



Advancing High Performance Health

AMGA Foundation

**Acclaim Award**  
*St. Elizabeth Physicians*

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**2020 Recipient  
Narrative:  
Development of a  
Value-Based  
Performance Department**



# St. Elizabeth Physicians: Developing a Culture of Caring for Our Patients and Caring for Each Other: An Organization's Evolution to High-Performance

*2020 Acclaim Award Recipient*

*Narrative: Development of a Value-  
Based Performance Department*



In March of 2020, AMGA named St. Elizabeth Physicians as the recipient of its 2020 Acclaim Award. The Acclaim Award, supported by AMGA Foundation, the association's nonprofit arm, is designed to recognize and celebrate the successes that medical groups and other organized systems of care have achieved in improving the value—the quality and cost of care—of the healthcare services they provide to their communities. It honors organizations that are meeting the IOM Aims for Improvement and are taking the necessary steps to become a High-Performing Health System™ as defined by the AMGA.

As part of the Acclaim Award application process, St. Elizabeth Physicians was asked to highlight narratives describing the design and deployment of major components—projects, phases, or tactical plans—that were part of its plan to transform the way it delivered health care in order to more fully achieve the AMGA High-Performing Health System™ attributes, improving both the quality and cost of care. Here, we share one of its narratives.

## **Early Stage Resiliency**

In 2016, St. Elizabeth Physicians embarked on a journey to achieve acceptance from providers and administrators to embrace the transition to a value-based reimbursement model. Nearly 100% of the organization's revenue was linked to the traditional fee-for-service reimbursement model, and previous efforts to take risk in value-based contracts had proven disadvantageous. In its first downside-risk contract, St. Elizabeth Physicians lost nearly \$5 million, effectively ending organizational interest in taking on more risk.

Despite this experience, and in response to Comprehensive Primary Care Plus (CPC+) program requirements, the Kentucky-based medical group decided to make a small investment in value-based care and hired a single nurse to lead efforts to rein in utilization. This evolved into a deliberate and broad investment in population health, including dedicating an entire division of the group to Clinical Transformation. One department borne from this investment was the Value-Based Performance Department staffed with clinical and non-clinical associates responsible for the successful management of value-based contracts covering nearly 170,000 patients in 2019.

The infrastructure developed to succeed in a mixed reimbursement environment, where a majority of revenue is associated with a traditional fee-for-service reimbursement model and value-based contracts with upside-only shared savings opportunities, has proven invaluable in guiding efforts to improve the quality of care the organization delivers to patients.

## Crucial Team Components

The Value-Based Performance Department—comprised of pharmacists, pharmacy technicians, nurses, analysts, and other non-clinical support personnel—serves as a key cog in the population health apparatus at St. Elizabeth Physicians. Working together with managed care partners, the Value-Based Performance Department takes a completely collaborative approach to managing the patient populations in the medical group's value-based contracts. Each value-based contract is assigned a value-based consultant, a registered nurse who serves as the primary point of contact and subject matter expert for that particular contract and the patient population it manages. These consultants are integral to the success of the organization regarding value-based reimbursement.

Team members serving in these roles understand the specific payer metric definitions, populations covered, and performance data for their assigned contracts. Functioning as a conduit between the payers and the administrative and clinical support teams, these consultants often identify and correct data issues, payment discrepancies, and other challenges before the payer or organization even recognize the issue. By effectively helping to bridge the gap between provider and payer and ensuring that activities completed in and outside the practice are effectively documented and communicated to the payer, these consultants have saved the organization millions of dollars in potentially lost revenue.

Patient navigators, both clinical and non-clinical associates, provide outreach to patients to complete pre-visit questionnaires and address open care gaps. These associates contact patients and complete much of the work required to tee up an annual wellness visit for the provider. They also support care gap closure by ordering labs, ordering and scheduling screenings, and identifying other patient needs.

The Value-Based Performance Department also houses the Ambulatory Care Pharmacy Team. The six pharmacists in this department serve as a clinical resource for patients, providers, and practice associates. They can perform comprehensive medication reviews, post-discharge medication reconciliations, as well as support medication adherence measures and develop processes for improving performance on various value-based contract quality measures. The central team of pharmacy technicians manages medication refill requests via protocol for 17 medication groups that were defined and developed by the organization's Quality & Compliance Committee. These medication refill request protocols were loaded into the organization's electronic medical record and help offset the 50,000 monthly refill requests submitted through the patient portal.

A health service analyst is responsible for managing and displaying performance data for all contracts.

A major challenge encountered by St. Elizabeth Physicians was the effective deployment of resources to the value-based contracts. Each value-based consultant has the capacity to manage contracts of approximately 10,000 patient lives, so budgetary and personnel constraints have hindered the organization's ability to hire enough consultants to cover the 170,000 patients in value-based contracts.

By effectively showing the value of investing in human resources through shared savings success, the medical group became more willing to hire personnel into roles and functions that would traditionally be considered non-revenue generating.

## **Outreach and Engagement**

Another challenge faced by the department and organization was building engagement with providers to enable the centralization of outreach and ordering of labs and screenings. Providers feel a strong sense of ownership for the care of their patients, and handing off some of that responsibility to others, especially those who are not working directly in the practice setting, is a process that requires trust and buy-in. Any early misstep or error was amplified by the increased pressure and discomfort that comes along with change. As such, communication from the Value-Based Performance Department to its operational and clinical partners was necessarily improved.

Overcommunicating the “why” and “how” of any new process became imperative. By engaging providers and administrators in the change process the department has been able to gradually expand its scope. Work that has traditionally been handled by associates in the practice now happens from a centralized location by associates who may have never met the providers they support. This change has been dramatic and effective.

As the Value-Based Performance Department evolved over the last three years, it became apparent that success requires a number of key elements: that St. Elizabeth Physicians continues to value and support the work of, and need for, the department; that administrative leadership shares the “why” with all levels to build engagement; maintaining a flexibility and ability to change processes both inside and outside the walls of the practices; and a mechanism to share successes across the organization.



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