The Evolving Role of the Physician Advisor

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In Olden Times (late 1990's)

- Too many programs just "happened"
 - Little or no planning or rationale
 - Lack of executive support/understanding
 - Physicians who were most supportive of case management discovered one day that they were physician advisors
 - On the job training only
- Until recently, little opportunity for networking of new PA's

What is a Physician Advisor Today?

- There is no single definition
- "Operationalists"
- A Physician Advisor (PA) provides advice and support to processes related to the medical necessity of medical services as part of care management and utilization review activities.
 - Key elements include advising, consulting, teaching, analyzing and serving as a liaison
 - Cross organizational layers and functional silos

Physician Advisor Role Today

- Secondary physician review for medical necessity/status determination
- Case management support
 - Manage care team rounds
 - Discharge planning and other support
- Concurrent commercial denial management
- Utilization management
 - Length of stay
 - Resource use
 - Internal patient flow (level of care transfers)

Physician Advisor Role Today

- Coding support and education
- Recovery audit denials and appeals
- Clinical documentation improvement education (ICD-10 conversion)
- Quality improvement/patient safety support
 - Readmissions, process improvement efforts
- Support to patient satisfaction improvement efforts
- General physician and administration liaison and education efforts

What Does the Future Hold for Physician Advisors?

Future of Healthcare

- Healthcare is a \$3 Trillion economy
 - Providers consume over 60% of total
 - Everyone is in self-preservation mode using selfserving data and language (protect your silo!)
- A demographic nightmare is coming
- No new money coming
- A revolution in care delivery coming
- Industry consolidation is here now but bigger does not equal smarter
 - Hospital and physician need to work together
 - A bigger role for physician advisors?

Disruptive Innovation Theory

- Clayton M. Christensen Harvard University
- The theory helps explain how complicated, expensive products and services are over time converted into simpler, more accessible and affordable ones of good enough quality

- Examples: Kodak, IBM, music industry

- Highly successful companies have very successful business models
 - Hospital business models of the last century were characterized by increasingly complex and costly technology favoring a centralized care model.

Disruptive Innovation Theory

- A key element of DIT is that it never makes sense for the successful company to change its business model...until it is too late
- The disruptive innovation impacting hospitals is decentralization of services
- We are just beginning the decentralization process
- "The only way that market leaders...can survive 'disruptive innovation' is by disrupting their existing business themselves." *C. Christensen*
- Will hospitals be an exception to the theory?
- Government schizophrenia

PA's and New Innovations

- Think population health management and spectrum of care
 - Think outside your hospital "box"
- System role in designing new approaches to patients requiring acute care and interpreting the inevitable rules governing the choice of setting
 - Hospital
 - Hospital at home
 - Acute care at a post acute care facility
- "Air traffic control" role with utilization review, case management support, and patient placement and flow decisions

PA Programs and the Future

- PA's can be a critical element to generating the income to allow adaptation/innovation
 - PA's bring clinical and operational knowledge
 - Administrative consolidation occurring across the country and the new generation of leaders often does not have front line clinical experience
 - Documentation education will be increasingly important to ensure proper payment is received and kept
 - Search for non-physician means of documentation capture to reduce physician time demands and stress

PA Programs and the Future

- PA's can help the organization achieve legal and regulatory compliance
 - Multiple audit types, OIG increasingly focused on clinical service delivery
- PA's can help lead their organization and medical staff through the transition to the future of healthcare
- PA's are extremely expensive thus you need a relentless focus on creating value
 - Increase revenue, decrease cost and improve quality and patient safety

What Else Does the Future Hold?

- A "specialty" growing in importance and numbers true "operationalists"
- As the hospital world is transformed, leadership opportunities will increase
- With rising visibility, expectations and accountability will increase
 - The best docs will stay and more will be attracted and those that don't provide value will go by the wayside
- How will you fit in?

Education Resources

- ACPA American College of Physician Advisors
- ACMA American Case Management Association
- ACDIS Association for Clinical Documentation Specialists
- AAPL American Association for Physician Leadership (formerly ACPE)
- RAC Relief



 For additional information or to be added to the RAC Relief Listserv, please direct requests to:

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