SI 2019 BayCare Health System/Publix and HealthHub Site Visit

January 17–18, 2019

Hosted by:

SCOTTSDALE INSTITUTE
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BayCare

Executive Summary

The Scottsdale Institute convened executives from leading U.S. health systems in Clearwater, Florida, January 17-18, 2019, for a discussion about retail health and digital innovation hosted by BayCare Health System. Participants combined informal group sessions with site visits to two of BayCare's new ventures in digital health. Walk-In Care rooms where patients can have a live video conference with a physician have been erected in Publix Super Markets through a BayCare collaboration with that southeastern U.S. grocery chain. And BayCare HealthHubs are community health and wellness centers where consumers can visit their doctors, access wellness activities, and also purchase or receive assistance with health-technology devices at the BayCare TechDeck staffed by a BayCare health technology coach.

Site Visit Participants

Craig Anderson – Director of Innovation, BayCare Health System

Elaine Bridge, DNP – Vice President of Strategic Operations, Partners HealthCare System, Inc.

Lynette Clinton – Vice President of Applications, BayCare Health System

Andy Crowder – Senior Vice President and Chief Information Officer, Scripps Health

Amanda DeMano – Executive Director of IT Strategic Programs, University of Chicago Medicine

Alistair Erskine, MD – Chief Digital Health Officer, Partners HealthCare System, Inc.

Deborah Fullerton – Chief Marketing Officer, AMITA Health

Jeffrey Held, MD – Vice President and Chief Medical Officer for Ambulatory Services, BayCare Health System

Greg Hindahl, MD – Vice President and Chief Medical Information Officer, BayCare Health System

Preston Jennings – Chief Information Security Officer, Trinity Health

Jason Joseph – Senior Vice President and Chief Information Officer, Spectrum Health

Clark Kegley – Assistant Vice President of Information Services, Scripps Health

David Kirkus – Director, Pharmacy Administration, Publix Super Markets

Bryan Kissinger, PhD – Vice President and Chief Information Security Officer, Banner Health

Thien Lam – Vice President and Chief Information Security Officer, BayCare Health System

Mark Lantzy – Senior Vice President and Chief Information Officer, IU Health

Brennan Lehman – Chief Information Officer, Mosaic Life Care

Susan Milford – Senior Vice President of Marketing & Communications, OSF HealthCare

Heather Nelson – Vice President and Chief Information Officer, University of Chicago Medicine

David Oakley – Vice President of Digital Health & Development, AdventHealth

Michael Pulido – Chief Operating Officer, Mosaic Life Care

Ed Rafalski, PhD, FACHE – Senior Vice President and Chief Strategy & Marketing Officer, BayCare Health System

Kenneth Riley – Director, Patient and Population Health Technologies, Baystate Health System

Louise Shah – Executive Director of Digital Health Business Strategy, Partners HealthCare System, Inc.

Tim Thompson – Senior Vice President and Chief Information Officer, BayCare Health System

Russ Walker – Vice President and Chief Information Security Officer, AdventHealth

Alan Weiss, MD – Vice President and Chief Medical Information Officer, BayCare Health System

David Wetherhold, MD – Executive Medical Director for Ambulatory Systems, Scripps Health

Convener: Scottsdale Institute

Janet Guptill, FACHE
Cindy Mendel
Gordon Rohweder
Cynthia Schroers
Shelli Williamson

Introduction

Consumer engagement and convenience have never been more important than they are now with the move to a value-based model for healthcare. In this period of rapid transformation, many healthcare systems are debating how deeply to dive into digital health, tallying the pros and cons of retail healthcare delivery, counting the costs, and exploring new platforms and partnerships. The search for answers to new questions is underway. Pilot project or full on? Fast fail or long haul? What are the use cases? What type of governance works best in these new environments? What should health systems look for in a retail partner? How do they track and measure telehealth success? How can they bring uncomfortable colleagues along for the ride to digital transformation?

During a two-day visit to BayCare, a not-for-profit health system with 15 hospitals and hundreds of other care locations in the Tampa Bay and central Florida regions, participants shared what they hoped to learn, went on site visits to observe two BayCare ventures in retail and digital health, and shared their takeaways.

A Retail Partnership

In late 2017, BayCare and Publix Super Markets launched a collaboration in retail healthcare. There are several synergies between the two organizations. Publix is the largest employer in the Tampa Bay area. BayCare, with 28,000 team members, is the second-largest. BayCare wanted to expand into retail healthcare with a telehealth initiative. Publix had dropped an earlier attempt at in-store nurse practitioner clinics, but was intrigued by a telehealth venture with the right partner. Both organizations emphasize quality and customer satisfaction and have recognizable brands in the region. Both were looking to grow their customer base.

The result of almost two years of discussions is:

» **Walk-In Care provided by BayCare:** Publix created space near its pharmacies in selected bay-area stores for construction of a small, private room where a consumer with a minor illness can have a telehealth session with a physician. The patient uses several medical instruments during the visit to relay vital information to the physician. Publix pharmacists answer questions, fill prescriptions ordered during the visit, and disinfect the room after each visit. Nineteen Walk-In Care rooms have been constructed, with an expectation of up to 40.

» **Pharmacies:** BayCare had five in-hospital retail pharmacies plus a meds-to-beds program at all of its hospitals. Publix, which has over 1,100 pharmacies, purchased the five in-hospital pharmacies and now operates them and the meds-to-beds service.

» [higi stations](#)**:** Publix has higi stations in all of its stores, where customers can check their vitals. Stations in bay-area stores now carry the BayCare brand.

> "We're very reputable in grocery, very reputable in pharmacy, but, on our own, we are not a destination for consumers seeking medical care. The BayCare collaboration brings in expertise from a well-known and respected medical provider."
>
> – **David Kirkus**, Director, Pharmacy Administration, Publix

"BayCare lends immense credibility to that medical model in our stores," said David Kirkus, Director of Pharmacy Administration for Publix, who confirmed that the grocer already is looking for collaborators in its other markets in seven states. "We're very reputable in grocery, very reputable in pharmacy, but, on our own, we are not a destination for consumers seeking medical care. The BayCare collaboration brings in expertise from a well-known and respected medical provider. The synergy from both sides is tremendous and is something we will continue to build upon."

"The template's been built," said Ed Rafalski, PhD, FACHE, BayCare Senior Vice President and Chief Strategy & Marketing Officer.

Creating the Digital Brand

BayCare has a 36 percent market share in the four counties where its hospitals are located. Rafalski was looking for a way to reach others while also improving access to healthcare. Publix provided a channel.

"The beauty of this model is that Publix is basically on every corner in this four-county area," he said. "The power of being able to have a conversation with someone who doesn't know you, in a space they visit regularly, was the opportunity. Publix has one of the most respected brands in retail. Combining that brand strength with our brand strength was a natural marriage."

"Most of us in healthcare are pretty naïve about the true retail experience. So how do you not only place your technology somewhere, but also get someone to adopt it and love it?"

– **Amanda DeMano**, Executive Director, IT Strategic Programs for University of Chicago Medicine

BayCare's consumer digital strategy is multifaceted. In addition to Walk-In Care, the health system offers BayCare Anywhere, an app that gives consumers access to a digital visit with their doctor on their smartphones or tablets; Save Your Spot, which allows patients to use their phones or computers to reserve a place in line at BayCare Urgent Care centers; Compass, a wayfinding app that guides consumers around BayCare hospital campuses; and the TechDeck. Participants at the BayCare conference wanted to learn more about BayCare's innovation strategies and methods.

"I always hear the phrase, 'Don't skate to the puck, skate to where the puck is going.' So I'm trying to figure out what our strategy should be and how multi-faceted it should be," said Elaine Bridge, Vice President of Strategic Operations for Partners HealthCare System. "People are going to start relying more and more on digital technology, it seems, so how do you knit all that together and not fall behind, but not over-commit to one area or another?"

– **Russ Walker**, VP and CISO, AdventHealth

"I'm looking to understand how to imagine the retail experience," said Amanda DeMano, Executive Director of IT Strategic Programs for University of Chicago

Medicine. "Most of us in healthcare are pretty naïve about the true retail experience. So how do you not only place your technology somewhere, but also get someone to adopt it and love it?"

Added Preston Jennings, CISO for Trinity Health, "The better we understand the art of the possible, the better we can establish a foundation and make sure the technologies and capabilities work—better, quicker, faster—for the business."

Moving Faster

Moving quickly enough to be innovative without wasting time and money on failed tech is a challenge for many in healthcare. With big players like Amazon looming and consumers demanding care that is more convenient and less expensive, finding the sweet spot between moving quickly and moving cautiously is tough.

BayCare designed its Innovation department for speed. It has its own budget for innovation projects. It pilots most of its projects. It has a "fail fast" philosophy, with decisions about whether to operationalize an innovation made in as little as a few months. One example of the emphasis on speed: The Innovation department and the BayCare legal department created a 1.5-page contract to use for Innovation pilot projects involving outside vendors.

"We do everything in pilots. That gives us some control over the scope, but it is also easier to go fast when you are only doing one hospital, one floor, 12 rooms," said Craig Anderson, BayCare's Director of Innovation. "We bring the funding to that. We set up the pilot, take care of getting the vendor, deal with legal and security. Your only mission as the champion or the operational or clinical owner is to help us define the metrics, because if this goes well in pilot, you are going to have to be the one to go pitch for the larger production dollars."

"We want Craig to be able to move as quickly as he possibly can," said Tim Thompson, BayCare Senior Vice President and CIO. "We are a go-find-it, try-it and implement-it kind of shop. Go and try it and either get through the pilot or fail quickly and forget it. We've had failures and we've had successes."

The Enterprise Wall

Implementing retail or telehealth initiatives can sometimes lead to a collision with the enterprise wall, where the work and technology required lead to strain and resistance within the organization, several attendees said. They wondered how BayCare and other organizations balance innovation with the need to continue regular operations, and further, how to win the acceptance of reluctant colleagues both inside and outside IT.

It was a problem Alistair Erskine, MD, Chief Digital Health Officer at Partners HealthCare System, encountered at a previous employer.

"We kept running into the problem that we had a prototype, we put it up, we got some results, and then it would crash against the enterprise wall," he said. "And it was incredibly frustrating to people that we were still in the prototype space. Because we'd created a widget—an aspect of some application—and knew there was value there, but we couldn't translate it up the enterprise scale."

"There's a lot of opportunities to make healthcare better, but scale is really hard," acknowledged David Oakley, Vice President of Digital Health & Development at AdventHealth. "We've run into challenges both with scaling the technology and scaling the operation. In fact, we've even built the wrong thing because we were pushing too far ahead of operations or didn't have them onboard to actually operationalize the thing."

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>
> – **Kenneth Riley**, Director, Patient and Population Health Technologies, Baystate Health System

Innovation and operations collide when employees must handle work on innovation projects but still keep up with their regular tasks and end up overloaded.

"How do you balance it?" asked Kenneth Riley, Director, Patient and Population Health Technologies at Baystate Health System. "If you pull people off to do the exciting stuff while you still want them to do their day job, it's not the same quality. They're putting their energy into the stuff they are passionate about and the day to day falls off."

– **Bryan Kissinger, PhD**, VP and CISO, Banner Health

Offered Lynette Clinton, Vice President of Applications at BayCare: "It's really a management issue, to say, 'Listen, this is your priority. These other things you have on your plate, you just need to not work on them for a while.' It is a balance. We give the opportunity to the team member who is excited to work on an Innovation project and then we backfill with some consulting if we need to. We've also tried to identify a person on each of our teams who likes to be involved in innovation and we just go straight to them when a project comes up."

Mark Lantzy, Senior Vice President and CIO of IU Health, wanted to hear how BayCare managed the relationships among the BayCare doctors, BayCare pharmacists and Publix pharmacists. "IU Health has invested in improving access to primary care and behavioral health services including telehealth

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visits with behavioral health coaches for patients who are fighting addiction."

When it comes to innovative technology, Heather Nelson, Vice President and CIO at University of Chicago Medicine, wondered, "How do you drive things without alienating a part of your organization? We've all heard the adage 'Culture eats strategy for lunch.' How do I as the CIO make sure I'm not letting that be a barrier, but thinking of it as an opportunity? How do we make ourselves ready? We can't continue to spin and let perfection be the enemy of good."

Resistance to innovations can come from all corners: financial, legal, clinical, even IT. "Sometimes innovation can be a scary word for security folks like me," said Thien Lam, Vice President and Chief Information Security Officer for BayCare. Greg Hindahl, MD, Vice President and CMIO at BayCare, shared a situation involving resistance to new technology.

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"We had so much opportunity to optimize the EMR, both on the inpatient and ambulatory side, and we tried to use some of this innovation stuff. But our physicians were saying, 'I don't really care about the fancy stuff. I just want the basic stuff to work so I can go home at the end of the day.' We've done a tremendous amount of optimization for ambulatory, and inpatient is improving as well, so that noise is calming down a little bit now and they are a little more receptive."

"Some of the success we've had is around the flavor of the work," said BayCare's Anderson. "You've got to do the work that has the right impact, but it helps the cause for innovation to have some stuff where people say, 'Oh, that's really cool.' "

It isn't surprising that many healthcare organizations are having trouble with scope, scale and getting everyone onboard the innovation train, said David Wetherhold, MD, Executive Medical Director for Ambulatory Systems at Scripps Health.

"Healthcare kind of grew from a series of kingdoms, and it's hard to tear down the walls of kingdoms and get everybody on the same page," he said. "We all do it with task forces and innovation groups and maybe what we need to do is to stop trying to fit our enterprise square peg into the innovation round hole. BayCare didn't do that. They created a carve-out and now people are clamoring to go from one project to the other. There's some really nice dynamics that happen as a result. You harness the creativity of people."

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Governing Innovation

Attendees were eager to hear how BayCare and other organizations represented at the meeting governed and funded innovation departments within the very traditional confines of most U.S. healthcare systems. Some reported struggling with lengthy budget processes, vendor contracts that took months to execute, and inadequate communication between Innovation and the C suite—all situations that can slow innovation to a crawl.

BayCare's Director of Innovation reports to the CIO and also has an Innovation Board that includes clinical and informatics leadership to review project ideas. Innovation has its own budget and gets additional help from a motivated system-wide grants department that searches for grants. The health system's chief strategy and marketing officer also has a digital leadership council "that is responsible for BayCare's whole digital approach," Anderson said.

AMITA Health Chief Marketing Officer Deborah Fullerton said her organization has a digital innovation council, but one of her biggest takeaways from the meeting was BayCare's 1.5-page legal contract for innovation project vendors. The biggest complaint she hears from startups is the months-long contracting process in healthcare.

Andy Crowder, Senior Vice President and CIO of Scripps Health, chairs a group of about 15 colleagues that has been meeting regularly for six months and helped craft budgets for digital investments. "This is a group of the willing who are trying to innovate to get things done," he said.

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Susan Milford, Marketing & Communications Senior VIce President at OSF HealthCare, said that her organization has an innovation center that has five years under its belt now. The organization has had a start-up feel but is now moving into a phase of developing more solid processes such as an innovation management office and KPIs for the overall health system strategic plan. "There have been growing pains as they have tried to determine their place and who is going to lead the charge," she said. Innovation reports up to the Chief Strategy Officer.

One of AMITA Health Chief Marketing Officer **Deborah Fullerton's** biggest takeaways: BayCare's 1.5-page legal contract for innovation project vendors.

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Partners HealthCare has created what it calls a "High Organizational Value (HOV) lane." The high work demands of research projects and the demands of innovation projects are steered into that lane for speed. "If you have funding and consensus and a prototype that shows impact and adoption by the end user, then you go faster and have some dedicated resources," said Erskine.

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Site Visit Takeaways

Participants first visited a Publix Super Market with a branded "Walk-In Care provided by BayCare" room constructed beside the in-store pharmacy. The small room has frosted glass and a white noise machine so patients are assured of privacy as they converse with a physician on a video kiosk provided by partner Amwell. Patients are directed to use various tools including a Bluetooth stethoscope, blood pressure cuff, thermometer, and "derm cam" to provide information to the physician. Physician notes are uploaded into Amwell's EMR and later copied into BayCare's Cerner EMR. Prescriptions may be filled at the Publix Pharmacy or elsewhere. All patients are called within 48 hours to see how they are doing, and BayCare tracks metrics such as the number of visits to each location, primary diagnoses, the number of prescriptions written, and online reviews.

Site visit participants then crossed the street to a BayCare HealthHub, which appears from the outside to be a traditional, multi-story medical office building, but with a decidedly different vibe on its remodeled first floor. BayCare HealthHubs are designed to be one-stop destinations for traditional medical services like doctor visits and lab and imaging services but also preventative services such as nutrition education and fitness classes, and technical help with health-technology devices such as scales, fitness trackers and blood pressure cuffs.

The technical help is offered at the BayCare TechDeck, a counter with bar stools and a giant, working iPhone that marks the spot. The TechDeck, BayCare's take on the Apple Genius Bar and Ochsner's O Bar, is staffed by a health-technology coach who will help customers with not just the health-technology devices sold there, but any digital health device. The TechDeck is notified when a physician puts an order in the EMR for a health-technology device for a patient.

"I'm envious of the fact that you have a multi-year contract with Publix. So you have a chance to incubate this and you can probably make changes and morph things as the environment changes and technology changes and we learn more about what our patients are looking for from a relationship with their providers."
– **Elaine Bridge**, VP, Strategic Operations, Partners HealthCare System

Participants offered their impressions after the two site visits.

Elaine Bridge: "I'm envious of the fact that you have a multi-year contract with Publix. So you have a chance to incubate this and you can probably make changes and morph things as the environment changes and technology changes and we learn more about what our patients are looking for from a relationship with their providers."

Louise Shah, Executive Director of Digital Health Business Strategy, Partners HealthCare System: "The visit was a great investment in time. I like the long view of that strategic relationship with Publix. Regarding the TechDeck, what stood out for me was the foresight to provide support for products beyond those you were selling—having the foresight to say, 'We're here for you.'"

Brennan Lehman, CIO, Mosaic Life Care: "I want to applaud the relationship between BayCare and Publix. I think the way to the future is strategic partnerships, especially in the grocery. I think there's a lot of opportunity there."

Michael Pulido, COO, Mosaic Life Care: "I appreciate the openness and honesty I hear. It helps those of us on the outside looking in. I think the TechDeck and the retail linkage is critically important—having the ability for people to have a one-stop shop."

Clark Kegley, Assistant VP for Information Services, Scripps Health: "There was a vibe at the TechDeck today that was really appealing. There was a coffee shop nearby and all I wanted to do was have a coffee and sit down on one of those couches. It was welcoming and very different from a traditional clinical setting."

Preston Jennings: "I was terribly, terribly impressed when you started pulling up data on the types of prescriptions, the volumes, where there were no scripts versus where there were scripts in the Walk-In Care centers, and you could very easily begin to start drawing conclusions from that data. That's really impressive."

David Oakley: "Kudos to BayCare for a lot of what we just saw. As a competitor, I would love to be a little more cynical, but the reality

is that you guys have done an amazing job of positioning yourself close to the consumer. In addition to the TechDeck, what fascinated me was the registration flow. You walk into the HealthHub and you are greeted at one of like six different stations. It was really inviting. And I think that's great. At the end of the day, we all want the same thing for our consumers and our patients, which is the healthiest versions of themselves."

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Conclusions

While the trend toward retail and digital transformation is undeniable, the path that leads there clearly is strewn with disruptions, challenges, uncertainties and questions.

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– **Preston Jennings**, CISO, Trinity Health

Everyone he spoke with during the Scottsdale session is experiencing some frustration, said Alan Weiss, MD, the new VP and CMIO for BayCare. "It's Chutes and Ladders—we go a couple of steps forward and fall backward."

However, there are many different ways to innovate that will make healthcare more accessible and useful for employees and patients.

"One of things I learned was we don't have to do this alone," said Erskine at the final session on Jan. 18. "We don't have to have the bookends on the entire patient journey. In the case of the Publix partnership, the pharmacist is saying, *'I'll* call the patient back, *I'll* make sure they got the medication.' "

Added Wetherhold: "I started out wondering how retail digital health competes and I really came away from this understanding that it's a completely different concept. It's not a competition at all. It allows you to put a presence of yourself in a place where the volumes are so low that it wouldn't make sense to put in a walk-in clinic or in an area where it's so busy you can take off some of that demand. This is opening up my eyes to where this can go."

"I really think we're all going to experiment and find the same thing," said Jason Joseph, Senior Vice President and CIO at Spectrum Health.

"Kudos to BayCare for a lot of what we just saw. As a competitor, I would love to be a little more cynical, but the reality is that you guys have done an amazing job of positioning yourself close to the consumer. In addition to the TechDeck, what fascinated me was the registration flow. You walk into the HealthHub and you are greeted at one of like six different stations. It was really inviting."

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"You have to put these things in the middle of the world and let people sniff them and figure out what they are for a while and then eventually they will take off. The new edge of discernment for us will be where do we fast-follow, where do we take our platform? It's going to be a challenge for us to make sure we don't lose what might be considered the rote transformation of the digital world in favor of the really edgy stuff, because healthcare is not going to transform overnight."

Thompson reminded attendees that it is vital to define what innovation means in your organization. "Our definition of innovation at BayCare is something that helps consumers, patients or physicians. Whatever your definition is, figuring it out and sticking to it is pretty important." Also important, he said, is to spend time thinking about the best ways to communicate change to your workforce, including physicians, and to avoid thinking that technology can solve every problem in healthcare.

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Erskine agreed. "The things that actually have impact are not the things that look shiny. The shiny things have the value of getting people excited, but the back-end things that actually fix the broken systems are the things that have massive value to patients and ultimately to the entire healthcare team. The portfolio needs to be balanced."

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About the sponsors

The **Scottsdale Institute (SI)** is a not-for-profit membership organization of prominent healthcare systems whose goal is to support our members as they strive to achieve clinical integration and transformation through information technology (IT). SI facilitates knowledge sharing by providing intimate and informal forums that embrace SI's "Three Pillars:"

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> Education
> Networking.

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BayCare Health System is a leading not-for-profit healthcare system that connects individuals and families to a wide range of services at 15 hospitals and hundreds of other convenient locations throughout the Tampa Bay and central Florida regions. Inpatient and outpatient services include acute care, primary care, imaging, laboratory, behavioral health, home care and wellness. Our mission is to improve the health of all we serve through community-owned, healthcare services that set the standard for high-quality, compassionate care.

For more information visit:
www.BayCare.org