

2018 Teleconference Schedule TEST
(11-28-2018)

REGISTER FOR TELECONFERENCES ON OUR [HOMEPAGE](#)
Find materials for these teleconferences [at our website](#)

January 15, 1-2 pm CT

Once More, With Feeling: Emotional Design

Paul Weaver, VP User Experience, Cerner. While all design elicits an emotion, how many people today can honestly say they design their solutions with the customer's feelings in mind? Paul discusses the principles of emotional design, both from his own experiences and learning at Nintendo, Ion Storm and Disney, as well as highlighting other best practices and principles that he has picked up along the way. Sharing both in-game and in-app examples of emotional design in play, Paul will share some new perspectives to apply to future design work in healthcare settings, and the role that user experience (UX) plays in product development.

January 17, 1-2 pm CT

Developing a Better Patient Portal: Evaluating Portals Based on the Likelihood of Patient Use

Elizabeth Sprouse, Emory University's Rollins School of Public Health, Applied Public Health Informatics and Julie Hollberg, MD, CMIO, Emory Healthcare. Elizabeth and Dr. Hollberg share the results of a research effort to develop a scorecard to arm healthcare leadership with the ability to strategically design and implement patient portals that patients will use (i.e., technology acceptance). This scoring approach, developed from analysis of academic literature review and interviews with healthcare leaders across the country, provides a clear process for organizations to use when evaluating their current portals on likelihood of patient use and allocating future work to drive patients to actively use their portals. Using this scoring approach can lead to improved portal design and implementation, leading to increased use and patient engagement, with positive patient care results.

January 18, 1-2 pm CT

Achieving Clinical Effectiveness to Improve Healthcare Delivery and Outcomes

Denise Basow, MD, President and CEO of Clinical Effectiveness, Wolters Kluwer Health. The impact of using evidence-based clinical decision support (CDS) solutions is regularly associated with improved patient health and provider performance. For patients, it means receiving better care with less diagnostic errors, avoiding adverse events, and shorter stays in hospitals. But the ultimate priority for healthcare providers is balancing the quality/cost equation, meaning consistently providing the best possible care while optimizing teams and costs. Dr. Basow, discusses how a more holistic approach coupled with new developments and advances in information technology and CDS can help achieve clinical effectiveness. *This teleconference is part of the [Clinical Decision Support Collaborative](#).*

January 23, 1-2 pm CT

Optimizing Health IT: From the Chambers of Congress to the Frontlines of Care

Julia Adler-Milstein, Director, Center for Clinical Informatics and Improvement Research, UCSF. Julie has spent the past decade studying the progress of electronic health information exchange (HIE) and EHR system interoperability in the U.S. She discusses the policy context and how federal policy efforts have sought to intervene to promote health information exchange. Despite substantial resources devoted to HIE, several recent evidence reviews reveal that we still lack a robust understanding of the extent to which HIE improves care, and, more importantly, the underlying mechanisms. To help address this gap, Julia presents results from a recent study that assesses whether an approach to HIE that involves data exchange directly within the EHR is associated with improved care in the Emergency Department, and whether this relationship is mediated by a key hypothesized mechanism: the timeliness of information return. *This teleconference is part of the [Value-Based Care Collaborative](#).*

January 24, 1-2 pm CT

Patient Centered Data Home - Connecting Data Across State Lines

Kelly Hoover Thompson, CEO, and Joe Walker, Sr. VP of Technology Services for MyHealth Access Network. The Patient Centered Data Home™ (PCDH) is a national initiative to deliver a cost-effective,

scalable method of exchanging patient data among health information exchanges (HIEs) to access real-time information across state and regional lines and the care continuum. It puts into practice the vision that clinical data should be available whenever and wherever care occurs and “centered” around the patient to improve patient care. Kelly and Joe describe the successes and challenges of PCDH, lessons learned and best practices, and what’s next for the Patient Centered Data Home™ program. *This teleconference is part of the [Value-Based Care Collaborative](#).*

January 30, 1-2 pm CT

CMIO and CNIO Partnering for Clinical Transformation at HonorHealth

Mary Ann Turley, DO, CMIO, and Kristin Gillen, RN, DNP, CNML, CNIO, HonorHealth. The dyad relationship between the CMIO and CNIO at HonorHealth was specifically designed to help the organization achieve its strategic vision through Clinical Transformation. Dr. Mary Ann Turley, as CMIO and Kris Gillen, as CNIO are both operational by background and serve as content experts in clinical informatics as well as liaisons between IT and operations. Developing excellent communication pathways between the CNIO and CMIO was imperative during this large enterprise-wide EMR go-live, both for their mutual success as well as for their “customers” in both the IT departments and the hospital clinical areas. Dr. Turley and Kris discuss how they navigated through challenging cultural and standard of care differences among the system’s hospitals - two of whom were already live on Epic and three of whom were not - to build an entirely new instance of Epic that went live on all five campuses the same day. They will also share their perspectives on the leadership, expertise, and relationship-building skills that were critical during this clinical transformation process. *This teleconference is part of the [Clinical Decision Support Collaborative](#).*

January 31, 1-2 pm CT

Optimizing the EHR to Prevent Burnout and Obtain Better Outcomes

Bret Shillingstad, MD, Executive Director/CMIO - EHR Optimization Services, Rizwan Pasha, MD, CMIO - EHR Services, Nuance Healthcare, and Michael J. Healey, MD, CMIO - Outpatient Services, Brigham Health. As healthcare transitions to value-based care, it becomes even more critical to effectively harness the full functionality available in an EHR in ways that support enhanced clinical decision-making while alleviating physician burnout. Drs. Shillingstad, Pasha and Healey detail the ways they are working to optimize EHR functionality to reach its full potential and drive better clinical, operational and financial outcomes. *This teleconference is part of the [Clinical Decision Support Collaborative](#).*

February 6, 1-2 pm CT

2018 and Beyond: Technology Trends Transforming the Journey of Healthcare

Chris Shudes, Principal, and Michael Kleinmann, Senior Manager, Deloitte Consulting, LLP. In 2018 and beyond, health systems will continue to embrace emerging and exponential technologies as they respond to economic forces shaping the industry such as the affordability crisis, shifting demographics, government influence, and the growing impact of consumerism. While technologies such as mobile, APIs, native cloud solutions, and microservices will remain some of the most actively embraced emerging technologies by health systems, exponentials from blockchain to artificial intelligence to quantum computing represent new and unforeseen opportunities over the longer term. Join us for a discussion on the healthcare technology trends in 2018 and beyond that are poised to help shape and transform health care.

February 13, 1-2 pm CT

Structure and Function of a High Performance Clinical Informatics Department at Eastern Maine

April Giard, NP-BC, NEA-BC, VP & CNIO, Eastern Maine Healthcare System, and Angela R. Tiberio, MD, Physician Executive, Impact Advisors, LLC. If you’ve seen one Informatics Department you’ve seen one Informatics Department! Several years ago, Eastern Maine Healthcare Systems (EMHS) committed to establishing a dedicated, fully-staffed and system-wide Clinical Informatics Department. As healthcare informatics/technology now enters an exciting new phase beyond “just” implementation, April and Angela will share their knowledge, experiences and advice for how to create, mature and evolve a Clinical Informatics Department for now and the future. Specific topics include departmental scope of responsibilities, “right-sizing” and staffing with the right talent and skills. *This teleconference is part of the [Clinical Decision Support Collaborative](#).*

February 15, 1-2 pm CT

Change Management at Houston Methodist

Nicholas Desai, MD, CMIO, Eileen McGrath, Director, Marketing and Communications/Change Management/Training, and Autumn Kirsch, IT Communications/Change Management Lead, Houston Methodist. Sustainable physician engagement requires more than just cutting-edge technology. To be

successful, embed a robust change management strategy into your change. This session chronicles the development and deployment of an executive-sponsored IT change management program at Houston Methodist, focused on driving EHR adoption, proficiency and utilization. Critical parts of this program include obtaining executive support to enforce organizational decisions impacting physicians, personalized outreach and training strategies, targeted communications, involvement of physician champions and the importance of developing a lasting partnership between CMIO and IT change management team beyond implementation. *This teleconference is part of the [Clinical Decision Support Collaborative](#).*

February 19, 1-2 pm CT

EMR Optimization Across All Sites of Care at IU Health

Seung Park, MD, CHIO, and Jason Schaffer, MD, Chief Medical Information Officer, Adult AHC, IU Health. Indiana University Health is a large statewide organization with 15 hospitals and more than 100 clinics, including the most comprehensive academic health center in the state, and is one of the busiest hospital systems in the U.S. While a single EMR is implemented throughout the organization, it was implemented over a time of intense growth for the organization. As a result, the adoption of the most recent capabilities of the EHR has remained variable and in need of optimization. Optimization is contained in the Uplift program at IU Health. The program has 3 phases: Core, More and Continuous Improvement that are deployed in a rolling fashion across specialties. This session describes the business, clinical, and operational need for this program and the strategy to deploy it. *This teleconference is part of the [Cerner Collaborative](#).*

February 21, 1-2 pm CT

Benefits and Risks of Sharing Notes in Mental/Behavioral Health

Steve O'Neill, LICSW, BCD, JD, Social Work Manager for Psychiatry and Primary Care, Beth Israel Deaconess Medical Center, and OpenNotes Behavioral Health Specialist. OpenNotes is a movement aimed at making healthcare provider's notes directly available online to patients through a secure portal. Four years ago, nearly all of the outpatient clinical social workers and psychiatry staff at Beth Israel Deaconess Medical Center opened up their therapy notes to our behavioral/mental health patients. Many viewed that OpenNotes might ruin psychotherapy, increase workload burden and have a chilling effect upon patient care. What have we learned since, both at BIDMC as well as the 17+ other healthcare systems across the country who have opened up therapy notes? What are the benefits as well as the drawbacks? What are we learning from our patients? And how do mental health clinicians now feel about OpenNotes within patient care? This session focuses on addressing these issues, including our research findings, and the implications going forward for practice. *This teleconference is part of the [Clinical Decision Support Collaborative](#).*

February 28, 1-2 pm CT

Reducing Medical Device Cybersecurity Risks at Mayo

Kevin McDonald, Director of Clinical Information Security, Mayo Clinic. Weak cybersecurity safeguards in medical devices have the potential to impact patients, care delivery processes and a healthcare organization's IT network. To reduce the risk, healthcare delivery organizations need to have a formalized risk-based process to assess and manage their medical devices. Kevin discusses frequently seen medical device vulnerabilities and lessons learned in establishing a medical device cybersecurity program, including setting standards, designing assessment processes and developing risk mitigation and remediation options. In addition, he addresses the importance of governance and the need to make risk vs. benefit decisions. *This teleconference is part of the [Security Collaborative](#).*

March 14, 1-2 pm CT

Cyber Student Staffing Boosts Productivity, Narrows Cybersecurity Workforce Gap at Sentara

Daniel Bowden, VP & CISO, Sentara Healthcare. With a recent report from The Center for Cyber Safety and Education predicting a shortage of 1.8 million information security workers by 2022, health systems across the country are already grappling with the constraints of fewer people to defend and protect crucial hospital and patient data. To that end, Sentara Healthcare recruits students from around the region to work in the Sentara Healthcare information office as junior cyber risk analysis, junior cyber security analysis, and junior security development and operations analysts. These students work side by side with information security professionals to gain valuable first-hand experience, while freeing up full-time staff to focus on more detailed and risk-laden work. *This teleconference is part of the [Security Collaborative](#).*

March 15, 1-2 pm CT

Pop Health Journey at Geisinger Health System

John Bulger, DO, MBA, Chief Medical Officer Population Health, Geisinger Health System and the Chief Medical Officer of Geisinger Health Plan. Making the move from volume to value requires fundamental changes. While there are tools and capabilities, most of the change is cultural. Dr. Bulger describes how Geisinger is aiming to change the way they think about caring for people and communities, and he will share their key learnings from this process to date. *This teleconference is part of the [Value-Based Care Collaborative](#).*

March 19, 1-2 pm CT

Utilizing HealthIntent for Population Health at Banner

David Coe, Sr. Director Pop Health Data Systems, Banner Health. In this presentation, David shares the successes, challenges and lessons learned along Banner Health's journey towards population health. This presentation focuses on preserving the value of data as it moves across many end points in a clinically integrated model of care, including both affiliated and employed provider groups. This presentation also highlights the tools, processes and experience of using Cerner HealthIntent at Banner Health. *This teleconference is part of the [Cerner Collaborative](#).*

March 20, 1-2 pm CT

Virtual Assistants and Google Glass: Changing Lives of Clinicians and Patients at Sutter Health

Albert Chan, MD, Sutter Health VP, Chief of Digital Patient Experience, Sandra Odenheimer, DNP-C, FNP-BC, DCNP, CANS, and Lam Ho, Operational Lead, Sutter Health. Dr. Chan, Sandra, and Lam describe their research results, recently published in *Health Affairs*, regarding the significant administrative workload that clinicians face in the practice of medicine today (Tai-Seale, et al, 2017). For every 3 hours of face-to-face care, clinicians are spending an additional 3.08 hours in desktop medicine. Clinician burnout is a troublesome trend in medicine, with nearly 50% of physicians reporting at least one symptom of burnout, with this administrative burden an oft-cited cause. In this session, Dr. Chan and his colleagues describe how Sutter has leveraged Google Glass to connect clinicians and remote scribes to capture clinical notes in real-time, increasing productivity and improving the quality of clinical documentation in a cost-efficient manner. They also share their research from the clinics of how this has been perceived by patients in the outpatient setting, and how they addressed the socio-technical elements of implementation to bring innovative solutions “the last mile” to the clinicians in the trenches. *This teleconference is part of the [Clinical Decision Support Collaborative](#).*

March 21, 1-2 pm CT

How to Prepare for the New, Fast-Approaching General Data Protection Regulations

Rob Faix, VP Technology Services, and Shefali Mookencherry, Principal Advisor, Impact Advisors LLC. The General Data Protection Regulation (GDPR) is going to take US healthcare organizations to a different level for privacy and security practices. These organizations will need to think beyond the Health Insurance Portability Accountability Act (HIPAA) and other US regulations. The GDPR will require organizations to think about data flows, handling data, cross-border data transfer, data privacy, security monitoring and overall policy compliance for international patients. The new obligations pertain to any organization that handles EU residents' data whether that organization is in the EU or not. GDPR non-compliance fines could be higher than HIPAA non-compliance fines. Alignment of data handling practices with GDPR is mandatory and time is critical, and the compliance date of May 25, 2018 is just around the corner! In this teleconference Rob and Shefali reviews these GDPR requirements, why US healthcare organizations should care, timelines, and what can be done to ensure compliance. *This teleconference is part of the [Security Collaborative](#).*

March 27, 1-2 pm CT

Augmenting the Provider Experience with Artificial Intelligence

Satish Maripuri, Executive VP and General Manager, and Peter Durlach, Senior VP - Strategy, Nuance Healthcare. AI-powered intelligence incorporated into clinical documentation and imaging workflow is now able to augment a provider's ability to capture patient stories and improve care. Nuance shares case studies and insights from applications of AI-supported virtual assistants, imaging algorithms, and automated clinical quality measures reporting that are transforming care delivery of the future. *This teleconference is part of the [Clinical Decision Support Collaborative](#).*

March 28, 1-2 pm CT

Free Natural Language Processing Tool for Clinicians and Researchers

Alexander Turchin, MD, MS, FACMI, Director of Informatics Research Division of Endocrinology, Brigham & Women's Hospital and Associate Professor of Medicine Harvard Medical School. A critical source of

information in electronic medical records is “locked” in narrative documents, such as provider notes, radiology reports, etc. Natural language processing (NLP) technology can be used to extract information from narrative documents; however, it remains underutilized, because in many cases NLP solutions require advanced computer science expertise and/or expensive commercial software. Researchers at Harvard Medical School have developed Canary (<http://canary.bwh.harvard.edu>), a free / open-source solution designed to solve this problem. Canary is a GUI-based platform that allows clinicians, researchers and analysts without computer science or software engineering background to develop their own NLP solutions. Canary has been downloaded in dozens of institutions around the world and has been successfully used in a number of projects. Dr. Turchin describes Canary and illustrates how it can be used to effectively retrieve and utilize information from narrative documents in EMRs to enhance patient care. *This teleconference is part of the [Clinical Decision Support Collaborative](#).*

March 29, 1-2 pm CT

Quest Diagnostics Improves Quality while Managing Patient Costs

Marek Bako, Senior Director Revenue Cycle Management, and Kerri Grizer, Senior Product Manager, Optum. As a result of their growing responsibility for paying out-of-pocket for medical care, patients are increasingly leveraging the same consumer behaviors they employ when making other major purchase decisions, fueling the rise of consumerism in health care. As consumers, patients are demanding the same key capabilities from providers that they get in other industries: simplicity, convenience and transparency. Providers seeking to meet patient needs for managing their health care costs (e.g., balancing consumer-driven health plans and high deductibles) need to deliver consumer-centric tools that enable the ability to deliver accurate cost and quality information up front. Not only can these services deliver an improved patient financial experience, but providers can benefit from more efficient payment collections and more predictable cash flow. An example of where consumer engagement tools are providing value for both providers and patients is at Quest Diagnostics, a clinical laboratory services company that creates greater price transparency and ease of payment at the point of care while reducing patient bad debt and payment denials. *This teleconference is part of the [Value-Based Care Collaborative](#).*

April 3, 1-2 pm CT

Analytics to Drive Population Health Management

Tony Jurek, Managing Director, and Chris DeBeer, Principal Life Sciences and Healthcare Practice, Deloitte Consulting, LLP. Advances in technology have provided healthcare organizations with a myriad disparate systems from which to get information and derive insights. While the volume of data has grown exponentially in recent years, the availability and access to that data has dropped at nearly the same alarming rate. Consolidation within the healthcare industry has only exacerbated the problem by creating organizations that have multiple clinical, financial and operational systems and as many reporting and analytic tools. Regulatory compliance requirements such as MACRA have contributed to make this a “Perfect Storm” for interoperability and analytics in the healthcare industry. Join us for a discussion on trends in healthcare interoperability and how leading organizations are turning information into insights in 2018 and beyond. *This teleconference is part of the [Value-Based Care Collaborative](#).*

April 4, 11am-Noon CT

Digital Health: The Journey to Consumer Centricity

Michael Reagin, VP and CIO, Sentara Healthcare, and Timothy Zoph, Client Executive and Strategist, Impact Advisors. Digital Health is destined to harness a new generation of technology and a wealth of new data, transforming our healthcare delivery system towards a new patient-centered and modern services industry. Although “digital” is still emerging in healthcare, we can gain insights from the pioneering work in related service industries, including finance, retail, transportation and hospitality, that have reimagined their business models, harnessing the power of digital technologies. These adopted experiences, using mobility, simplified design and intelligent interactions, are shaping a new vision of healthcare delivery. This session is an opportunity to understand the evolution of Digital Health, anchored in case study examples from Sentara Healthcare from two leading technologists. *This teleconference is part of the [Value-Based Care Collaborative](#).*

April 5, 1-2 pm CT

Implications of Tri-Institutional Clinical and Research Data Sharing at NewYork-Presbyterian

Trushna Dave, Manager of Data Sharing at NewYork-Presbyterian and affiliated medical schools, Columbia University Medical Center and Weill Cornell Medical Center. In the past several years there has been an increase in the number of healthcare organizations joining forces to provide integrated and standardized clinical care along the continuum. As a result, the demand for access to data has increased to support clinical, operational and research initiatives. Based on her experience with managing a novel

data sharing process and platform, Trushna discusses her perspective on the benefits, challenges and recommendations to enhance access to data. *This teleconference is part of the [Value-Based Care Collaborative](#).*

April 10, 1-2 pm CT

Get Happier, Faster Doctors by Transforming your EMR Training into a Continuous Learning Program

Julie Hollberg, MD, CMIO Emory Healthcare and Associate Professor, Division of Hospital Medicine, Emory University School of Medicine, and Elizabeth Sprouse, Clinical Informatics, Emory Healthcare. As physician burnout increases, it is essential for organizations to have a strong learning program that fosters EMR mastery. A continuous EMR learning program requires you to evolve from the traditional model of classroom based training to a multi-modality, learner-centered model. Dr. Hollberg and Elizabeth describe the complete overhaul of Emory's training program including a description of electronic tools (web-based learning management, integration with the EMR), material development processes and the resources involved in implementation and maintenance of the new program. They also review how they leverage advance data to measure the time MDs and APPs spend using the EMR and determine whom to target for 1:1 coaching. *This teleconference is part of the [Clinical Decision Support Collaborative](#).*

April 11, 1-2 pm CT

Transforming Primary Care from the Frontline at Cedars-Sinai

Rupal Badani, MD, Medical Director, Hanina Rosenstein, Senior Performance Improvement Facilitator, and Jennifer Ortiz, Project Manager, Organizational Advancement, Cedars-Sinai Medical Network. In 2015, Cedars-Sinai Medical Network reached a tipping point where our ambulatory medical group primary care doctors were increasingly dissatisfied with work. In response, the Network launched Practice Transformation, a lean-based redesign of the practices. Together with leaders and frontline teams, the primary care practices redesigned core processes including physical space, supply chain, access, call management, patient flow and care team integration. We believe this redesign, which engages care teams and eliminates waste from the system, unburdens physicians and staff and allows them to focus on delivering outstanding experiences to their patients and to each other. And, as such, that this work holds great promise for returning the joy to the practice of medicine. *This teleconference is part of the [Clinical Decision Support Collaborative](#).*

April 18, 1-2 pm CT

Patient Portal Success at Virginia Mason

Jim Bender, MD, Medical Director Clinical Informatics, Virginia Mason. Engaging patients in the use of an online portal has been a key strategic goal at Virginia Mason in Seattle for the last several years. To date, half of current patients have active portal accounts. Join Dr. Jim Bender in a discussion that reviews the history of the project, and discusses uses of the portal including Open Notes, managing patient messaging, patients scheduling their own appointments and novel use of the portal to capture patient reported metrics. The conversation also includes reflections on operational and cultural factors that have contributed to this successful project. *This teleconference is part of the [Value-Based Care Collaborative](#).*

April 19, 1-2 pm CT

What Drives Clinician Satisfaction with EMRs

Taylor Davis, VP of Innovation, KLAS. We built EMRs to help clinicians deliver dramatically better care and to be more efficient in that care. If clinicians everywhere consistently praised EMRs for revolutionizing the practice of medicine, wouldn't that be an indication that the EMR was a success? But that is not happening. KLAS shares research from over 30,000 clinicians' voices reflecting key "lessons learned" on how to create the EMR advantage. *This teleconference is part of the [Clinical Decision Support Collaborative](#).*

May 1, 1-2 pm CT

Blockchain Technology at Saint Lukes Health Network, Part II

Chad Brisendine, VP/CIO, St. Luke's University Health Network, and Rob Faix, VP Technology Services, Impact Advisors, LLC, share their latest thoughts and experiences as St. Luke's continues to explore the practical uses of blockchain technology in the healthcare industry. Use cases, challenges, next steps, blockchain vendors generating buzz in the industry, and blockchain forums will be discussed in this follow-up presentation to the introductory blockchain teleconference originally given in October 2017. *(Part I was presented Oct. 12, 2017, and can be accessed via our [teleconference library](#).) This teleconference is part of the [Security Collaborative](#).*

May 2, 1-2 pm CT

Clinical and Financial Benefits of Tele-ICU at Advocate

Michael Ries MD, MBA, FCCM, FCCP, FACP, Medical Director, Adult Critical Care and eICU, and Cindy Welsh, RN, MBA, VP, Adult Critical Care & Medical Prof. Affairs, Advocate Health Care. If used properly, tele-ICU can enable a healthcare organization to garner significant clinical and financial benefits. Dr. Ries and Cindy discuss how tele-ICU has enabled Advocate Health Care to realize some of these benefits. They describe the strategies through examples of how they integrated tele-ICU technology to consistently provide evidence-based best practices to our population of critical care patients. *This teleconference is part of the [Value-Based Care Collaborative](#).*

May 3, 11am – Noon CT

AI in Action at Partners HealthCare

Keith Dreyer, DO, PhD, FACR, FSIM, Chief Data Science Officer, Partners Healthcare, and William Boonn, MD, CMIO Healthcare Diagnostics, Nuance. The impact artificial intelligence (AI) will have on healthcare comes from a new and expanded use of AI-powered solutions. With AI, hospital groups can augment clinical expertise with deep-learning algorithms trained to prioritize patients with life-threatening conditions ahead of others in the queue. Drs. Dreyer and Boonn provide an overview of The AI Marketplace, the industry's first open platform for radiologists to accelerate widespread adoption of clinically validated algorithms to improve interpretations, diagnoses, and patient outcomes. *This teleconference is part of the [Clinical Decision Support Collaborative](#).*

May 9, 1-2 pm CT

Virtual Health: Creating an Enterprise Program for the Future

Urvi Shah, Manager, Minakshi Krishnan, Senior Manager, Tim Smith, Principal, and Ken Abrams, Managing Director, Deloitte Consulting, LLP. Virtual Health is becoming an expectation for customers and providers alike, and a means for health care organizations to differentiate themselves. Urvi, Minakshi, Tim and Ken explore the imperative of Virtual Health and discuss benefits they've seen organizations experience in developing this platform and implementing these capabilities. The session also includes a discussion on how to enter the market, lessons learned and success factors to implement a virtual health program in your organization. *This teleconference is part of the [Value-Based Care Collaborative](#).*

May 10, 1-2 pm CT

Universal EMR Consent Form at Northwestern

Tom Moran, MD, Vice President & Chief Medical Information Executive, and Laurel Fleming, Director, Corporate Compliance & Integrity and Chief Privacy Executive, Northwestern Medicine. In this era of value-based care, information exchange and data analytics, the ability to use and share patient care information is critical. Healthcare providers, however, continue to face challenges presented by data subject to more protective measures than HIPAA ("sensitive information"). In this session Dr. Moran and Laurel share Northwestern Medicine's approach to addressing these issues, with a specific focus on consent-driven solutions that balance patient rights in an era of information analytics and exchange. *This teleconference is part of the [Clinical Decision Support Collaborative](#).*

May 15, 1-2 pm CT

Building a Healthcare Data Science Strategy at UVA Health

Glenn Wasson, Administrator of Analytics, and Jonathan Michel, Director of Data Science, University of Virginia Health System. Data science can provide fundamental insights and efficiency gains that healthcare providers must leverage. Doing this requires not only strategic alignment of data science with overall health system strategy, but also workflow alignment with caregivers whose actions ultimately determine outcomes. At the University of Virginia Health System, we have sought to make data science actionable by embedding it within the organization's lean process improvement efforts. In doing so, we have changed our approach to analytics and team structure. This talk focuses on our approaches, successes and challenges on how we implemented a data science strategy. *This teleconference is part of the [Clinical Decision Support Collaborative](#).*

May 17, 1-2 pm CT

Current Trends and New Tactics for Better Patient Engagement

Colin Buckley, Senior Analyst, KLAS. The need for patient engagement is as old as medicine, but the use of information technology to engage patients is in its adolescence. Today, broad visions and experimentation exist, but there is a lack of consensus regarding end goals, and pathways are unclear. Colin discusses the most recent strategies and technologies being used today to engage patients. *This teleconference is part of the [Value-Based Care Collaborative](#).*

May 21, 1-2 pm CT

Using Predictive Analytics to Reduce Heart Failure Hospitalizations at Advocate Aurora

Tina Esposito, Vice President of Information and Technology Innovation, and Tim Arnold, Manager, Advocate Center Collaborative, Advocate Aurora Health Care. One of the major challenges for an ACO is identifying the right patients for an intervention. Advocate Healthcare leveraged its extensive data platform to create predictive models that identify patients who are at elevated risk of going to the hospital in the next 90 days. It has been using one of these models to identify heart failure patients for a targeted outpatient care management program. Early results have shown that patients in this program are going to the hospital less often than patients in a control group. *This teleconference is part of the [Cerner Collaborative](#).*

May 22, 1-2 pm CT

The Data Driven Decision-Making Journey to Improve Quality of Care at BayCare

Greg Hindahl, MD, CMIO and Apparsamy Balaji, Director, Enterprise Data Management & Web Applications, BayCare Health System. BayCare's Business Intelligence Center facilitates the integration of disparate data sources from across the organization to be analyzed in near real-time for data discovery, performance tracking and advanced analysis. These decisions and insights aim to improve the quality of care and patient satisfaction at BayCare's hospitals and facilities, helping BayCare leadership optimize evidence-based decision-making, leveraging data and analytical solutions. Analytical solutions include operational, financial and clinical performance metrics, benchmarks, and targets to help leaders analyze performance trends and set goals for continuous improvement. *This teleconference is part of the [Value-Based Care Collaborative](#).*

May 31, 1-2 pm CT

Using a Consumer-centric Strategy to Grow and Achieve ROI at Centura

Kevin Guill, Director of Digital Strategy, Centura Health, and Becca Lococo, PhD, VP Optum Advisory Services. Spurred on by the shift from fee-for-service to value-based care in the Colorado marketplace, Centura Health chose to deploy digital patient engagement tools in a way that would provide valuable feedback from their consumers and the market to confidently develop a digital strategy with a meaningful ROI. Kevin and Becca describe this data-driven, consumer-centric approach to digital transformation at Centura Health, and how they identified both "quick-wins" and long-term opportunities for growth, starting with one service line as a "learning lab" for the broader organization, and developing a go-to-market playbook to scale this transformation. *This teleconference is part of the [Value-Based Care Collaborative](#).*

June 5, 1-2 pm CT

Managing Cyber Risks: How to Identify Digital Crown Jewel in a Healthcare Environment with PHI Everywhere

Eric Dull, Cyber Risk Services, and Josh Fournier, Specialist Master, Deloitte Consulting, LLP. "Crown Jewel identification" is the process of identifying critical applications that would materially impact patient care or business operations if compromised. This process has traditionally been subjective (relying heavily on interviews) and extremely broadly scoped since PHI is everywhere. Eric and Josh discuss an analytics-based approach in order to identify important assets that really matter from a security perspective, i.e., how to identify a true representation of what the organization must protect in order to make informed risk-based decisions. This analytic approach gives risk practitioners the insight required for a truly data-driven risk management program. *This teleconference is part of the [Security Collaborative](#).*

June 6, 1-2 pm CT

Lean Thinking and the Virginia Mason Production System

Barry Aaronson, MD, CMIO, Niloofar Alikashani, PharmD, and Therese Franco, Virginia Mason Medical Center. Two important quality goals for hospitalized patients are optimized Venous Thromboembolism (VTE) prophylaxis and optimized glycemic control for diabetic patients. Dr. Aaronson describes efforts underway at Virginia Mason Medical Center (VMMC) Hospital to use lean methodology as incorporated into the Virginia Mason Production System (VMPS) to mistake-proof VTE prophylaxis, improve glycemic control in diabetics, and thereby improve outcomes for our patients. *This teleconference is part of the [Clinical Decision Support Collaborative](#).*

June 12, 1-2 pm CT

TEFCA in a Nutshell: How it May Affect HIEs and Interoperability

Dan Golder, DDS, MBA, Principal, and Larry Katzovitz, Senior Advisor, Impact Advisors. Dan and Larry examine the recent draft specifications for the "Trusted Exchange Framework and Common Agreement" (or TEFCA) and provide a high-level look at how it may affect HIEs and interoperability going forward.

They also review the Principles for the new Trusted Exchange and its potential impacts, provide an overview of the Minimum Required Terms & Conditions for Trusted Exchange and discuss the Top 5 things that providers and healthcare organizations should be doing now to prepare for TEFCA. *This teleconference is part of the [Security Collaborative](#).*

June 19, 1-2 pm CT

Predictive Analytics at OSF

Chris Franciskovich, Manager Advanced Analytics, and Mark Hohulin, SVP Healthcare Analytics, OSF Innovation, OSF HealthCare System. Defining a healthcare data science strategy can be daunting. Do you build internal capacity or buy services as needed? How do you find and retain talent? Can an internal team really produce enough value to make it worth the cost and time? What's required to get started? At OSF Healthcare, we built an Advanced Analytics team, with statisticians and data scientists, more than five years ago and have learned a lot along the way. In this candid session, we share what we've learned and highlight some key project successes, along with lessons learned. *This teleconference is part of the [Clinical Decision Support Collaborative](#).*

June 27, 1-2 pm CT

Transforming the Care Model to Lower Costs and Improve Quality at Hartford Healthcare

Rocco Orlando, MD, SVP and Chief Medical Officer, Hartford Healthcare, and John Johnston, CPA, MHA, SVP, Optum Advisory Services. A five-hospital integrated delivery system in Connecticut, Hartford Healthcare has developed a strategy for integrating clinical and financial operations for high-reliability care that involves structuring teams at both the system and service line levels, interdisciplinary teams to implement and run with sustainable cost-cutting initiatives, and a governance model to identify and prioritize the most important opportunities to be more rigorous in reducing variation in quality and cost. Dr. Orlando and John will share their "lessons learned" in implementing this IT-enabled business and care model. *This teleconference is part of the [Value-Based Care Collaborative](#).*

June 28, 1-2 pm CT

How an ACO Uses Technology to Improve Quality, Patient Engagement and Lower Cost

Elissa Langley, MHA, VP & Chief Operating Officer, Triad Healthcare Network and Tonda Gosnell, Population Health Project Manager, Cone Health, Triad Healthcare Network. Triad HealthCare Network (THN) is one of 51 Next Generation Accountable Care Organizations (ACO) in the country. Located in Greensboro, North Carolina, THN represents more than 1200 affiliated physicians and covers nearly 100,000 patients through its various agreements. THN has successfully utilized several technologies to improve patient engagement, quality metric performance, and lower the cost of care for its patients. *This teleconference is part of the [Value-Based Care Collaborative](#).*

July 11, 1-2 pm CT

ONC Talks About What is Next for TEFCA

Zoe Barber, MPH, Special Assistant, Principal Deputy National Coordinator for Health IT, ONC. The 21st Century Cures Act directs ONC to develop or support a trusted exchange framework and common agreement to address policies and practices between health information networks nationally. On January 5, ONC released a draft Trusted Exchange Framework (TEF) for public comment. In this teleconference, Zoe reviews the policies included in the draft TEF, public comments received, and ONC's vision for advancing nationwide interoperability and supporting the goals of the Cures Act. *This teleconference is part of the [Security Collaborative](#).*

July 12, 1-2 pm CT

New Mobile Age: How Technology Will Extend the Healthspan and Optimize the Lifespan

Joseph Kvedar, MD, Vice President, Connected Health, Partners HealthCare. Digital technologies are creating a *new kind of old*, enabling individuals to remain vital, engaged and independent through their later years. But it has to be the right technology, designed for an aging population, not just what technologists and app developers *think* people want. Social robots, artificial intelligence, vocal biomarkers and facial decoding will analyze emotion, anticipate health problems, improve quality of life and enable better relationships with healthcare providers. It's also about using data to better understand the 'soft science' of wellbeing and address the neglected crisis of caregiving. The *New Mobile Age* is a business model but, more so, it's a new way of life. *This teleconference is part of the [Value-Based Care Collaborative](#).*

July 17, 1-2 pm CT

Data and Analytics at Ascension

Rick Howard, VP Data and Insights, and Chief Data Officer, Ascension. Building an advanced analytics platform is challenging, as data governance, management and integration across the spectrum of information systems and types vary. Addressing this challenge requires that organizations eliminate such variation by using mature analytics to inform workforce skill development, which in turn supports understanding the importance of employing both traditional and nontraditional data sources in decision making practices and processes across the organization. *This teleconference is part of the [Clinical Decision Support Collaborative](#).*

July 19, 1-2 pm CT

EMRs and Beyond: Current Trends and Future Tech

Colin Buckley, Senior Analyst, Paul Warburton, Senior Analyst, and Sam Eaquinto, Senior Analyst, KLAS. US hospital EMR market share and emerging buying trends: In 2017, 216 acute care hospitals contracted for a new EMR, with 1 - 200 bed hospitals accounting for the vast majority (80%) of these decisions. And looking beyond EMRs, providers are seeking new emerging technologies to help deliver better care. Join Colin, Paul and Sam as they discuss Hospital EMR buying trends and other new emerging areas of buying energy amongst healthcare providers. *This teleconference is part of the [Clinical Decision Support Collaborative](#).*

July 25, 1-2 pm CT

Rush Optimizes the EHR for Improved Productivity and Documentation Quality

Brian Patty, MD, VP Clinical Systems and CMIO, and Jordan A. Dale, MD, Associate CMIO and Assistant Professor, Division of Hospital Medicine, Rush University Medical Center, and Bret Shillingstad, MD, Executive Director and CMIO - EHR Optimization Service, Nuance Healthcare. By helping physicians advance the utilization of available functionality and providing specialty specific workflows and tools, Rush saw improvement in their physician satisfaction scores, quality of clinical documentation, and efficiency. Join Drs. Patty, Dale and Shillingstad to learn how Rush's approach to optimization of the EHR could help you create a long-term strategy for continued success. *This teleconference is part of the [Clinical Decision Support Collaborative](#).*

July 31, 1-2 pm CT

Spectrum Takes on the Future of Healthcare with MedNow

Joseph M. Brennan, Sr. Director, MedNow, Spectrum Health. With 60,000+ virtual encounters over a four-year period, Spectrum Health has learned that telehealth innovation in healthcare is much less about technology and much more about the willingness to evolve an industry to focus on consumers about their health care needs - engaging with them at the right place and right time. MedNow started small with the decision to build a telehealth platform rather than buy it. Choosing to build allowed Spectrum to create a new, patient-centered experience with their providers, which also produced valuable data to support the hypothesis that not only is virtual care necessary today, but it will be an absolute requirement in a value-based healthcare eco-system. Anything that does not require a physical exam or procedure will be done when and where it is most convenient for the patient, hinting that the future of healthcare will place face-to-face encounters as an "Option B." *This teleconference is part of the [Value-Based Care Collaborative](#).*

August 1, 1-2 pm CT

New Technology Options for EHR Desktop Delivery at Sentara

Dale Smith, IT Director, Sentara Healthcare, and Erik Gerard, Principal, Impact Advisors. Until recently, the choices of products capable of delivering electronic health record (EHR) applications to the desktop were limited. There are now several supported options that can successfully accomplish this task, each with its own trade-offs relative to cost, ease of implementation, established user base, consolidation to a single stack/vendor, etc. As health systems realign their technology infrastructure to match their business strategy, many are taking the opportunity to re-evaluate platforms, upgrades, and reduction of complexity. Dale and Erik share their recent experiences and perspectives regarding virtual desktop infrastructure strategies in today's rapidly changing technology market. *This teleconference is part of the [Security Collaborative](#).*

August 2, 1-2 pm CT

Technical Lab for Medical Interoperability

Ed Cantwell, President and CEO, and Aaron Goldmuntz, SVP Comprehensive Interoperability, Center for Medical Interoperability. Ed and Aaron introduce the Center for Medical Interoperability, a non-profit organization led by health systems with a vision to accelerate the seamless exchange of information to improve healthcare for all. They discuss how this approach, modeled after other industry centralized

labs, is serving as a national R&D lab and test & certification resource to address technical challenges related to healthcare data security, connectivity and interoperability. They also discuss the importance of the role of health system leadership and alignment in achieving data liquidity and comprehensive interoperability on behalf of the person, and show why starting at the point of care is critical, with concrete initial steps to secure connectivity and security of medical technologies. *This teleconference is part of the [Clinical Decision Support Collaborative](#).*

August 7, 1-2 pm CT

Centralized Scheduling Center to Improve Patient Access at Sutter

Albert Chan, MD, Sutter Health VP, Chief of Digital Patient Experience, and Steve Chambers, General Manager & VP, Patient Access Solutions, Sutter Physician Services, Sutter Health. Patients have more choices in healthcare than ever before. Today's patients want consistent and seamless care when it is convenient for them, which may or may not be the time of the next available appointment. Over the years many physicians have built their schedules in a way that has become counterproductive over the long-term, for example, building customized slots for only specific types of patients, but not filling them. Physician schedules have become doctor-centric instead of patient-centric. During this session Dr. Chan and Steve discusses how "less is more" when it comes to physician schedule preferences. They also discuss best practices for a provider's management of their clinic schedules, how a centralized scheduling center can improve access and how building preferences in the EMR (in this case, Epic) will improve efficiency in the scheduling process and ultimately improve schedule utilization and patient access. *This teleconference is part of the [Clinical Decision Support Collaborative](#).*

August 9, 1-2 pm CT

ACT Learning Network at Cincinnati Childrens

Rob Kahn, MD, Physician Leader, Community and Population Health, and Andy Beck, MD, Associate Professor & Attending Pediatrician, Cincinnati Children's Hospital Medical Center. Drs. Kahn and Beck describe their experience working to help make Cincinnati's 66,000 children the healthiest in the nation through strong community partnerships. They discuss the use of the community-wide All Children Thrive Learning Network to bring the community voice into population health improvement efforts. They introduce early successes and challenges with respect to improvement efforts focused on decreasing preterm births and preventable child hospitalizations and increasing thriving children and 3rd grade readers. They also highlight innovative uses of the electronic health record, geography, and collaborative co-production. *This teleconference is part of the [Value-Based Care Collaborative](#).*

August 14, 1-2 pm CT

Next Generation Interoperability

Kelly Patrick, Managing Director, Tony Jurek, Managing Director, Mitch Bailey, Senior Manager, and Alan Vitale, Specialist Master from Deloitte Consulting, LLP. Technology advancements, many developed outside of the traditional healthcare technology organizations, have the ability to both advance and disrupt how healthcare plans and providers interact with their employees, partners and customers. Incorporating these technologies can enhance the customer experience; however, it requires transforming and optimizing the foundational processes and technologies. Overcoming these challenges, and combining both new and maturing enabling technologies, will facilitate true Interoperability transformation. Join Kelly, Nick, Mitch and Alan as they discuss real-life implementation examples that advance healthcare technology and an organizational path to take advantage of them. *This teleconference is part of the [Clinical Decision Support Collaborative](#).*

August 15, 1-2 pm CT

Interoperability at Ascension

Julie Henslee, Senior Director, Enterprise Services and Data, Ascension Technologies. Large, multi-state health organizations with significant variability continue to struggle with system interoperability. The development of new interoperability standards and adherence to traditional standards is a must when accounting for the flexibility necessary to tackle large, heterogeneous ecosystems. As the market continues to grow in population health and accountable care models, merely exchanging data doesn't resolve interoperability issues. Julie discusses how Ascension Health is tackling this issue. *This teleconference is part of the [Clinical Decision Support Collaborative](#).*

August 16, 1-2 pm CT

IT-Enabled Strategies to Help Fight the Opioid Crisis

Jackson Tate, Director of Opioid Research, and Alex McIntosh, Senior Analyst, KLAS. According to the National Institute on Drug Abuse, every day, more than 115 people in the United States die after overdosing on opioids. As opioid management has become a focus of federal and state governments, the

pressure to control overprescribing, as well as patient misuse, has fallen on the shoulders of health systems. Come learn what early findings KLAS has uncovered on opioid control and management as Jackson and Alex provide insight into what strategies health systems are deploying and what information systems are helping. *This teleconference is part of the [Clinical Decision Support Collaborative](#).*

August 20, 1-2 pm CT

Data Science Applied to EMR Data

William W. Feaster, MD, MBA, CPE, FAAP, CHIO, Children's Hospital of Orange County (CHOC). Dr. Feaster discusses why CHOC Children's Hospital prioritized the development of both population health management technologies and data science capabilities, describes how data science can be used to improve quality and safety and reduce unnecessary and costly utilization of services in capitated populations, and provides examples of how predictive analytic tools, whether derived from traditional data science or artificial intelligence applied to larger data sets, might add value to your own organization.

August 21, 1-2 pm CT

CMS Comprehensive Primary Care Initiative at Centura Health, Part II

Tamra Lavengood, RN, BSN, MSN, Coordinator for Comprehensive Primary Care Plus (CPC+) Mercy Family Medicine and Steve Lavengood, MD, CPC+ Medical Director, Mercy Family Medicine, Centura Health Physician Group. The landscape is changing in Primary Care, evidenced by CMS's expansion of the Comprehensive Primary Care Initiative to CPC+. Learn the factors that contributed to the success of this model of practice transformation and the vision that encompasses this value based care transition. (*This is a follow-up to the [teleconference on September 15, 2016](#), and can be accessed via our teleconference library.*) *This teleconference is part of the [Value-Based Care Collaborative](#).*

August 23, 1-2 pm CT

Are We There Yet? A Clinical Decision Support Journey at Memorial Hermann

Siraj Anwar, MBBS, MS, CPHIMS, Associate CMIO, Memorial Hermann Health System. Memorial Hermann began their clinical decision support journey 12 years ago when they set out to implement Computerized Physician Order Entry across the entire health system. Over the years, with the help of the clinical decision support alerts, they have been able to positively impact the care that is provided to the patients. With much focus and attention on "Alert Fatigue," it is important to understand the key principles and considerations when implementing Clinical Decision Support alerts in the EHR. What role do clinicians and informaticists play? How does data help drive the decision making process? And what are the data analytics tools that could help make the process of implementation and optimization more efficient? These are all questions that are addressed in this session. *This teleconference is part of the [Clinical Decision Support Collaborative](#).*

August 28, 1-2 pm CT

Business Relationship Management Journey at Henry Ford Health System

Mike Murphy, Director, Business Relationship Management, and Patrick Anderson, Senior Consultant Business Relationship Management, Henry Ford Health System (HFHS). At HFHS, the Business Relationship Management (BRM) team was created to be a liaison between Corporate IT and their customers across the health system. Much like patients can struggle with engaging the wide array of clinical specialists and support services available to support their treatment, Information Technology customers struggle to identify and access the services Corporate IT provides. This presentation discusses the factors that led to the creation of BRM at HFHS, their journey of transformation and growth of the BRM role and its implementation, as well as the hurdles and lessons learned along the way.

August 29, 1-2 pm CT

How Embedding Care Standards into EHR Empowers Clinical Variation Reduction at Cedars-Sinai

Harry C. Sax, MD, FACS, MHCM, FACHE, Professor and Executive Vice Chair, Cedars-Sinai Medical Center, and John Kontor, MD, Executive VP, Optum Advisory Services. Cedars-Sinai Health System partnered with Optum Advisory Services and Stanson Healthcare to design and execute an observational study to show that embedding care standards effectively within the provider workflow is at the heart of scalable, sustained care variation reduction efforts. In the study, improvements in care efficiency were driven by improving physician adherence to set guidelines using clinical decision support delivered to clinicians through the electronic health record. This resulted in savings of \$944 per patient encounter (7% of the median encounter and a 6% decrease in the length of stay). Furthermore, where providers did not adhere to recommendations, readmissions within 30 days increased by 14% and complications by 29%. Drs. Sax and Kontor also discuss Cedars-Sinai's overall CDS adoption strategy to address unwarranted care variation across the patient journey. *This teleconference is part of the [Clinical Decision Support Collaborative](#).*

September 4, 1-2 pm CT

CMS Draft Specifications for 2019 QPP and IPPS Final Rule

Dan Golder, DDS, MBA, Principal, and Larry Katzovitz, Senior Advisor, Impact Advisors. Dan and Larry examine the recent draft specifications for both the CMS' 2019 Quality Payment Program (QPP) and the 2019 IPPS Final Rule, providing a high-level look at both pieces of legislation, how they interrelate, and what providers and healthcare organizations need to know. Highlights include changes to MIPS eligibility, new provider types who must now report to MIPS, changes to virtual groups and other categories and specifications. And on the IPPS side, they discuss details on the new opioid e-prescribing measures, impact to both Medicare and Medicaid hospitals, how they may impact clinicians, and the Top 5 things that providers and healthcare organizations should be doing now. *This teleconference is part of the [Value-Based Care Collaborative](#).*

September 11, 1-2 pm CT

Update on MACRA and VBC Regulations and Social Determinants of Health

Anne Phelps, Principal, and Brian Flanigan, Principal, Deloitte Consulting, LLP. The changing landscape of Value-based Care, as it exists through regulatory, market or technological shifts, can make it difficult to connect the dots between regulation and value-based care. Join Anne and Brian to receive a view from the market on emerging VBC payment models, the technology infrastructure these payment models require, and an update on regulation that is driving the industry from volume to value. *This teleconference is part of the [Value-Based Care Collaborative](#).*

September 12, 1-2 pm CT

Open Source Clinical Data Search Engine - EMERSE at Michigan Medicine

David Hanauer, MD, MS, FACMI, Program Director of Clinical Research Informatics, Michigan Institute for Clinical & Health Research, Assistant Chief Medical Information Officer, and Associate Professor at the University of Michigan. Often the most detailed clinical data are trapped within the free text clinical notes, and these data are needed when the structured/coded data are inaccurate or incomplete. For more than a decade, the University of Michigan has been developing and using a free text search engine designed for clinical documents, called EMERSE (Electronic Medical Record Search Engine). EMERSE has been used to support a wide range of operational, clinical, and research tasks, resulting in improved operational efficiency, more powerful research, and even financial savings. With support from grants from the National Institutes of Health, Michigan Medicine is providing EMERSE at no cost to other institutions interested in adopting the software. The University of North Carolina is already providing EMERSE as a service to their users. EMERSE was designed for users with no technical expertise other than being able to use a search engine (like Google), and has been highly regarded and widely used. Dr. Hanauer describes use cases for EMERSE, implementation requirements, and provides a demonstration of its capabilities. *This teleconference is part of the [Clinical Decision Support Collaborative](#).*

September 13, 1-2 pm CT

Remote Care Monitoring to Improve Consumer Engagement at Ascension

Carrie Stover, MSN, NP-C, Senior Director Virtual Care, Ascension. More than just the deployment of new technology, the development of right-size care solutions compels us to improve value and workflow while focusing on personalized risk using patient and provider friendly solutions for remote monitoring. Carrie reviews Ascension's early successes using tried and true solutions in innovative ways for new patient populations, along with lessons learned and discussion of continued challenges related to demonstration of value, documentation, technology and reimbursement. *This teleconference is part of the [Value-Based Care Collaborative](#).*

September 17, 1-2 pm CT

Clinical Decision Support at Methodist Le Bonheur

Burton Hayes, MD, CMIO, Methodist Le Bonheur. Dr. Hayes discusses how Clinical Decision Support has evolved at Methodist Le Bonheur Healthcare with an open discussion about how others are approaching this topic. Included in the discussion will be Methodist Le Bonheur's efforts to reduce alert fatigue while increasing the effectiveness of clinical alerts. *This teleconference is part of the [Clinical Decision Support Collaborative](#).*

September 19, 1-2 pm CT

Addressing the Current Healthcare Cybersecurity Challenges and Threat Landscape

Mac McMillan, Chief Executive Officer, CynergisTek, Inc. 2017 was an unprecedented year for breaches and ransomware attacks on healthcare organizations and is continuing to be a significant challenge in 2018. In this session, Mac discusses how healthcare got to where it is in terms of privacy and security, why it is NOT just an IT or security issue, and how emerging risks may wreak even more havoc in

healthcare. Most importantly this session provides some strategies and insights to help providers bolster cybersecurity efforts. *This teleconference is part of the [Security Collaborative](#).*

September 20, 1-2 pm CT

Excellent Culture Leads to an Excellent Implementation at Centura

Petra Olsen, RN, MSN, Clinical Applications Director, Centura Health. The work culture you either allow or create impacts the quality of your work; in this case, your EHR Implementation. Petra shares Centura Health's "secret sauce" to deliberately creating a culture of excellence to complete an Epic Implementation for its 17-hospital system in 18 months - on time and under budget. By developing a stringent hiring process, establishing project milestones with a "Centura date," and establishing a variety of creative staff retention practices, Centura Health was able to realize one of the most successful Epic implementations. Join us to learn some of the creative ways they had fun along the way, including basketball games, awards, celebrations, wellness breaks, all-staff retreats, and more. *This teleconference is part of the [Clinical Decision Support Collaborative](#).*

September 25, 1-2 pm CT

Precision Medicine at Geisinger - Making DNA Sequencing Part of Routine Clinical Care

John Bulger, DO, MBA, Chief Medical Officer Population Health, Geisinger Health System and the Chief Medical Officer of Geisinger Health Plan, and David Ledbetter, PhD, Executive Vice President & Chief Scientific Officer at Geisinger Health System. At Geisinger, the goal is Caring - for the people and communities we serve to improve health. Precision Medicine aims to incorporate genomic data into medical decisions to improve effectiveness. Geisinger's aspiration is Precision Health, which expands the model to promote health and wellness. Drs. Bulger and Ledbetter discuss their experience in DNA sequencing of more than 90,000 Geisinger patient-participants, revealing over 700 with potentially life-threatening conditions whose risk can be greatly reduced, and their current transition from a research framework to incorporate genomic data throughout the care continuum on a routine clinical basis. *This teleconference is part of the [Clinical Decision Support Collaborative](#).*

September 26, 1-2 pm CT

Best Practices for Orchestrating Bundled Payments

Deb Lauricia, MBA, Senior Director Revenue Cycle Strategic Initiatives, Cleveland Clinic, and David Mauzey, General Manager Payment Innovation, Optum. These experts share clinical and financial results from Medicare bundled payment programs, and the key components to implementation success, performance management and the technology holding it all together. Learn how bundled payments help Cleveland Clinic accomplish its business strategies, how they structure program governance, and the technology they use to support more than six years of pioneering bundled payments. *This teleconference is part of the [Value-Based Care Collaborative](#).*

September 27, 1-2 pm CT

Developing a Robust Clinical Decision Support Analytics Portfolio at THR

Luis Saldana, MD, MBA, FACEP, CMIO, and Kanan Garg, MS, MA, MPH, CPHIMS, SSBB, Applications Analyst III, Clinical Business Intelligence, Texas Health Resources. Dr. Saldana and Kanan share their journey in improving measurement of the end user impact of various clinical decision support (CDS) interventions including alerts and order sets, and the effectiveness and value of clinical decision support interventions in their electronic health record. They discuss the tools they are using and developing for measurement, and the challenges, as well as share some clinical use studies to demonstrate the value of these analytics efforts. *This teleconference is part of the [Clinical Decision Support Collaborative](#).*

October 2, 1-2 pm CT

But What About Quality? Refocusing EHR Implementation Efforts on The Real Reason at Spectrum

Julie Bonewell, BSN, MBA, CPHQ, Director Quality Improvement, Spectrum Health, and Angela R. Tiberio, MD, Physician Executive, Impact Advisors. The concept of Health Care Information Technology (HCIT) as a foundation for higher quality and safer care has been a focus for more than 40 years in the US. The Institute of Medicine report in 2001 - [Crossing the Quality Chasm](#) - and subsequent federal actions have led to an unprecedented pace of Electronic Health Record (EHR) implementations. However, the promise of truly better care has been disappointingly elusive for many institutions who spent significant resources (financial and human) on their implementations. The bottom line: it's not about the technology!! Spectrum Health undertook a massive transformational endeavor (aka "Nexus") and proactively identified their "Top 40 Safety/Quality Imperatives" for which they wanted their EHR implementation to either maintain an already excellent record or improve on the current state. Learn how Spectrum leveraged their substantial internal expertise (clinical, quality and technical) to influence their

EHR build to achieve goals that many places have been unable to accomplish. *This teleconference is part of the [Clinical Decision Support Collaborative](#).*

October 4, 1-2 pm CT

Strong Beginnings Program at Spectrum Reduces Infant Mortality

Peggy Vander Meulen, Program Director Strong Beginnings - Healthy Start, Spectrum Health. Strong Beginnings is a partnership of eight agencies working to improve the health and well-being of African American and Latin families during pregnancy and early childhood and to eliminate racial disparities in birth outcomes in Kent County, Michigan. The program provides in-home family support services, education, referrals, and mental health counseling. And it strives to improve the overall system of care through a community consortium of ninety members. The holistic approach addresses the many social determinants that impact maternal and child health with a special focus on dismantling racism and promoting racial equity. *This teleconference is part of the [Value-Based Care Collaborative](#).*

October 9, 1-2 pm CT

The Digital Core: Creating a Next Generation Approach to Finance and Supply Chain Management

Marc Perlman, Managing Director and Global Business Development Leader, Sam Johnson, Senior Manager Strategy and Operations, and Paul Kreder, National Leader Health Care Provider Supply Chain, Deloitte Consulting, LLP. As supply chain functionality from the major cloud ERP vendors continues to evolve, health systems are increasingly moving towards the cloud along with other digital technologies to transform their operations and solve tomorrow's complex business problems, today. The migration to the cloud offers significant functionality enhancements from on-premise in areas like requisitioning, approvals, and contract management, while also providing a catalyst-like opportunity to change culture, standardize business practices, and align policies/procedures across a health system. Additionally, the exploration of digital technologies like robotic and cognitive automation, advanced demand planning, and visualization tools can dynamically change how supply chain resources manage non-labor spend and drive exponentially more value to their organizations.

October 12, 1-2 pm CT

Analytics Driven Personalized Healthcare at Intermountain

Lonny Northrup, Senior Medical Informaticist, Intermountain Healthcare. The promise of machine learning and artificial intelligence in healthcare are delivering results TODAY in the form of analytics-driven personalized healthcare. Join this call to hear how dozens of healthcare systems across more than 60 clinical use cases are already achieving unprecedented results in clinical outcomes, patient satisfaction, readmissions, clinical utilization, care management capacity, etc. *This teleconference is part of the [Value-Based Care Collaborative](#).*

October 15, 1-2 pm CT

Leading an IT Organization in an Evolving Marketplace

Dick Flanigan, SVP, Cerner. When it comes to successful leadership, attributes like vision, communication and integrity never go out of style. Today, healthcare IT (HIT) leaders must navigate challenges, adapt to the latest technological innovations and demonstrate strong business acumen. To foster collaborative relationships in HIT, leaders must work together to create an aligned infrastructure and culture that drives our industry forward for generations to come. *This teleconference is part of the [Value-Based Care Collaborative](#).*

October 16, 1-2 pm CT

Improving Population Health Outreach by Engaging Patients

Susan Hartman, MD, MS-HQSM, FAAFP, Medical Director of Quality, Central Indiana Division, and Kathryn Vanni, MBA, MHA, Director of Quality and Performance Improvement for Franciscan Physician Network. Franciscan Physician Network (FPN) is the ambulatory division of Franciscan Alliance, a faith-based healthcare organization owned and operated by the Sisters of St. Francis which includes 14 hospitals and 10 medical groups from central Indiana to south suburban Chicago. Franciscan Alliance was one of the 33 Pioneer Accountable Care Organizations (ACO) in the country and now participates in seven different commercial and governmental ACO products. FPN shares lessons learned on their journey to improve population health by extending the reach and effectiveness of care teams and creating greater consistency in educating and engaging patients throughout the continuum of care. *This teleconference is part of the [Value-Based Care Collaborative](#).*

October 18, 1-2 pm CT

Medical Device Security and Security Services

Dan Czech, Analyst Cyber-security, and Colin Buckley, Senior Analyst, KLAS. In 2017 KLAS uncovered that only 16% of healthcare systems felt they had a well developed security plan. Fast forward to 2018, and how has that changed, what strategies are being deployed regarding Cyber security, particularly medical device security? Join Dan and Colin as they discuss these topics as well as vendors and service firms who are helping providers secure their digital environments. *This teleconference is part of the [Security Collaborative](#).*

October 23, 1-2 pm CT

High Performance Healthcare Journey: Achieving Sustained Reliability, Consistency and Quality at THR

Luis Saldana, MD, MBA, FACEP, CMIO, Maxine Ketcham, Clinical Decision Support Applications Analyst, Texas Health Resources, and Brita Hansen, MD, CMO, LogicStream Health. Texas Health Resources (THR) is achieving clinical improvement by hardwiring evidence-based practices into their clinical processes across all 14 of its hospitals using Clinical Process Improvement (CPI) methodologies. This talk discusses why CPI is foundational to THR's journey to high reliability, so that for every patient, every time, at every facility, care teams are consistently doing the right thing. The organizational framework and keys to success employed by THR are shared, including integration with Clinical Decision Support within the EHR and how this work is tracked to facilitate sustained performance improvement over time. Finally, they present a representative use case and share other examples of success. *This teleconference is part of the [Clinical Decision Support Collaborative](#).*

October 30, 1-2 pm CT

Streamlining Clinical Effectiveness at Ascension

Ann Hendrich, PhD, RN, FAAN, Senior VP, Chief Quality/Safety/PSO and Nursing Officer, Sheila Stern, VP Clinical Professional Development, and John Pirolo, MD, Senior VP and CMIO, Ascension. Ascension Healthcare has established a system-level effort to narrow clinical variation, align platforms with evidence-based medicine and best practices, and streamline monthly tracking of performance. These efforts have been aligned with high-reliability training, clinical professional development, cost accounting, process improvement for clinicians, and system scorecard goals. Clinical education and competency alignment will ensure providers and teams have access to the tools they need to improve performance, quality, and cost to meet the quadruple aim of care and caring. *This teleconference is part of the [Clinical Decision Support Collaborative](#).*

October 31, 1-2 pm CT

Data and Analytics Initiatives Drive Quality of Care and Saves Millions

Morgan Bradham, MBA, Executive Director Quality Improvement & Care Coordination, and Ashton Glasgow, PharmD, BCACP, Clinical Pharmacist, Palmetto Primary Care Physicians. Palmetto Primary Care Physicians, the largest independent physician practice in South Carolina, has competed successfully with larger, integrated groups in the new arena of value-based care. Palmetto PCP leaders believe that their No. 1 competitive strategy is their physicians and their laser focus on quality of care and leaders have enabled this through deliberate and intense focus on data and analytics. Morgan and Dr. Glasgow highlight Palmetto's data-driven approach to engaging their physicians in their drive towards raising the standards of care, and discuss insights into how this was a key strategy in helping the organization gain \$4 million in shared savings from their various ACO contracts. *This teleconference is part of the [Value-Based Care Collaborative](#).*

November 1, 1-2 pm CT

Precision Medicine: Understanding the Technology Landscape

Colin Buckley, Senior Analyst, Alex McIntosh, Senior Analyst, and Kody Hansen, Director of Precision Medicine Research, KLAS. Given its potential to help providers deliver better, more targeted care and dramatically improve patient outcomes, precision medicine is a growing area of interest for many provider organizations. Those looking to develop a precision medicine program can find it confusing to determine which of the hundreds of vendors in the market will be most helpful. Colin, Kody and Alex break down the market of solutions and early strategies that providers are embarking on to impact the delivery of care. *This teleconference is part of the [Value-Based Care Collaborative](#).*

November 6, 1-2 pm CT

The Power of Using Clinical Analytics to Drive Follow-up on Incidental Findings

Ben Wandtke, MD, MS, President of Medical Staff, Chief of Diagnostic Imaging, FF Thompson Hospital at the University of Rochester Medical Center, and William Boonn, MD, CMIO, Healthcare Diagnostics,

Nuance. Incidental findings are common and while most are benign, others represent early treatable forms of cancer. The management of incidental findings has historically been a source of frustration for physicians and patients alike. Recommendations for follow-up imaging tests, intended to identify the early forms of cancer are “lost” or never completed for 30-70% of patients, a result of inconsistent communication between healthcare providers and systemic and technologic limitations. A collaborative, system-based approach to managing recommendations can save lives, reduce liability, and generate new revenue. Drs. Wandtke and Boonn share advancements to “close the loop” using clinical analytics and practical methods that significantly improve healthcare outcomes. *This teleconference is part of the [Clinical Decision Support Collaborative](#).*

November 7, 1-2 pm CT

Culinary Medicine at Spectrum Health

Leanne Mauriello, PhD, Director, Behavioral Science & Lifestyle Management, Spectrum Health, and Tim Harlan, MD, Associate Dean for Clinical Services at Tulane University School of Medicine. Spectrum Health partnered with Tulane University’s Health Meets Food to teach culinary medicine to medical residents, clinicians, and patients. Dr. Harlan discusses the Health Meets Food curriculum and approach and how culinary medicine programs have been implemented in 50 healthcare organizations across the country. And Dr. Mauriello shares how Spectrum Health is positioning culinary medicine as a pillar of their evolving lifestyle medicine program to drive positive clinical results. Learn how culinary medicine can engage, educate, and positively impact healthcare professionals and patients while sparking positive organizational changes and expectations around health and wellness. *This teleconference is part of the [Value-Based Care Collaborative](#).*

November 8, 1-2 pm CT

Personal Digital Assistants: Using Electronics to Improve Quality of Life for Seniors at Ascension

Christine Way, Senior Director Experience Products, and Ravi Kosaraju, Director Ascension Technologies, Ascension Health. *Saturday Night Live*’s many-times-viewed skit about seniors using Amazon’s Echo got it mostly right: seniors are using personal digital assistants more than ever before, but with much better results. Christine and Ravi share how Ascension is using personal digital assistants to help seniors improve their quality of life. Following successful pilots at Ascension Living assisted living and skilled nursing facilities, Ascension is now bringing digital assistants such as the Amazon Echo into additional acute care settings. Residents and patients can use the technology to review the dining menu, activity calendar and care schedule, as well as play music, ask questions, communicate with family members and check the weather. They also discuss the technology and the cultural journey that has the potential to substantially change care for seniors. *This teleconference is part of the [Value-Based Care Collaborative](#).*

November 13, 1-2 pm CT

Aligning the Digital Customer Experience with Business Objectives

David Betts, Principal, Josh Nelson, Principal, and Quinn Solomon, Principal, Deloitte Consulting, LLP. Healthcare organizations are working to meet and exceed the expectations of their increasingly digital and engaged customers while simultaneously meeting their business objectives. As organizations explore various digital tools and technologies to meet these expectations, they are faced with questions like whether they should add another solution to their portfolio or try to enhance the capabilities of their EMR to support these needs. With multiple solutions, they must also think about how to create a cohesive and integrated digital experience that supports business objectives such as margin improvement and risk management. Hear how providers are approaching this issue, and tools and considerations that can be used. *This teleconference is part of the [Value-Based Care Collaborative](#).*

November 15, 1-2 pm CT

Strategic Initiative Office at Intermountain

Dan Liljenquist, SVP/Chief Strategy Officer, Intermountain Healthcare. Intermountain Healthcare’s Enterprise Initiative Office functions as an internal strategy consulting resource to Intermountain’s Executive Leadership team. It is responsible for developing, resourcing and implementing key system-wide strategic initiatives, and is expected to generate a 10X return in the investment in the team each year. In this presentation, Dan discusses how Intermountain designed and launched its Enterprise Initiative Office. *This teleconference is part of the [PMO Collaborative](#).*

November 19, 1-2 pm CT

Pharmacy Dashboards and Scorecards at Adventist Health West

Terence (“Terry”) Webb, PharmD, MBA, VP Pharmacy Services, Adventist Health West. Data can be assembled in different ways to become actionable information, and Adventist Health uses a variety of

dashboards and scorecards to help with operational and strategic actions/decisions that support reporting to senior executives and monitoring operations and initiatives. Terry discusses what reporting they have and how they use them to operate more efficiently, reduce costs, and improve clinical outcomes. *This teleconference is part of the [Value-Based Care Collaborative](#).*

November 28, 1-2 pm CT

After 10 Years of Safety Testing of Operational EHRs What Have We Learned?

David Classen, MD, CMIO, Pascal Metrics, and Professor of Medicine, University of Utah. In 1999, the Institute of Medicine report "To Err is Human" revealed that 98,000 people die every year due to medical errors. The Leapfrog Group founders partnered with the Business Roundtable, leading researchers and academics, and top quality and patient safety experts with a plan to reverse these troubling trends, using transparency in reporting to drive giant leaps forward in safety and quality of care. The Leapfrog Hospital Survey was begun in 2001 with an initial focus on CPOE, intensivist staffing in the ICU, and sufficient surgical volumes; it now includes additional measures critical to purchasers and consumers, including infection rates, Cesarean section rates, and medication safety. Dr. Classen reviews the data and insights gleaned from 10 years of test results using the Leapfrog CPOE tool, which has grown in use to over 2000 hospitals in 2017. *This teleconference is part of the [Clinical Decision Support Collaborative](#).*

November 29, 1-2 pm CT

Population Health Outcomes, Medication Adherence, and Pharmacy Management Services

Sharrel Pinto, BS Pharm, DMM, MS, PhD, Hoch Family Endowed Professor for Community Pharmacy Practice, South Dakota State University. Dr. Pinto shares the results of the STOMPP study, a *Study to Measure the Impact of Pharmacists and Pharmacy Services (STOMPP) on Medication Non-Adherence: Medication Adherence and Clinical Outcomes*. The study compared the impact of various pharmacy-based services on medication adherence and clinical outcomes among subjects with type 2 diabetes receiving care within a regional integrated delivery network (IDN) with multiple community pharmacy practice sites and a practice group of endocrinologists. Patients experienced improved clinical outcomes and adherence rates when using blister packaging and medication therapy management services, individually and in combination. *This teleconference is part of the [Value-Based Care Collaborative](#).*

December 4, 1-2 pm CT

The Baycare Story: Empowering Patients Post-discharge to Improve Care Transitions

Amy Cain, MSN, RN, Director of Quality East Region, BayCare Health System. BayCare connects individuals and families to a wide range of services at 14 hospitals and hundreds of other convenient locations throughout the Tampa Bay and West Central Florida regions. They were facing a challenge common to most, if not all providers, which was the need to stay connected with patients in a way that meaningfully informs, engages and drives action. Amy shares how they were able to improve care transitions by empowering patients post-discharge with a personalized patient centric experience that effectively delivered results for both patients and the organization. *This teleconference is part of the [Value-Based Care Collaborative](#).*

December 10, 1-2 pm CT

Combating the Opioid Crisis using Clinical Decision Support at Atrium Health

Matt Sullivan, MD, CMIO, Atrium Health, and Alan Staples, Senior Strategist, Cerner. Atrium Health utilizes clinical decision support alerts within the electronic health record that are triggered by selected risks for opioid abuse. The alerts might include a history of prior opioid overdose, or whether he or she had tested positive for marijuana or cocaine in a prior toxicology screening. Atrium Health physicians who prescribe opioids or benzos are alerted by the electronic health record when a patient's history shows one of five red flags. In six months, Atrium Health prevented: 3,860 opioid prescriptions and 2,857 BZD prescriptions. The ultimate goal of this intervention was not to achieve a cancellation for all at-risk patients; rather, to provide information to prescribers to augment their clinical decision-making with the utilization of real-time information at the point of care. *This teleconference is part of the [Clinical Decision Support Collaborative](#).*

December 12, 1-2 pm CT

Utilizing AI in the Clinical Workflow at Rush

Shafiq Rab, MD, MPH, FCHIME, CHCIO, Senior VP and CIO, Rush University Medical Center, and Kali Durgampudi, VP Innovation, Mobile Architecture and R&D, Nuance. Rush University Medical Center is one of the first medical centers to adopt AI-powered virtual assistant solutions as a stepping stone toward ambient clinical intelligence. Hear how virtual assistants listen to, document and automate clinical workflows to transform the physician - patient experience. *This teleconference is part of the [Value-Based Care Collaborative](#).*

December 13, 1-2 pm CT

Best Practices to Identify and Control Drug Shortages

Lina Saliba, PharmD, BCCCP, BCPS, Senior Pharmacy Specialist, Yale New Haven Health System, Samantha Bastow, PharmD, BCBS, Associate Director Clinical Pharmacy Services at UChicago Medicine, Michael Ganio, PharmD, MS, BCPS, FASHP, Director Pharmacy Practice and Quality at American Society of Hospital Pharmacists (ASHP), and Patrick Yoder, PharmD, CEO, LogicStream Health. Healthcare leadership is increasingly focused on finding ways to better manage and control the drug shortage crisis. Significant clinical staff time and money is being applied to address medications in short supply. The problem is adversely affecting hospital finances, adding risk for patients, and presenting a major obstacle to clinician productivity. Identifying, assessing and managing drug shortages and the associated workflows in the EHR as well as various pharmacy automation systems is often a highly manual, time-consuming process. Hear from this panel about the industry view from ASHP and how two innovative providers are approaching this issue, along with tools and considerations that can be used to better manage and control drug shortages. *This teleconference is part of the [Clinical Decision Support Collaborative](#).*