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Lean footprint model improves patient access, decreases costs

In 2014, 8 million individuals signed up for health insurance through the federal healthcare marketplace. According to the most recent numbers released by the White House, more than 11 million signed up in 2015. With the boom of new patients to the market, Novant Health estimated that in the greater Winston-Salem area alone at least an additional 23 primary care providers would need to be added by 2019 to keep up with growing demand.

Higher volumes usually mean more compensation in the business world, but that's not the case when it comes to healthcare. "The fact of the matter is, our costs are going up and reimbursements are going down across the board," said Marty Lambeth, vice president of Novant Health Clinic Services. "As an industry, we need to find more efficient ways to deliver the same high-quality care and to shield our patients from any negative effects of our changing landscape."

For Novant Health, implementing a lean footprint plan that uses low-cost resources to bolster convenient care is one way to maximize efficiencies and lower costs while also improving access for patients.

What is a lean clinic?

At its core, the focus of a lean clinic — named after the management principle — is convenient care that is often placed in locations where coverage gaps exist. "We want to provide the care the community needs where and when they need it, whether that's a primary care office, urgent care or retail clinic," Lambeth said.

As part of the lean footprint plan, Novant Health has analyzed every part of the clinic experience — from who works there and where it's located, down to where the printer is placed in relation to staff work spaces. To reduce costs, Novant Health has reduced the footprint of lean clinics by utilizing modular equipment and removing conference rooms and individual physician offices.

Lean footprint model improves patient access, decreases costs continued

Novant Health's original lean clinic, Wallburg Family Medicine, opened in 2013. Some locations take on multiple roles as needs change. Novant Health Friedberg Family Medicine in Winston-Salem, N.C., operates as a primary care clinic during regular business hours. It is staffed by one physician and one certified physician assistant. At 4 p.m., the after-hours clinic physician assistant arrives and the clinic begins taking walk-in appointments. At 5 p.m., the regular clinic staff heads home for the day, but walk-in care continues through 8:30 p.m.

"We are essentially running two separate clinics out of the same space, eliminating the need for overhead costs on a second location," Lambeth said. "In our stand-alone locations, we have developed a floor plan that maximizes square footage and minimizes cost."

Changing the staffing model

An integral part of moving to the lean footprint model for Novant Health was making a shift in how clinics are staffed.

"Everyone benefits when our staff members are working at the top of their license," Lambeth said. "By utilizing highly skilled nurse practitioners and physician assistants under the guidance of a physician, we can provide basic care at a lower cost and allow our physicians to focus on more complex cases."

To meet the growing need for advanced practice clinicians in the lean footprint model, Novant Health has proactively built relationships with schools and nursing programs across its market areas. In addition, redundancies have been eliminated in the credentialing process so that new graduates can transition into the workforce more quickly.

"The demand for primary care is still increasing and we're struggling to keep up," Lambeth said. Within three months of opening, Wallburg Family Medicine surpassed patient volumes projected for its first year.

"As we move into a population health model of care, we need to continue to close the gaps in patient access," Lambeth said. "The lean footprint model has proven to be an effective tool to help us achieve that goal."

Championing the hard conversation about end-of-life care

Conversations about death and life-threatening illness are difficult. A 2013 Pew Research Center poll found only 37 percent of adults had thought a great deal about what medical treatment they wanted for their end-of-life care, while 35 percent had given the issue some consideration. About 27 percent hadn't thought about it all. Avoiding these uncomfortable conversations can create real problems for loved ones, especially in North Carolina, which has some of the country's strictest requirements when it comes to creating advance directives. Individuals need to express their healthcare wishes in the event they cannot speak for themselves. The best way of making sure that those wishes are known and honored is by executing an advance directive, which is a legal document.

North Carolina requires that advance directives must be signed by two qualified witnesses, as well as acknowledged by a notary public. Only two other states — West Virginia and Missouri — require both witnessed

Championing the hard conversation about end-of-life care continued

and notarized documents. North Carolina law also requires hospitals to ask patients about advance directives for each hospital admission. In many instances where an advanced directive does not already exist, locating witnesses and a notary in a moment of crisis when the documents are most needed can be difficult, robbing families of time with their loved one.

Lobbying for changes

To make it easier to make an advance directive, Novant Health is working with North Carolina legislators to make legal requirements less restrictive. State Rep. Donny Lambeth, who represents District 75 of Forsyth County, has introduced a bill in the North Carolina Legislature addressing this issue. He is asking the law be changed so that either two witnesses or an acknowledgment by a notary public would be sufficient to make advance directives binding.

As changes to the state's laws are being considered, Novant Health is trying to ease the stress of end-of-life planning for patients and families. Last year, the organization launched Choices and Champions, a free service that provides the tools needed to create an advance directive, ideally before it's needed. Today, with so many medical advances, patients have many more choices about how they'd like to be cared for if a serious accident or illness occurs.

Patients are encouraged to think about and discuss their healthcare choices. It's important for them to designate a healthcare champion, someone who will speak for them if they ever lose the ability to make and communicate their own healthcare decisions. Simply naming a person, however, is not enough. They need to talk with their designated person about the things that matter most and thoughts they have about what types of care they would want or not want. Discussing end-of-life wishes — and making them legally binding — helps patients, their loved ones and their care team in the event of sudden illness or injury. For those who need extra help putting their wishes in writing, Novant Health's Choices and Champions navigators are available to help fill out the necessary paperwork.

"It's a powerful gift to give to your family," said Tricia Gardner Lytle, chaplain at Novant Health Huntersville Medical Center in Huntersville, N.C. "It's a tremendous burden on families otherwise. They feel like they have your life in their hands."

As an industry leader, Novant Health is committed to initiating the hard conversations, both at the state and local levels, when it comes to advance directives and improving end-of-life care. The North Carolina team is working to make it easier to set up an advance directive by advocating for changes in the law. Throughout the organization, work is underway to change the culture surrounding these issues so that providers know and are able to honor patients' wishes related to end-of-life care.

Visit the [Choices and Champions website](#) for more information regarding how Novant Health is transforming end-of-life care.

Telemedicine's promising future

Virtual connections dominate the business landscape everywhere you turn. Whether you are shopping for shoes, looking for a news update or booking a hotel reservation, many of these interactions start online, and technology has dramatically changed how Novant Health does business and seeks information.

It has taken health systems a bit longer to provide virtual care options. In recent years, consumers are seeing more online offerings from healthcare providers, including telemedicine. Health systems and providers across the country are offering online appointment scheduling, e-visits and video visits with providers. The move is changing the face of healthcare, making it more accessible, more mobile and, ultimately, more affordable.

What's more, Novant Health is committed to uncovering innovative ways patients can use technology to their benefit, a more deliberate approach than simply offering new tools for technology's sake.

"One of the most important components to delivering remarkable care comes through patient engagement," said R. Henry Capps Jr., MD, senior vice president and chief operating officer for Novant Health medical group.

"While we are able to offer the most innovative, affordable and convenient telemedicine options to our patients, our strategic approach continues to focus on the patient instead of the technology, and this has allowed our patient engagement to continually increase."

Setting up a telemedicine program also provides a convenient new access point. Those consumers who are already actively engaged online are excited about this development, and there's tremendous growth potential for this market.

One of these growth opportunities arises with the reimbursement and payment process. Currently in North Carolina, Novant Health is only compensated for professional fees through an agreement with the N.C. Statewide Telepsychiatry Program (NC-STeP). This payment supports behavioral health assessments and consultations completed by licensed counselors and physicians in the emergency department. These assessments are not currently a billable service, although the organization continues to actively pursue agreements with payors.

E-visits and video visits are currently covered by three insurance payors and are also available as an out-of-pocket expense for all patients. While many patients are willing to pay for this convenience, some may not be able to afford it or will not be willing to pick up the fee.

For patients inclined to pursue convenience, e-visits allow patients to fill out a questionnaire about symptoms, submit the form to their provider and receive a recommended course of treatment. This feature is meant for patients suffering from common symptoms and illnesses, such as cough, pink eye, diarrhea, sinus problems, vaginal infections or urinary issues. Video visits allow patients to have a secure, online appointment with their provider. Patients can use these visits for nonemergent health concerns such as follow-up appointments or medical check-ins.

Throughout the country, telemedicine brings critical services to rural areas where specialty care is unavailable, and specialists can be a hundred miles or more away. The challenge with this is Medicare currently only compensates for telemedicine care for "rural" sites if they meet specific qualifications.

The news out of Washington in mid-March was that the "Obama administration announced that it would waive onerous restrictions on how Medicare pays for" telemedicine for a new type of accountable care organization

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(ACO) being created, according to a Medscape article. That affects a select few qualifying for the new ACO, but the big news here is that it's a major move in the right direction by Medicare, the largest payor in America, and the entity that helps set the reimbursement standard.

While the healthcare industry works to overcome challenges in keeping up with the latest trends, Novant Health is staying ahead of the curve by offering useful tools that patients want and appreciate at prices they can afford. Technology will continue to play a major role in how the organization delivers on its brand promise while always keeping patients' needs top of mind.

Breaking down patient healthcare barriers: Q&A with Novant Health's chief medical officer



Tom Zweng, MD, serves as Novant Health's executive vice president and chief medical officer. We've asked him to speak to how Novant Health is addressing some of the barriers patients face in taking control of their healthcare.

What are the most significant barriers you see in healthcare and how is Novant Health addressing them?

Access and affordability are the most significant barriers to healthcare today. Our promise is to reinvent the way our patients experience care with us, because we know our patients want to be able to get the care they need when they need it — and it needs to be affordable.

One way Novant Health has made it more convenient for patients is by providing better coordination and ease of access with our physician partners. We asked the Novant Health medical group providers to open up their schedules online, and while this was something we hadn't done before, we know this move was the right thing to do for our patients. Another challenge was extending hours for our patients. We came to the realization that patients don't necessarily seek care between 8 a.m. and 5 p.m., so we reevaluated how we could best meet their needs. As a result, we extended our office hours so care is accessible when and where our patients need us.

We have also changed how we partner to care for our patients. We now have hospitalists who are singularly focused on inpatient care, while primary care providers remain in their offices. This way, our primary care offices offer more access because the internists are no longer rounding from 6 to 9 a.m. on their patients who are in the hospital.

Not losing sight of the importance of affordability, another way we're ensuring our patients have better access is with video visits and e-visits. Video visits with medical group providers cost only \$50 and e-visits cost \$40. Keep in mind that both are available for select medical appointments.

What challenges has Novant Health addressed in its efforts to remove barriers for patients?

Flexibility is perhaps one of the greatest opportunities for our organization as we work to overcome barriers and respond to our patients and their needs. One way we ensure that we are accommodating our patients is through

Breaking down patient healthcare barriers continued

the electronic health record (EHR). Whether our patients are visiting their primary care physician, the urgent care clinic or the emergency department, all providers have access to their online records and are taking steps to be a part of their care. When people ask me who they should see as their physician, I provide two important things to look for — that their physician is board-certified and that their physician utilizes an EHR. These two qualifications ensure that the patient's physician is connected to the full spectrum of care.

How important are advance directives in healthcare?

Advance directives are fundamental in driving the care our patients expect and desire. We can do a lot in caring for our patients, but if we don't ask them what they want, we aren't fully considering what's best for them. It's important to slow down, have the conversation, and explore what resources and options we need to consider in order to care for the patient in the manner that they wish. Just having an advance directive is not enough. Patients need to inform their physicians and family members of their wishes by having authentic conversations so everyone is on the same page. When our physicians are aware of the patient's wishes, they can better support both the patient and their family in difficult situations. As well, unplanned decisions made during the final weeks of a patient's life can lead to excessive expenses that may place an unexpected financial burden on one's family. If a patient's wishes are known, some of the pressure is alleviated from the family because they will be confident to make decisions in line with the patient's predetermined wishes.

How will the move from volume to value remove barriers for patients to take control of their health?

Moving from volume to value is changing the way we look at care. We are shifting our focus to look at the entire healthcare continuum. Instead of a patient leaving an appointment or being discharged from the hospital with the responsibility of maintaining his or her own care, patients have partners by way of a care team that coordinates their care.

Ultimately, our goal is to encourage patients to take control of their health and make those connections to realize true value in their care. This is also how we deliver on our commitments of "voice and choice" and authentic personalized relationships.

With the expanded use of telemedicine to treat patients, how does Novant Health ensure patients continue to receive quality healthcare and have a positive experience — even from a distance?

Telemedicine is a powerful tool. We use telemedicine to give added convenience to our patients, and we've seen great successes from its use. For example, Novant Health is using telemedicine in the emergency room with psychiatry. Our ER physicians have found telemedicine extremely valuable as it offers a level of care that otherwise may not be available. Our psychiatry patients have 24/7 access to the ER physicians. We do not see new patients through telemedicine in our ambulatory offices, but it has the potential to be extremely effective for follow-up care. Regardless of how we reach patients — be it through traditional or nontraditional means — our providers focus on delivering quality care when and where our patients need it.

How can partnerships, mergers and acquisitions assist patient care?

There are a lot of benefits for patients as a result of partnerships, mergers and acquisitions. Eliminating duplication of services lowers the cost of healthcare, which directly affects our patients. Mergers and acquisitions help make sure we have the tools available to care for our patients — perhaps giving a smaller hospital access to something such as the electronic health record. In addition, standardization in healthcare systems is becoming a common practice. As we see best outcomes and lower lengths of stay at one facility, that information will be shared across the system and the level of care will be standardized. These changes will impact our entire organization on various levels as we will be asking our teams to consider doing things differently than done in the past. With change comes unsettlement, but we have to get to a place where we recognize change will improve our processes and patient care.

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Novant Health experts are available for more information on these and other topics.

To arrange a conversation or to suggest a story, please contact [Caryn Klebba](#).

About Novant Health

Novant Health is a four-state integrated network of physician clinics, outpatient centers and hospitals that delivers a seamless and convenient healthcare experience to our communities. The Novant Health network consists of more than 1,200 physicians and 26,000 employees who make healthcare remarkable at nearly 500 locations, including 14 medical centers and hundreds of outpatient facilities and physician clinics. Headquartered in Winston-Salem, N.C., Novant Health is committed to making healthcare remarkable for patients and communities, serving more than four million patients annually. In 2013, Novant Health provided more than \$566 million in community benefit including charity care and services. Novant Health is one of the top 25 integrated health systems in the United States and was named a top 50 “Best Places for Diverse & Women Managers to Work” by Diversity MBA Magazine.

For more information, please visit our website at [NovantHealth.org](#). You can also follow us on [Twitter](#) and [Facebook](#).