measures.

	AMI	CABG	PNEUMONIA (CAP)	HEART FAILURE	HIP-KNEE	SCIP
ASLMC	2	1 ↑	3 ↓	4 ↓	2	3
ASMC	2	VOLUME	2 ↓	2 ↑	1 ↑	2
WAMH	2	N/A	2	3	1 ↑	3
AMCWC	VOLUME	N/A	1	2 ↑	1 ↑	1
MHB	VOLUME	N/A	1	2 ↑	2 ↓	1
AMC-KEN	VOLUME	N/A	1	3 ↓	1	1 *
ALMC	VOLUME	N/A	1	3 ↓	4 ↓	2
ABMC	2 ↓	2 ↓	1	1	1	3
AMCMC	1 *	N/A	1	1 ↑	2 ↓	2
ASMMC	1	N/A	1	2 ↓	1	3

* On track for Top Improvement Award

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Updated 11/21/08

Performance
1 = Top Performer
4 = Bottom Performer

79% in Upper Median
43% in Top 20%
Based on 4th Q 2007 – 1st Q 2008 Data

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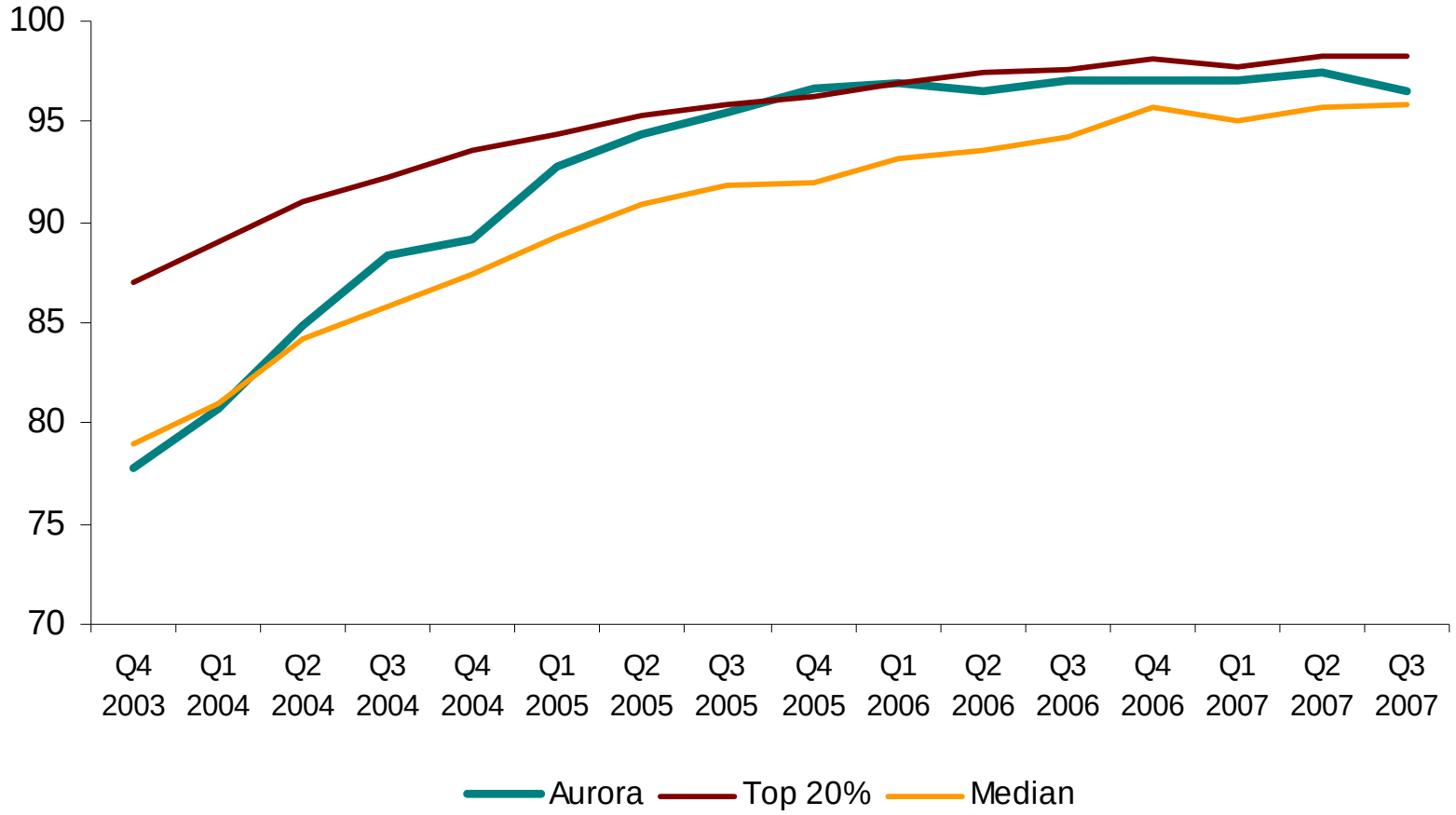
CMS Hospital Quality Demonstration Project

Best Patient Care Improvement Trend



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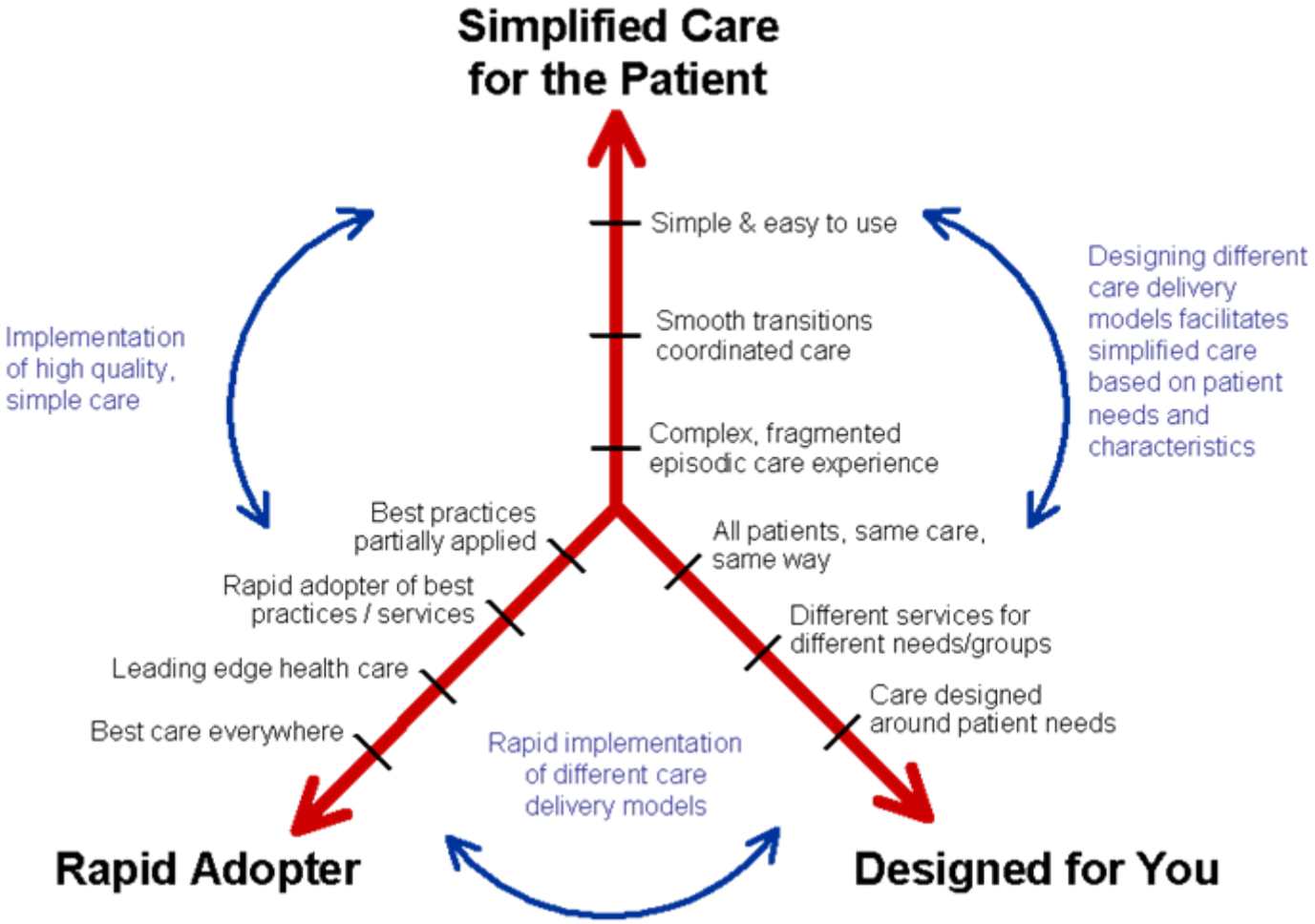
Aurora's Long-term Strategy



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Aurora's
2008 – 2010 Strategic Plan

2008	**2009**	**2010**
• CM Impact of 3.1	• CM Impact of 3.1	• CM Impact of 3.1
• Lean Implementation 5:1	• Lean Implementation 5:1	• Lean Implementation 5:1
• Achieve 30% Loyalty	• Achieve 40% Loyalty	• Achieve 50% Loyalty
• Caregiver Engagement 65%	• Caregiver Engagement 68%	• Caregiver Engagement 70%

Aurora's Long-term Strategy

- Aurora's Approach to Quality
- Outcomes
- Organizational Learning

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2010 – 2012 Strategic Plan

2010	2011	2012
• CM Impact of 3.1	• CM Impact of 3.1	• CM Impact of 3.1
• Lean Implementation 5:1	• Lean Implementation 5:1	• Lean Implementation 5:1
• Achieve 70% Loyalty	• Achieve 90% Loyalty	• Achieve 100% Loyalty
• Caregiver Engagement 71%	• Caregiver Engagement Top Q	• Caregiver Engagement Top Q
• Growth	• Growth	• Growth

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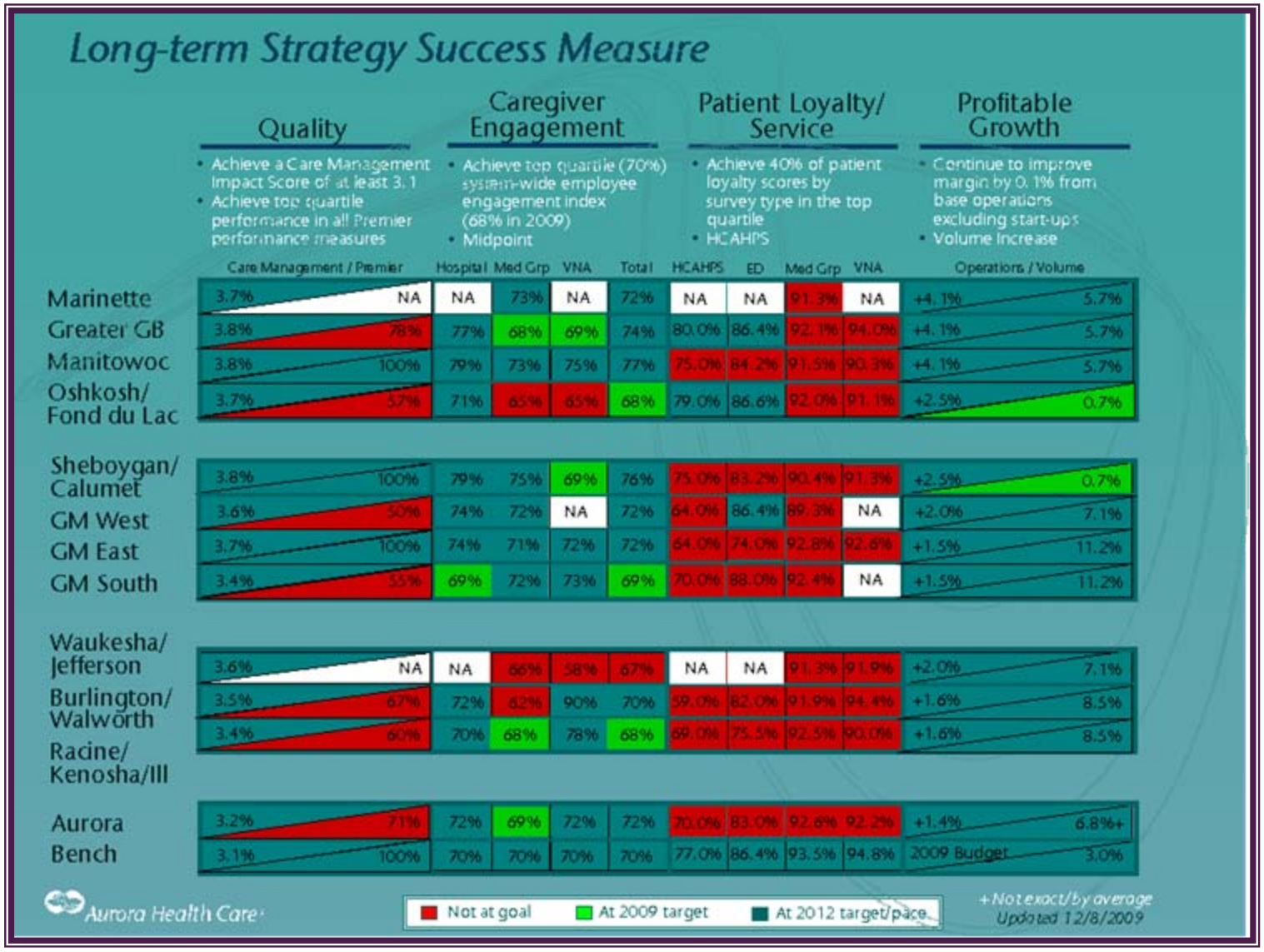
- Boards on Board
- Long-term Strategy Measures
- Hidden QUEST


Long-term Strategy Success Measure
Quality
• Achieve a Care Management Impact Score of at least 3.1
• Achieve top quartile performance in all Premier performance measures
Caregiver Engagement
• Achieve top quartile (70%) system-wide employee engagement index (68% in 2009)
• Midpoint
Patient Loyalty/ Service
• Achieve 40% of patient loyalty scores by survey type in the top quartile
• HCAHPS
Profitable Growth
• Continue to improve margin by 0.1% from base operations excluding start-ups
• Volume Increase
Care Management / Premier
Hospital
Med Grp
VNA
Total
HCAHPS
ED
Med Grp
VNA
Operations / Volume
Marinette
3.7% NA NA 73% NA 72% NA NA 91.3% NA +4.1% 5.7%
Greater GB
3.8% 78% 77% 68% 69% 74% 80.0% 86.4% 92.1% 94.0% +4.1% 5.7%
Manitowoc
3.8% 100% 79% 73% 75% 77% 75.0% 84.2% 91.5% 90.3% +4.1% 5.7%
Oshkosh/ Fond du Lac
3.7% 57% 71% 65% 65% 68% 79.0% 86.6% 92.0% 91.1% +2.5% 0.7%
Sheboygan/ Calumet
3.8% 100% 79% 75% 69% 76% 75.0% 83.2% 90.4% 91.3% +2.5% 0.7%
GM West
3.6% 50% 74% 72% NA 72% 64.0% 86.4% 89.3% NA +2.0% 7.1%
GM East
3.7% 100% 74% 71% 72% 72% 64.0% 74.0% 92.8% 92.8% +1.5% 11.2%
GM South
3.4% 55% 69% 72% 73% 69% 70.0% 88.0% 92.4% NA +1.5% 11.2%
Waukesha/ Jefferson
3.6% NA NA 66% 58% 67% NA NA 91.3% 91.9% +2.0% 7.1%
Burlington/ Walworth
3.5% 67% 72% 62% 90% 70% 59.0% 82.0% 91.9% 94.4% +1.6% 8.5%
Racine/ Kenosha/Ill
3.4% 60% 70% 68% 78% 68% 69.0% 75.5% 92.5% 90.0% +1.6% 8.5%
Aurora
3.2% 71% 72% 69% 72% 72% 70.0% 83.0% 92.6% 92.2% +1.4% 6.8%+
Bench
3.1% 100% 70% 70% 70% 70% 77.0% 86.4% 93.5% 94.8% 2009 Budget 3.0%
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Not at goal
At 2009 target
At 2012 target/pace
+Not exact/by average
Updated 12/8/2009

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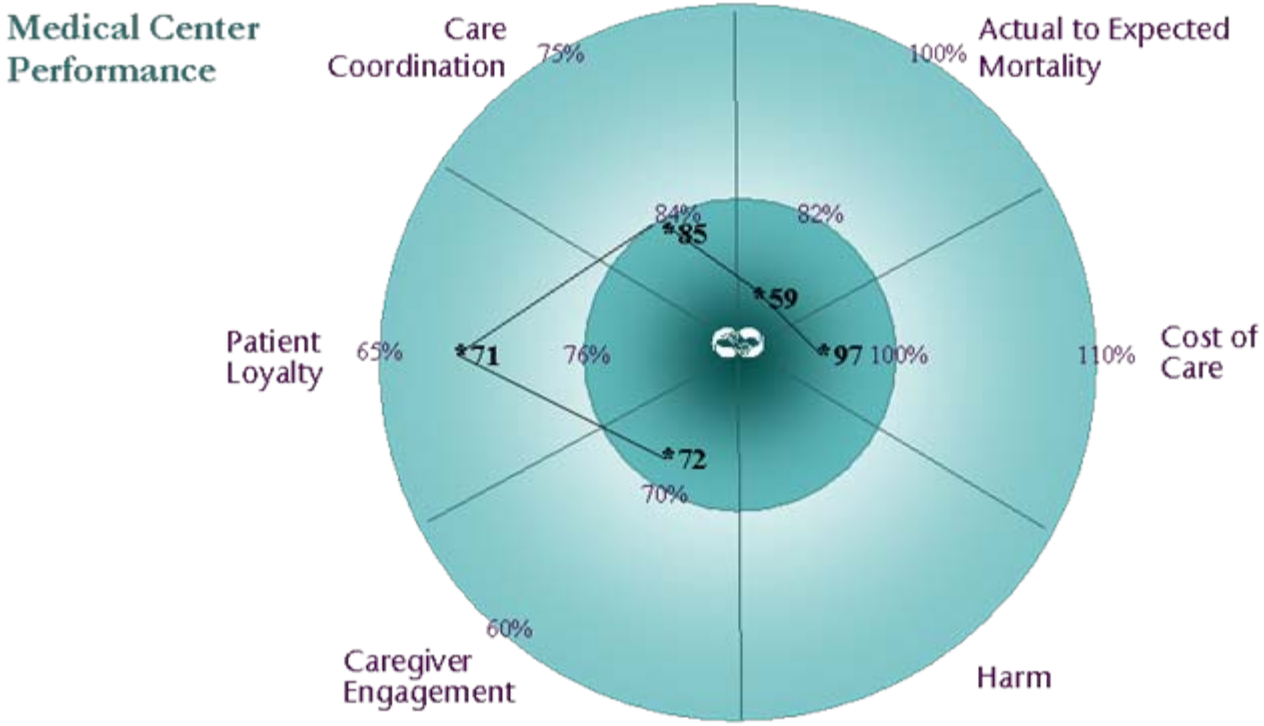

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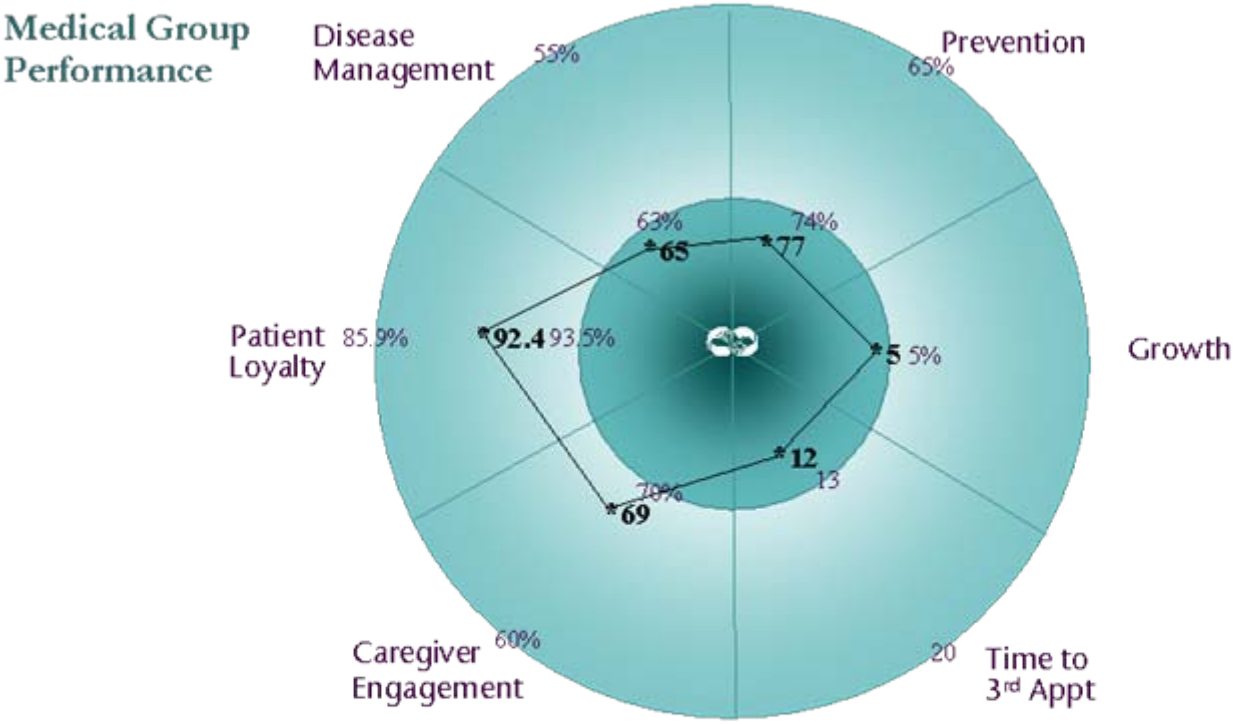

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QUEST & HQID

- Pay-for-Performance

Strategic Implementation Framework

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Overarching theme

Execution / Implementation

Key components

A

Targets

Metrics

- Detailed
- Time bound
- Forecasted

Focus Areas

- Quality / #1 Priority
- Employee engagement
- Patient Loyalty
- Growth/Finance

B

Work Plans

Milestones

- Key Actions
- Projects
- Course correction

Previews Quarterly

Ongoing mechanism

Strategic Implementation

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- Translates long-term to mid- and short-term: Strategic plan directly links to 1-yr actions and budget
- Top down – “Start with the answer” and build on system strategy and guidance: values / strategies / key actions + targets
- But also bottom up – operating and staff leaders own. Develop the strategies and tactics to achieve key actions and targets
- Focuses on execution of strategies through Strategic Projects (work plans)
- Matrix teams – Dyads are leading cross-region teams (Quality, Patient Loyalty, Employee Engagement, Growth)
- Key stewards of the process – administration, process improvement & employee & organizational development
- Tracks progress – accountability with course corrections

Strategic Implementation Leadership

- Single Person of Accountability
- Aligned Incentives
- Brief and Debrief
- Monitor Progress

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Quarterly Business Preview

- Methodology for “implementation” of strategy
- Connects strategy to operations
- Core element: Projects and work plans
- “20/80” Rule
  - 20% numbers, 80% actions
  - 20% history, 80% future action plans
- Creates accountability

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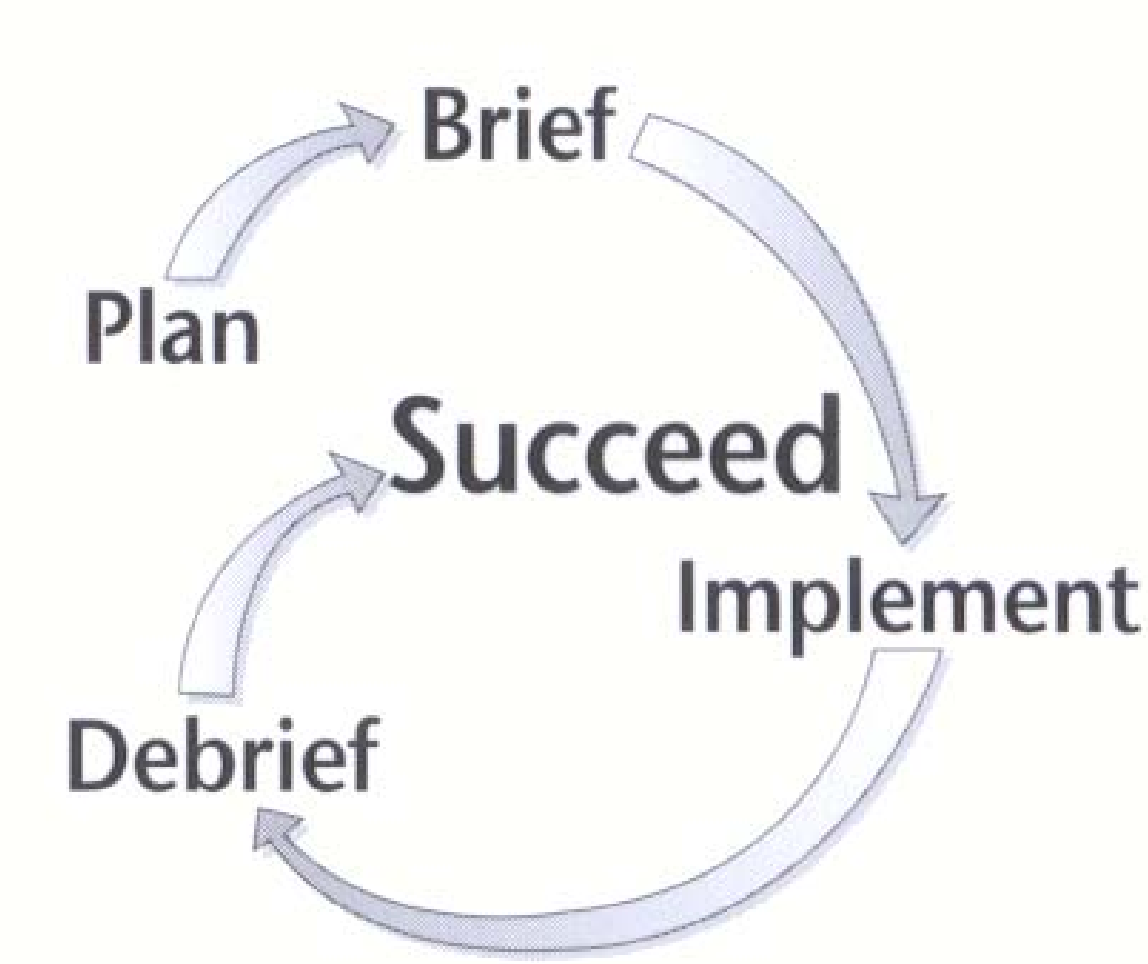
Flawless Implementation



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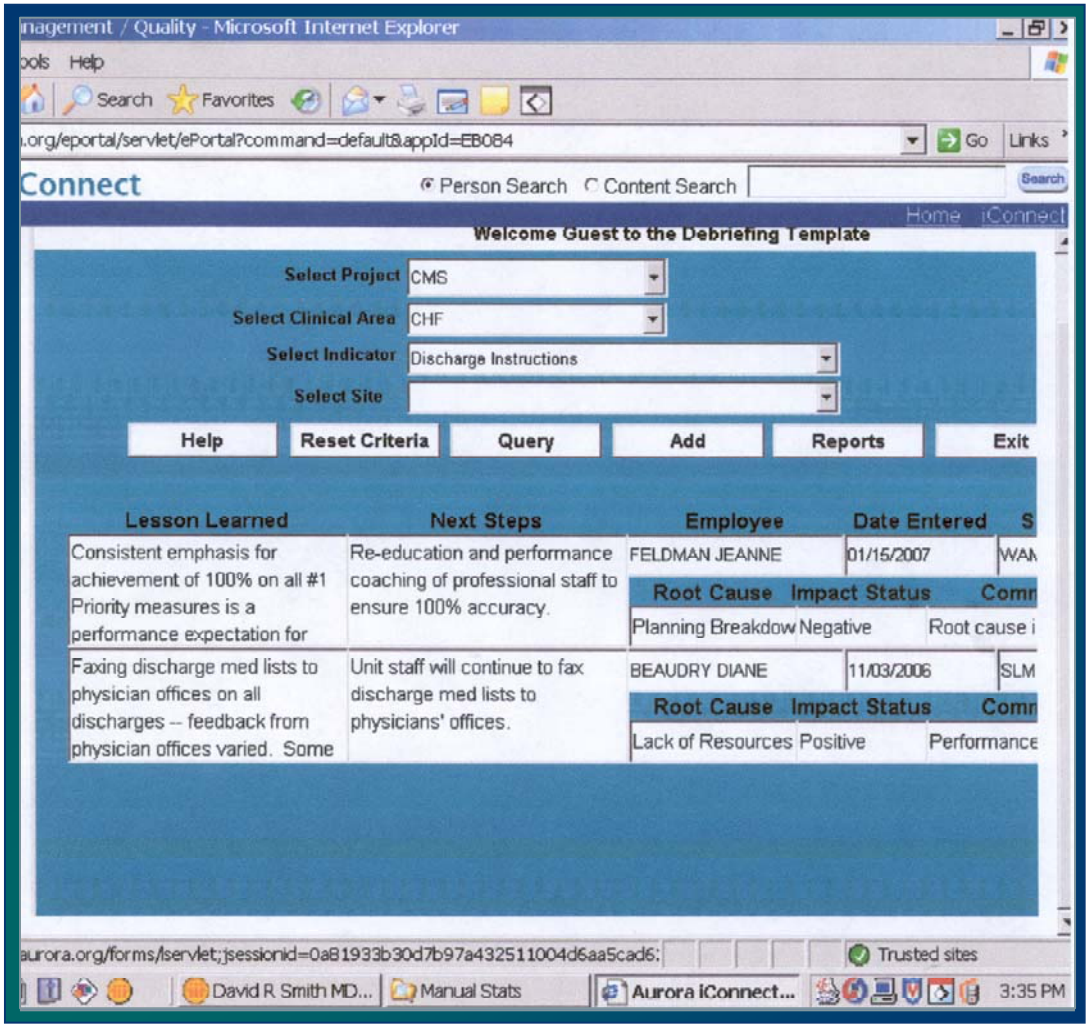
Lesson's Learned



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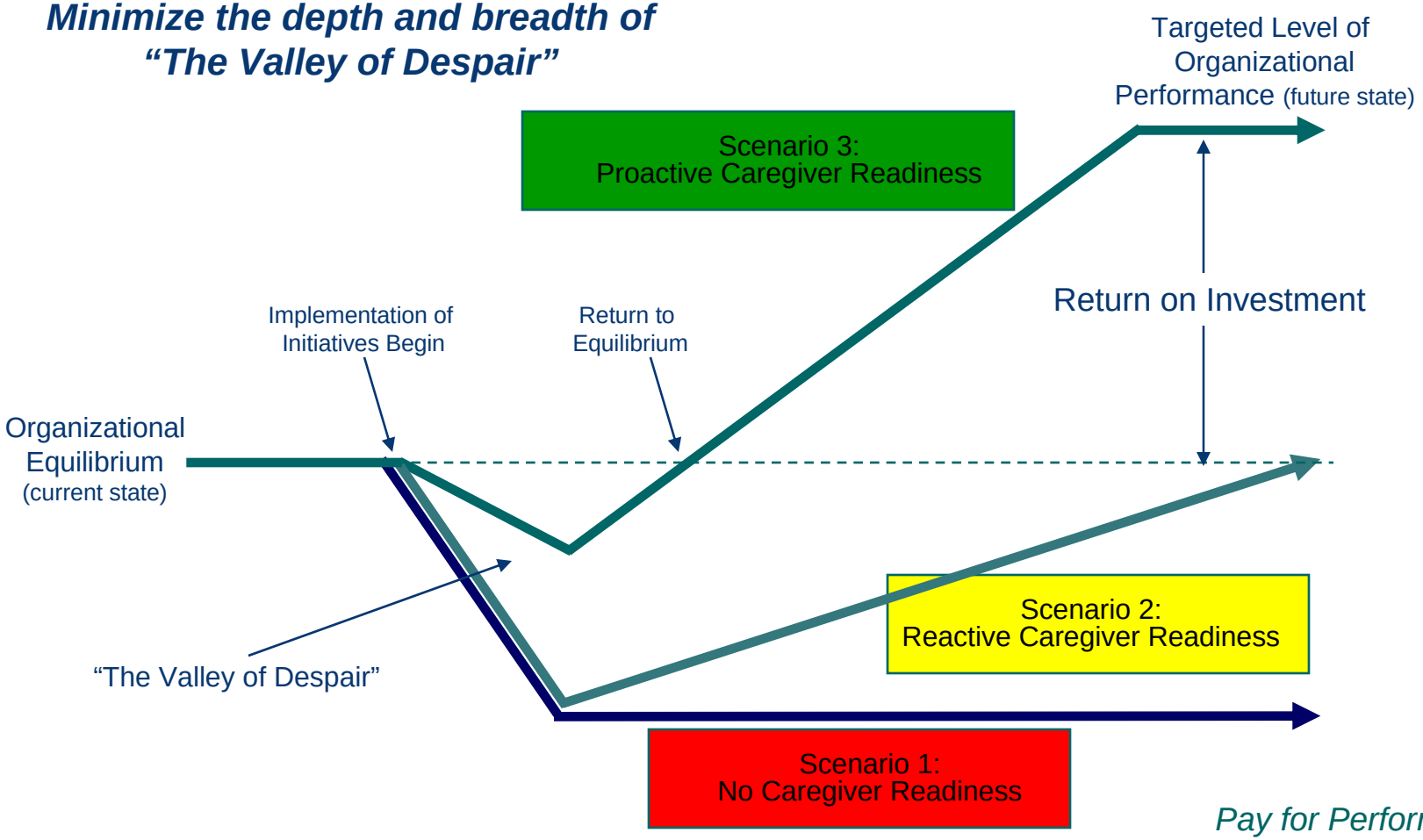
Addressing Change

The Caregiver Readiness Objective:
Minimize the depth and breadth of "The Valley of Despair"



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Lesson's Learned

1. Single accountable person
2. Set objective
3. React to plan
4. Debrief
5. Share lesson's learned
6. Administrative/clinical leadership engagement

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Care Management Growth

- Accountable Care Models
- Pay-for-Performance
- Interwoven with Strategy

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Questions?