

HEALTHCARE ROUNDTABLE

An Informative Q&A with OC's Top Healthcare Professionals



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President and Chief Executive Officer
MemorialCare



Robert T. Braithwaite
President and CEO
Hoag Memorial Hospital Presbyterian



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Gene Rapisardi
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Cigna



Annette M. Walker
President
City of Hope Orange County



Erik G. Wexler
Chief Executive
Providence St. Joseph Health, Southern California



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Chapman University's School of Pharmacy

Chapman University's School of Pharmacy (CUSP) is Orange County's first school of pharmacy. Housed at Chapman's Rinker Health Science Campus in Irvine, the first Doctor of Pharmacy class entered in September 2015. CUSP empowers students with broad and deep scientific foundations on future therapeutics and flawless personalized patient care, where pharmacy practice, industry, bio-medical/clinical sciences and global health system informatics intersect. The school delivers a three-year "accelerated" Pharm.D. degree, an MS in Pharmaceutical Sciences and a Ph.D. in Pharmaceutical Sciences. The high-tech Rinker teaching and research labs provide a unique flipped classroom andragogy and world-class discovery experiences for every student.



Cigna

Cigna (NYSE: CI) is a global health service company that helps people improve their health, well-being and peace of mind. The company traces its roots back more than 200 years, but it became the company it is today in 1982 with the merger of INA Corporation and Connecticut General Corporation. In December 2018, Cigna completed its combination with Express Scripts to create one of the world's largest health service companies. The company maintains sales capability in 30 countries and jurisdictions, and has more than 160 million customer relationships throughout the world. With more than 74,000 employees, it serves customers just about everywhere. Cigna delivers choice, predictability, affordability and quality care through integrated capabilities and connected, personalized solutions that advance whole person health. Its operating subsidiaries offer an integrated suite of health benefits and services, such as medical, dental, behavioral health, pharmacy, vision and supplemental benefits, as well as group life, accident and disability insurance.



City of Hope

City of Hope is an independent biomedical research and treatment center for cancer, diabetes and other life-threatening diseases. Founded in 1913, City of Hope is a leader in bone marrow transplantation and immunotherapy such as CAR T cell therapy. City of Hope's translational research and personalized treatment protocols advance care throughout the world. Human synthetic insulin and numerous breakthrough cancer drugs are based on technology developed at the institution. A National Cancer Institute-designated comprehensive cancer center and a founding member of the National Comprehensive Cancer Network, City of Hope is ranked one of America's "Best Hospitals" in cancer by *U.S. News & World Report*. Its main campus is located near Los Angeles, with additional locations throughout Southern California. For more information about City of Hope, follow us on Facebook, Twitter, YouTube or Instagram.



Hoag Memorial Hospital Presbyterian

Hoag is an approximately \$1 billion nonprofit, regional health care delivery network in Orange County, California, that treats more than 30,000 inpatients and 450,000 outpatients annually. Hoag consists of two acute-care hospitals – Hoag Hospital Newport Beach, which opened in 1952, and Hoag Hospital Irvine, which opened in 2010 – in addition to eight health centers and 11 urgent care centers. Hoag is a designated Magnet® hospital by the American Nurses Credentialing Center (ANCC). Hoag offers a comprehensive blend of health care services that includes five institutes providing specialized services in the following areas: cancer, heart and vascular, neurosciences, women's health, and orthopedics through Hoag's affiliate, Hoag Orthopedic Institute, which consists of an orthopedic hospital and two ambulatory surgical centers.



Hoag Orthopedic Institute

Hoag Orthopedic Institute (HOI)'s mission is to optimize the musculoskeletal health of individuals and their communities. HOI opened November 2010 and offers highly specialized and experienced board-certified orthopedic physicians who deliver patient-centered and value-based orthopedic care. HOI consists of a specialty hospital located in Irvine and three ambulatory surgery centers in Newport Beach, Mission Viejo and Orange. HOI has more than 300 physicians on staff, including more than 80 orthopedic specialists. HOI ranks in the 99th percentile for patients' likelihood to recommend the hospital and 98th percentile for overall hospital rating, according to Press Ganey's national database of hospitals. HOI focuses in the treatments of the knee, hip and spine disorders, and takes pride in specialty care related to sports medicine, orthopedic trauma and extremities care. Since 2010, HOI has been named by U.S. News & World Report and Becker's Orthopedic, Spine & Pain Management Review as one of the top orthopedic hospitals in the nation, and has been recognized by the Centers for Medicare & Medicaid Services (CMS) for earning the highest, five-star rating for overall quality of care.



Kaiser Permanente

Kaiser Permanente is committed to helping shape the future of health care. We are recognized as one of America's leading health care providers and not-for-profit health plans. Founded in 1945, Kaiser Permanente has a mission to provide high-quality, affordable health care services and to improve the health of our members and the communities we serve. We currently serve 11.8 million members in eight states and the District of Columbia. Care for members and patients is focused on their total health and guided by their personal physicians, specialists and team of caregivers. Our expert and caring medical teams are empowered and supported by industry-leading technology advances and tools for health promotion, disease prevention, state-of-the-art care delivery and world-class chronic disease management. Kaiser Permanente is dedicated to care innovations, clinical research, health education and the support of community health. For more information, go to kp.org/share. For information about Kaiser Permanente Irvine Medical Center, visit kp.org/orangecounty and follow us on Twitter @KPOCThrive.



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KPC Health

KPC Health has an integrated approach to serving the people of Orange, San Bernardino and Riverside County. Our acute care medical centers provide high quality, comprehensive and affordable healthcare for the entire family. For us, healthcare is not just about caring for our patients, but also about investing in the people throughout our communities. We are one team with one mission and that mission is for all our patients, and their families to Enjoy Life in Great Health. KPC Medical Centers collectively include 1200 beds, 1700 active physicians, and nearly 5,000 hospital personnel.



MemorialCare

MemorialCare, a nonprofit Southern California integrated delivery system and innovator in evidence-based medicine, has over 200 care locations in Orange and Los Angeles Counties; 14,000 employees, affiliated physicians and volunteers; top hospitals—Orange Coast Medical Center in Fountain Valley, Saddleback Medical Center in Laguna Hills; Long Beach Medical Center and Miller Children's & Women's Hospital Long Beach; award-winning physician groups MemorialCare Medical Group and Greater Newport Physicians; Seaside Health Plan; and Southern California's largest high-value ambulatory care network with convenient, cost-effective outpatient surgery, imaging, dialysis, urgent care, health and breast centers. Its many honors include Best U.S. Health Systems, Largest U.S. Children's Hospitals, Top 50 Hospitals, Top 50 Cardiovascular Hospitals, "A" Grades for Quality and Safety, national listings in U.S. News & World Report's Best U.S. Hospitals, and more. In 2018's Patient Assessment survey of 40,000 patients statewide, respondents rated MemorialCare Medical Group and Greater Newport Physicians #1 and #2 in Orange County. And MemorialCare's remarkable hospitals continually appear at the top of "Best Hospital" local media surveys. Visit www.memorialcare.org.



Monarch HealthCare

Monarch HealthCare, part of OptumCare, is an Independent Practice Association (IPA) caring for patients since 1994. Monarch is a leading health care delivery organization that is helping transform health care through best-in-class quality care and an improved experience through a "patient-first" philosophy of healthcare. With more than 2,500 private-practice physicians and 220,000 Orange County and Long Beach residents, Monarch has been recognized by health plans and business groups for providing high quality care and excellent service. We aspire to be the solution for affordable quality care for all patients in the communities we serve. For more information about Monarch, please visit www.monarchhealthcare.com.



Providence St. Joseph Health

PSJH Southern California is a not-for-profit Catholic health network with 13 hospitals, approximately 90 clinics, TrinityCare Hospice and its TrinityKids Care pediatric hospice, Providence High School, home health care services, eight wellness centers and numerous physician groups in its Southern California Region. Together these ministries, including secular affiliates and some representing other faiths, generate \$7.5 billion in net revenue and have approximately 35,000 employees – called caregivers – and nearly 5,200 physicians on staff. PSJH Southern California is part of Providence St. Joseph Health, a health system of 111,000 caregivers serving in 51 hospitals, 829 clinics and a comprehensive range of services across Alaska, California, Montana, New Mexico, Oregon, Texas and Washington. PSJH strives to increase access to health care and bring quality, compassionate care to those we serve, with a focus on those most in need.



UCI Health

UCI Health comprises the clinical enterprises of the University of California, Irvine. As Orange County's only academic health system and tertiary/quaternary care center, UCI Health plays a unique, unduplicated role in serving our community's health and wellness needs. Patients can access UCI Health at physician offices throughout Orange County and at its main campus, UCI Medical Center in Orange. *U.S. News & World Report* has listed the 417-bed acute care hospital among America's Best Hospitals for 18 consecutive years. UCI Medical Center features specialty ambulatory care clinics, Orange County's only National Cancer Institute-designated comprehensive cancer center, high-risk perinatal/neonatal program, combined Level I trauma center and Level II pediatric trauma center. It is the primary teaching hospital for the UCI School of Medicine. UCI Health serves a region of more than 3 million people in Orange County, western Riverside County and southeast Los Angeles County.



UnitedHealthcare

UnitedHealthcare is dedicated to helping people live healthier lives and making the health system work better for everyone by simplifying the health care experience, meeting consumer health and wellness needs, and sustaining trusted relationships with care providers. In the United States, UnitedHealthcare offers the full spectrum of health benefit programs for individuals, employers, and Medicare and Medicaid beneficiaries, and contracts directly with more than 1.2 million physicians and care professionals, and 6,500 hospitals and other care facilities nationwide. The company also provides health benefits and delivers care to people through owned and operated health care facilities in South America. UnitedHealthcare is one of the businesses of UnitedHealth Group (NYSE: UNH), a diversified health care company. For more information, visit UnitedHealthcare at www.uhc.com or follow @UHC on Twitter.



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*Orange Coast Magazine. Top Doctors. <http://www.orangecoast.com/business-category/topdoctors>.

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HEALTHCARE ROUNDTABLE



While we all hope major health problems will one day be eliminated through groundbreaking research and cures, there are simple measures that can be taken to mitigate risk in the meantime. Given the increased prevalence of life-style related health problems, preventative care and post-treatment follow-up have become just as important as treating the actual condition.

Kali P. Chaudhuri, MD
Chairman
KPC Group



The American health care system has traditionally been better at focusing on acute illness and isn't as adept at treating the chronic disease and disability that typically occurs among this population. We need to start doing better at care management outside the hospital to reduce cost, improve access, and assist people with limited mobility as much as possible so that they can lead long and satisfying lives.

Annette M. Walker
President
City of Hope Orange County

Last year, *The Economist* reported that for the first time in history, health care surpassed manufacturing and retail – economic engines of the 20th century -- to become the largest source of jobs in the U.S. What will it take to produce excellent leaders for America's largest workforce?

Mark E. Costa, Kaiser Permanente: Successful healthcare leaders must possess skills to drive their organizations into the future. And organizations like Kaiser Permanente are providing training programs to foster these. Employee Leadership: Self-awareness and savvy with interpersonal communication and relationship building. A great leader knows how to build teams of talented employees, act with fairness when dealing with direct reports, delegates decision making to develop employee skills and confidence, coach employees and fosters their professional development and career opportunities. Drawing on these crucial leadership skills, a great leader creates a strong workplace culture. Secondly, resourcefulness by solving problems within challenging operational, regulatory and budgetary constraints. They get input, allocate resources for maximum impact, and find innovative ways to inspire and empower their teams to deliver superior patient care. We additionally place a strong emphasis on composure. We know that good leaders navigate within a stressful environment without creating additional stress by reacting impulsively. They know how to manage their own emotions and work-life balance, and how to support and empower employees to take care of themselves. They quickly grasp and devise strategies to manage change from seemingly all sides, including technological advancements, new regulatory requirements, mergers and integrations, opioid addiction and other complex health issues. Leaders understand and adapt to changes themselves, while guiding the workforce, navigating the human side of change management.

Ronald P Jordan, Chapman University School of Pharmacy: Health Care leaders need to develop a patient safety orientation themselves and be champions of a patient safety culture within their organizations. There is still far too much preventable death and harm occurring within the US and Global health care economies. New leaders who plan to ensure zero preventable death and injury within their span of control will be excellent. We must overcome our tolerance for preventable death by enacting known solutions and systems that can eliminate these problems with care. At Chapman University School of Pharmacy, we are implementing research and education programs intended to have our students become valued healthcare patient safety leaders. We intend to lead the nation as a pharmacy school developing graduates with a patient safety commitment.

Medicine has made so many advances in the past few decades. Yet, we have yet to find cures for big health problems – cancer, heart disease, and diabetes.

What will it take to get us to a cure for these health concerns?

Annette M. Walker, City of Hope: City of Hope is a unique organization solely focused on cancer and diabetes. Our mission is "Transforming the future of health. We turn science into practical benefit. We turn hope into reality. We accomplish this through exquisite care, innovative research, and vital education focused on eliminating cancer and diabetes." Our 500 physicians and scientific researchers lead the quest to end these terrible diseases. They don't just treat cancer and diabetes, but their life's work is focused on curing and eliminating these diseases, every day, every hour, and every minute. And we are getting closer. Current examples of this work are the innovative immunotherapy trials for cancer treatments. In addition, City of Hope is on the cusp of defeating Type 1 Diabetes, which started with our research that led to the development of synthetic human insulin. Our continued commitment to this kind of research will lead us to cures and, as history has shown us many times, it's places like City of Hope where discoveries are made that change the course of humankind.

Kali P. Chaudhuri, KPC Group: While we all hope major health problems will one day be eliminated through groundbreaking research and cures, there are simple measures that can be taken to mitigate risk in the meantime. Given the increased prevalence of life-style related health problems, preventative care and post-treatment follow-up have become just as important as treating the actual condition. In recognition of this shift, we have initiated a system-wide health and wellness program with the goal of promoting a healthier lifestyle amongst our employees and their families. This program will be expanded to our patients and local communities in the near future.

According to The California Department of Finance, Demographic Research Unit, the number of seniors aged 85 and greater in Orange County is expected to increase by 487 percent from 2010 to 2060. What impact does this incredible upturn of super-seniors have on Orange County health care/ What have you done to improve care for seniors?

Annette M. Walker, City of Hope: While we applaud those who have achieved super-senior status, it is true this demographic trend represents new challenges. The American health care system has traditionally been better at focusing on acute illness and isn't as adept at treating the chronic disease and disability that typically occurs among this population. In addition, our systems are designed for the patient to come to the hospital or clinic. We need to start doing better at care management outside the hospital to reduce cost, improve access, and assist people with limited mobility as much as possible so that they can lead long and satisfying lives, even with chronic disease such as cancer. And we can't forget about mental health. One of the most distinguishing elements of the vision

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One of the most important emerging trends is uniting health care and coverage through providers, health plans, and pharmacies. Health care organizations across these industries are collaborating in more meaningful ways in the pursuit of the triple aim: better care, better health, and lower costs.

Meghan Newkirk
General Manager, Southern
California
UnitedHealthcare

expressed by our partner Five Point is focusing on wellness throughout a community, particularly for seniors. How we engage our seniors in all aspects of life will significantly impact their health.

Ray Chicoine, Monarch HealthCare: As people live longer, we need to explore ways to ensure they stay healthy for just as long. And that's a challenge because needs can rapidly change and access to care becomes increasingly vital. Seniors are savvier about the care they want and like, and we need to innovate in ways to deliver that care when, where, and how they want it. One example of what we're doing: We are working with our physicians at the OptumCare Health Care Center in Leisure World Seal Beach to become long-term partners with the Leisure World community to transform the center into a state-of-the-art model of health and wellness. This means moving beyond what's already a state-of-the-art clinic to work alongside Leisure World leaders to spread health and wellness across the community with new programs and activities, all designed to engage members in their health outside of traditional visits to the doctor, which will help residents of this vibrant community lead longer, healthier lives.

Robert T. Braithwaite, Hoag Memorial Hospital Presbyterian: High-quality health care is an important component of a successful community, and Hoag is fully engaged with the aging population to support the health and wellness of our senior community. We encourage the community to be proactive and empowered about their health, which is why we offer annual Flu Shot Clinics, Health Fairs and Community Education Classes on topics such as Medicare, as well as memory screenings through the Pickup Family Neurosciences Institute's Orange County Vital Brain Aging Program to help individuals maintain a healthy brain for life. With a dedication to keeping seniors healthy and active, the Huntington Beach Senior Center in Central Park in alliance with Hoag was built in part with a \$3.775 million gift from the Hoag Community Benefit Program. The Center offers Hoag Health & Wellness programming free of charge, including health screenings and presentations by Hoag and Hoag Medical Group physicians and experts.

Richard J. Gannotta, UCI Health: UCI Health is a leader in improving care for Orange County's seniors. Our recently launched a clinical trial into the use of stem cells to treat and reduce frailty among older adults and the ongoing 90+ Study into super-agers reflect UCI's unique role in advancing knowledge that improves care for a growing and often vulnerable and population. We provide comprehensive clinical care in a way not often seen in this population through the UCI Health Senior Health Center, one of the country's first certified Patient Centered Medical Homes for coordinated geriatric wellness. Our staff and faculty provide preventive care and higher levels of disease management for chronic conditions such as diabetes, heart failure and dementia with the goal to empower patients to manage their own health.

What are the current trends impacting health care? What major trends do you expect in the next 3-5 years? How will the landscape be different?

Meghan Newkirk, UnitedHealthcare: One of the most important emerging trends is uniting health care and coverage through providers, health plans, and pharmacies. Health care organizations across these industries are collaborating in more meaningful ways in the pursuit of the triple aim: better care, better health, and lower costs. Through the growing adoption of value-based care models that promote value over volume, we are developing a health care system that is more personalized, simplified and convenient. That's because value-based models focus on quality and using incentives to reward for better health and lower costs, driving important improvements in how health plans and care providers work together to support people's care. Technology is also reshaping how employers select and offer health benefits to employees, including widespread adoption of digital resources and wearables that are helping make well-being programs more engaging. To that end, UnitedHealthcare annually invests more than \$3 billion in data, technology and innovation.

Annette M. Walker, City of Hope: So much is changing in health care, but if I had to pick one trend that excites us now is the widespread acceptance of wellness, prevention, and early detection. While it is true that City of Hope provides groundbreaking treatments for those with cancer and other serious illness, we are also partnering with our communities to help prevent these problems in the first place or at least diagnose them at early stages when they are most treatable. We also want to ensure that those who have had cancer stay healthy. That's why City of Hope Orange County will do more than treat disease—it's really about preserving health.

Ray Chicoine, Monarch HealthCare: Two topics come to mind: worker wellness and physician burnout. For the first topic, we spend a significant amount of time at work; employers have an opportunity to offer support and programs to engage their staff in ways that help them manage their stress, anxiety, and other health needs. Employers want to know they have an engaged, focused staff. We are exploring how we enhance our offerings to create easier access to care. We recognize it's a key factor in keeping people healthy and can make a difference when it comes to preventing the progression of many disease conditions. As for the second, we're working with our affiliated physicians with OptumCare Medical Group to understand physician burnout and ways to minimize it through innovative team-based approaches to patient care.

Richard J. Gannotta, UCI Health: We expect the increase in focus on improving patient safety to continue. It's estimated that more than 250,000 people die in U.S. hospitals each year from preventable harm, making it the nation's third-leading cause of

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HEALTHCARE ROUNDTABLE



Fragmentation of our Health Delivery Systems is one major factor leading to poorer health outcomes and higher costs when comparing the United States to other developed countries. Alignment between health plans and health providers has moved beyond a focus solely on treating those who are sick and is now placing greater focus on wellness and prevention.

Mark E. Costa
Senior Vice President
Kaiser Permanente

death. California Department of Public Health data for healthcare-associated infections shows there is still much work to be done to protect patients. Healthcare providers can and must do better. UCI Health is leveraging its unduplicated academic and clinical expertise to meet this challenge. We've developed tools to improve early identification of potentially deadly central line bloodstream infections and UCI Health recently became the first academic medical center and the second hospital in the world to implement the 29 evidence-based Actionable Patient Safety Solutions developed by the Irvine-based Patient Safety Movement Foundation. UCI Health's efforts have achieved remarkable results, including reducing the number of healthcare-associated infections among our patients, improving early detection and treatment of sepsis and reducing patient exposure to drug-resistant organisms, such as MRSA and VRE.

Ronald P Jordan, Chapman University School of Pharmacy: Precision medicine based on genomic knowledge is developing very rapidly. Advances in Pharmacogenomics are permitting us to improve clinical outcomes by reducing medication-related adverse effects and likely therapy failures. Our genomic knowledge of an individual patient helps us determine optimal therapies and therapy administration schedules that can avoid unintentional overdose or under administration when multiple drugs are used that depend on the same genetic pathway for actions or elimination from the body. Researchers at Chapman University School of Pharmacy have learned that ninety percent of drug therapies approved between 1930 and 2017 are affected by pharmacogenomics. Over the next few years, more and more drug therapy will rely on full genetic profiles that patients will be able to obtain in order to avoid harm.

Health insurers and delivery systems are often seen as adversaries. Can the relationship be redefined? Is it possible for them to work together?

Gene Rapisardi, Cigna: Yes, absolutely, the relationship can and *must* be redefined if we expect to create a better health care delivery system that produces better outcomes for all stakeholders, including employers, individuals, providers and payers. That's been Cigna's mission for years in Southern California, starting right here in Orange County, where we launched an alliance with St. Joseph Hoag Health in 2015. Our relationship is based on deep collaboration and integration. Each party – the provider and the payer – brings its unique abilities and assets to the table to best meet the needs of employers and individuals. We extended this model to San Diego with Scripps Health and to Los Angeles with HealthCare Partners. The result has been robust solutions that enable employers to offer benefit plans that provide affordable in-network access throughout the region, with greater flexibility for employees to obtain quality care that's convenient to their homes or offices.

Ray Chicoine, Monarch HealthCare: All stakeholders in the current healthcare

system recognize that reducing the cost of healthcare is a top priority for our country. Achieving meaningful change here will involve all stakeholders working together. One way to do this is by creating and supporting physician-led systems of care that are focused on prevention and providing great access to high-quality care. By aligning all partners to this system as a common goal, from insurance carriers to physicians and hospitals, we can deliver high-performing services and integrated networks to the patient.

Mark E. Costa, Kaiser Permanente: Fragmentation of our Health Delivery Systems is one major factor leading to poorer health outcomes and higher costs when comparing the United States to other developed countries. The lack of alignment of financial and quality performance goals between Health Plans and Health Providers is one contributing factor to our fragmentation. Improved alignment of goals and reduced fragmentation is being addressed through new relationships between Health Plans, physicians and hospitals. Accountable Care Organizations (ACOs) and Integrated Health Systems, such as Kaiser Permanente, are focused on making the health of those served the top priority. Good health and coordinated health care also leads to lower costs. Alignment between health plans and health providers has moved beyond a focus solely on treating those who are sick and is now placing greater focus on wellness and prevention. Finally, by working together, such aligned entities can use available data to better understand the personalized needs of those served. This move to personalized care and support will again improve both the quality and cost of services provided.

With Millennials changing jobs so often, why should employers invest in employee health and wellness?

Annette M. Walker, City of Hope: One of the major reasons Millennials job-hop is because they do not feel that their company is investing in their personal and professional growth and well-being. That's why it's essential for today's employers to work with experienced health care providers and develop effective wellness programs that resonate with their intended participants. Millennials are all about authenticity, so getting health care experts behind your wellness program is important. I think Millennials also have a little more insight than my generation did as to how their current lifestyle choices will have an impact on their long-term health. For example, there is a correlation between obesity in adolescence and young adulthood with earlier onset of cancer. Wellness programs are instrumental in preserving long term health benefits. The key is access to these types of initiatives is ensuring easy access, an element of fun, and of course, an on-demand digital component. And, as Millennials start to have families, don't forget wellness and education programs for their spouses and children. These tactics will not just retain, but also attract people to the workplace.

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Choose Better. Choose Kaiser Permanente.

HEALTHCARE ROUNDTABLE



Today's consumerization of health care has made the patient experience even more important because, at the end of the day, health care is about human-to-human contact and relieving pain and suffering.

Jennifer Mitzner
CEO
Hoag Orthopedic Institute

Are wellness programs worthwhile investments for employers?

Gene Rapisardi, Cigna: Yes, they're absolutely worthwhile if employers really do view them as investments and not simply as an expense. An expense is just money out the door, while an investment is spending that is expected to provide a payback over time. In the case of wellness programs, the payback is lower absenteeism, better productivity, and improved health care costs. Cigna's experience is that when our employer clients take the time to assess and understand the health profile of their workforce, then tailor their wellness programs to meet their employees' specific needs, implement meaningful incentives to encourage participation, and then promote the program, there is greater employee engagement and better payback. The results depend entirely on how well the program is designed, implemented and communicated, but we see time and again that wellness programs provide great value for employers and employees alike.

What does the future look like for the viability of small or independent hospital systems?

Kali P. Chaudhuri, KPC Group: In America's increasingly competitive healthcare marketplace, the viability of small or independent hospital systems depends on their ability to grow and integrate. An integrated model leveraging system resources for hospitals, physicians, and ancillary services is the key to sustainability. Hospital systems are finding themselves in one of two places: acquiring or being acquired. A fully integrated system means a reduction in waste, inefficiencies, and fragmented IT infrastructure.

How are hospitals adjusting to recently passed SB 1152 requirements regarding conditions for the release of homeless patients?

Erik G. Wexler, Providence St. Joseph Health: As a mission-driven organization living its values and its vision of "health for a better world," Providence St. Joseph Health and its 13 Southern California hospitals have long been focused on caring for our most vulnerable community members. At St. Jude Medical Center, for example, our community care navigators help connect homeless patients to services. We had a head start in meeting the requirements of SB 1152. Across the county, we always have provided our homeless patients the items required by this legislation. What we have done since the law took affect is formalize the process. Work on meeting the requirements of SB1152 began with extensive education to all physicians and employees on new changes including: A protocol regarding care for the homeless, built into the electronic health record, A new tracking system in the records to help promote continuity of care and Provision of medication, clothing, transportation and other necessities

Kali P. Chaudhuri, KPC Group: Hospitals are being put in a tough position to address a problem they did not create. SB 1152 was no

doubt well intentioned by its authors, but it puts a strain on limited hospital resources. In order to comply with the new law, we have focused on working with community partners to ensure homeless patients get the holistic care they need for a more stable and meaningful recovery upon discharge. Connecting our most vulnerable patients with a support network is critical to their long-term success.

What role does patient experience play as it pertains to the delivery of healthcare services?

Meghan Newkirk, UnitedHealthcare: Providing a personalized, convenient, and simplified care experience is an essential focus in the delivery of health care services. UnitedHealthcare recently launched the SignatureValue Harmony Network, which unites care and coverage with a focus on the patient-physician relationship. With convenient access to a broad selection of physicians located across four counties in Southern California, patients can create a personalized relationship with their care provider – receiving quality care and coverage that is right for them, at the time they need it. Harmony delivers a coordinated care experience focused on the patient first with real-time access to care through a dedicated call center and convenient online tools, including an easy-to-use mobile app, virtual visits, a dedicated Nurse Line, and 24/7 access to myuhc.com. By bringing providers and hospitals together to improve access, quality and affordability, UnitedHealthcare is proud to provide integrated, cost-effective, and patient-focused health care in Southern California.

Jennifer Mitzner, Hoag Orthopedic Institute: Since our founding, HOI recognized that patients have a choice in their health care, and we built a model to compete on choice – earning our business one patient at a time with the highest quality and exceptional outcomes at a competitive price. Because orthopedics is all we do, every member of the care team is focused uniquely and solely on the patient's condition. Our specialized care protocols and culture of unparalleled customer service is delivered consistently with our promise that "We get you back to you." Today's consumerization of health care has made the patient experience even more important because, at the end of the day, health care is about human-to-human contact and relieving pain and suffering. HOI has been paying attention to the patient experience from day one and has been to date, the only 5-Star CMS rated hospital in Orange County for patient experience.

Annette M. Walker, City of Hope: For City of Hope, patient experience is at the heart of our care. We deliver the most sophisticated scientific therapies, but we are equally advanced in the way we provide compassionate service. Because we have decades of experience working with patients and family dealing with cancer and other serious illness, we understand that people can feel extremely stressed when they need care. That's why we have programs such as

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HEALTHCARE ROUNDTABLE



Behavioral health is traditionally managed separately from physical health. When a behavioral health diagnosis goes unmanaged, patients face greater risks for developing chronic medical conditions. This can lead to additional medical challenges and three to five times higher healthcare costs.

Barry Arbuckle, Ph.D.
President and Chief Executive Officer
 MemorialCare

our care navigators who are literally patients' guides, connecting them to all the resources they need, coordinating their appointments, helping them understand their options and treatments, providing emotional support, and sorting out financial issues or travel. We also understand that education is empowering, which is why we stress programs that teach patients and families how to manage their health and recovery. I think the words of one of our founder, Samuel H. Golter, ring true for every health care organization when he said, "There is no profit in curing the body if, in the process, we destroy the soul."

Kali P. Chaudhuri, KPC Group: Most patients have no desire to be in a hospital in the first place and are often frustrated by a lack of readily available information. This is problematic because patient experiences can be directly tied to patient outcomes, such as their willingness to make a follow-up appointment or listen to a doctor's orders. To help address this issue, we have put policies and systems in place that are aimed to reduce typical frustrations and improve overall patient experience. For example, we have implemented an online check-in option for the Emergency Department. In addition, we started a patient satisfaction champion program that puts frontline healthcare providers in the driver seat when it comes to ensuring maximum patient satisfaction.

Robert T. Braithwaite, Hoag Memorial Hospital Presbyterian: At Hoag, we are focused on a culture of "Own It," meaning everyone owns the experience our patients have regardless of their role. It is a phrase that was developed by our staff, clinicians and board several years ago to capture our patient experience mindset. When you "own" something, you are invested in the outcome, which is critical when we understand how our patients' experiences affect the quality of their care, safety and well-being. We are all working together for the sake of our patients and families. We are partners with our patient—the place they go for health and wellness needs, not just when they are sick. We value the loyalty of our patients and strive to deliver on our mission to provide the highest quality health care services to the communities we serve.

Mental health continues to be an issue for many people. What are health care organizations doing to proactively address this need and provide the required resources?

Barry Arbuckle, MemorialCare: Behavioral health is traditionally managed separately from physical health. When a behavioral health diagnosis goes unmanaged, patients face greater risks for developing chronic medical conditions. This can lead to additional medical challenges and three to five times higher healthcare costs. We believe there's a better way. MemorialCare piloted a Behavioral Health Integration model within our Orange County primary care centers where primary care physicians, licensed clinical social workers and psychiatrist consultants together address behavioral health issues, referrals, communications and scheduling of services. Patients identified with behavioral health issues are referred to

additional resources tailored to their specific needs that better engage individuals and families on their journey to wellness. Patient appreciation for our interest in their complete health and well-being resulted in expanding this model throughout MemorialCare. For MemorialCare, it's part of caring for the whole patient and doing all we can to help them live their best, healthiest lives.

Erik G. Wexler, Providence St. Joseph Health: Providence St. Joseph Health is wholly committed to advancing care for those with mental illness. In 2016, we created the nonprofit Well Being Trust, seeding it with \$130 million. WBT's goals include reducing the stigma that prevents people from seeking help, partnering with other organizations to advance care and funding innovative care models through grants. In addition, our Orange County operations provided approximately \$45 million last year in funding and services for local programs. We provide behavioral health services in local schools, counseling for patients in clinics serving low-income areas and outreach to seniors and to family members who are caregivers. Recently, we partnered with other health care organizations in Orange County's innovative Be Well OC program. This novel approach to mental health – a model for other communities – will offer long- and short-term treatment for mental illness as well as addiction recovery and psychiatric stabilization for patients in crisis.

Gene Rapisardi, Cigna: Cigna's longtime position is that mental health is just as important as physical health, and we are very strong proponents of the mind/body connection. In fact, we have launched a national campaign that addresses the importance of talking to your doctor about how you're feeling emotionally as well as physically. There's nothing wrong with admitting that you're depressed or anxious, but the stigma associated with mental health is often a barrier to people seeking effective treatment. That's why Cigna works with Shatterproof and other organizations to help stamp out the stigma. One of the most important things Cigna can do is encourage our employer clients to offer integrated medical, pharmacy, and behavioral health benefits. Our studies show that when these benefits are integrated, individuals get more preventive care screenings and are better engaged in managing their health. It's all about seeing the entire person and emphasizing whole person health.

Kali P. Chaudhuri, KPC Group: As currently constituted, Orange County lacks enough designated facilities to treat behavioral and mental health issues. When the designated facilities are at capacity, any additional cases are sent to Emergency Departments. This creates a strain on hospital resources and is not the ideal environment for treatment. However, there is good news on the horizon – local elected officials recognize the need to address this issue and have committed to doing so. We are currently working with County leadership to prioritize the development of a Crisis Stabilization Unit (CSU) where those

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HEALTHCARE ROUNDTABLE



Consumer-based health care is no longer the future. It is here. Health care systems that are not changing the way they deliver care won't keep up with the new market

Erik G. Wexler
Chief Executive
Providence St. Joseph Health,
Southern California

experiencing a mental health crisis can get the care they need in the appropriate environment.

Mark E. Costa, Kaiser Permanente:

Mental Health is a growing crisis affecting all parts of our Orange County populations. Increases in mental health issues for our elderly and youth are of concern. Efforts of health providers and others are already underway. Promoting the importance of Mental Wellness and reducing the stigma of Mental Illness is of the utmost importance as we seek to improve the mental health of our county. Early and effective screening for mental health indicators, just as we screen for indicators of physical health is essential to prevent a crisis associated with mental illness. Health Care Systems must help in connecting individuals with mental health vulnerabilities to available resources within our communities in a timely manner. In Orange County, we are fortunate in that a major Public-Private effort, BE WELL ORANGE COUNTY" is underway. The County of Orange, Cal- Optima, Faith-Based Organizations, Education, as well as Health Systems, including Kaiser Permanente are all working to develop an effective "System of Care" focused on the Mental Health of all.

Robert T. Braithwaite, Hoag Memorial

Hospital Presbyterian: Hoag offers access to highly-trained mental health professionals to people in various stages of their lives emotionally, mentally and financially. For example, Hoag launched ASPIRE (After School Program: Intervention and Resiliency Education) in both Newport Beach and Irvine to help families tackle the life-changing challenges of teen anxiety, depression and other mental health conditions by developing and practicing healthy behaviors and coping strategies. Hoag's Maternal Mental Health Program is dedicated to women experiencing mental health conditions before, during and after pregnancy through in-person visits as well as a support line. The Mary & Dick Allen Diabetes Center at Hoag provides mental health support by a licensed clinical social worker with extensive experience in providing assistance to adults with type 1 or type 2 diabetes. Additionally, Hoag's Mental Health Center provides psychotherapy for those who are low income and uninsured or underinsured through Hoag's Department of Community Health.

Richard J. Gannotta, UCI Health: Like other health systems in Orange County and across California, UCI Health is confronting the increasing need to provide mental health services, particularly in the emergency setting. The challenge is to continue providing a high level of emergency and trauma care while managing the unique needs of those with mental or behavioral health challenges. This spring, UCI Medical Center is opening an additional eight beds for patients who need general emergency care and a separate area in which to provide crisis intervention. This area will feature 12 emergency bays and provide short-term psychological care for emergency department patients who require mental health evaluation. Those who live with mental and behavioral health conditions and

their caregivers deserve to be supported with the best services we can offer.

People are accessing health care in a variety of ways – digital, inpatient, outpatient – how do health organizations ensure that a consistent and high-quality patient experience is delivered?

Erik G. Wexler, Providence St. Joseph

Health: Consumer-based health care is no longer the future. It is here. Health care systems that are not changing the way they deliver care won't keep up with the new market. We saw this shift coming and have created care options that provide appropriate levels of care in the most convenient spaces. We're taking a "customer lifetime journey" view to the business, which also is why our focus is increasingly beyond the hospital. We realize health systems can optimize for those they serve and manage the costs incurred by being best in class at access and quality across various sites of care. Simultaneously, we support patients' navigation of their health. The key is the Providence St. Joseph Health brand of quality, safety and compassion stands behind our care, no matter if it's provided in the home, by an app, at a mini-clinic, an outpatient center or in one of our hospitals.

Robert T. Braithwaite, Hoag Memorial

Hospital Presbyterian: A hospital is no longer defined by a physical building, but rather as a system of care that can provide quality services in various environments. At Hoag, we continue to find new ways to bring high-quality care directly to the communities we serve. This includes the ongoing growth of our health centers and urgent care facilities, and particularly how our nationally recognized specialized services in areas like cancer, neurosciences, heart and vascular, and women's health are providing expert care in outpatient settings where our community can easily access it. We continually seek feedback from our community on what we are doing well and where we have opportunities to improve. We are working to improve lives through not only hearing but truly listening to what our patients and families tell us matters most to them in a health care partner.

The opioid crisis continues to make headlines as health systems, pharmacy chains, Congress and others in the healthcare industry seek solutions. How has your health system's approach to addressing this crisis changed? What opportunities exist for the future?

Meghan Newkirk, UnitedHealthcare: Each day, opioids cause more than 130 overdose deaths in the United States. To address this health issue, a comprehensive approach is required, including confronting the often-overlooked connection to dental care. UnitedHealthcare has introduced various oral health strategies to help reduce the misuse of these drugs, including: All first-time opioid prescriptions written by dental health professionals for people age 19 and under are now capped at three days and fewer than 50 morphine milligram equivalents per day, limiting access to

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HEALTHCARE ROUNDTABLE



Through the SafeRx OC coalition of healthcare providers, pharmacists, physician groups and county health and law enforcement officials, we're educating providers who prescribe opioid medications to ensure sure they have the right information to prescribe the right pain medication.

Richard J. Gannotta
CEO
UCI Health System



Patients want access to health care in a variety of ways. We place an emphasis on innovation to better meet the needs of our patients, connecting them with their physicians as quickly and conveniently as possible.

Robert T. Braithwaite
President and CEO
Hoag Memorial Hospital Presbyterian

unnecessarily large prescriptions. All UnitedHealthcare dental plan participants with dependents ages 16 to 22 will receive information about the risks associated with opioids, specifically in connection to wisdom teeth removal. All dental health professionals in UnitedHealthcare's network – including a dedicated effort for those identified as among the top 10% of highest opioid prescribers – received information about this issue. Following the outreach and informational campaign, prescribing patterns improved by 17%.

Gene Rapisardi, Cigna: The opioid crisis has been heartbreaking and it has shattered families throughout California and across the nation. In 2016, Cigna established an ambitious goal to reduce prescribed opioid use among our commercial customers by 25% within three years. Through outreach to prescribing clinicians to gain their commitment to follow CDC prescribing guidelines, sharing best practices among physician groups, education, and using predictive analytics to identify at-risk individuals, we were able to achieve this goal in just two years. While we have not dropped these approaches, we have also established another ambitious goal: reduce opioid overdose by 25% by the end of 2021 in certain communities with higher-than-average overdose rates. What's most important is that we acknowledge opioid misuse as a chronic condition, and recognize that people who suffer from this disease need treatment without stigma or judgment. Cigna continues to increase access to evidence-based treatments, such as medication-assisted treatment.

Mark E. Costa, Kaiser Permanente: The opioid crisis, is truly a crisis and not a hyperbole. Kaiser Permanente has responded to this crisis with a multi-pronged approach. Through education for physicians, we have ensured that they are up to date with the literature around the dangers of opioids, risk of addiction/dependence and overdose. Physicians are provided lists of their patients who are on unsafe opioid levels or unsafe medication combinations. Furthermore, we put an emphasis on education of patients through classes and literature that are given to patients about the risk of opioids. Opioid addiction is a disease and not a moral failure. Kaiser Permanente has opportunities to work with communities to educate and prevent opioid addiction and promote safe handling of medication so they don't get into our communities.

Richard J. Gannotta, UCI Health: UCI Health has the expertise and obligation, as the region's only academic medical center and a vital component of the community's trust, to lead a collaboration of community partners in developing solutions to the opioid crisis. Through the SafeRx OC coalition of healthcare providers, pharmacists, physician groups and county health and law enforcement officials, we're educating providers who prescribe opioid medications to ensure sure they have the right information to prescribe the right pain medication. The coalition's Emergency Department Safer Prescribing Guidelines have been adopted in hospitals across the

county and our experts continue to educate prescribers about alternatives and safe prescribing practices. This year, UCI Health became one of only 31 health systems statewide and the only one in Orange county selected to participate in the California Bridge Program, an accelerated training program for healthcare providers to enhance access to around-the-clock treatment for substance use disorder.

How is your system leveraging technology, old and new, to improve the patient experience and patient outcomes across ambulatory and in-patient settings?

Barry Arbuckle, MemorialCare: Measuring healthcare quality using metrics that matter is producing remarkable results. Decades ago, MemorialCare began rigorously documenting quality through extensive outcomes assessments that identify best diagnostic, treatment and preventive methods for our hospitals, outpatient centers and physicians. Additionally, our data-warehousing and analytics platform absorbs data from numerous sources so clinicians can quickly and simply sort, refine, call out and drill down on individual patients. For example, we can quickly identify and schedule patients overdue on mammograms, colonoscopies and other life-saving screenings, and those behind on follow-up to better control diabetes, high blood pressure and other chronic diseases that prevent strokes, heart attacks and other conditions. Access to billions of data points delivers instantaneous response time for physicians to determine best courses of treatment. By moving from managing a population to an individual patient in a few clicks, we're witnessing extraordinary improvements in care, patient experiences and communications—saving lives, reducing hospitalizations and duplication and improving community health.

Ray Chicoine, Monarch HealthCare: We are currently evaluating a pilot with RubiconMD, a new web-based platform. The platform allows the primary care physician (PCP) to submit consult requests to leading specialists and academic institutions. Within 24 hours the PCP receives a response. We also have a proprietary system PracticeConnect, which is a web-based office suite for physicians to refer to specialists and other services. The newer technology, RubiconMD, improves care by combining access to world-class expertise plus prompt referrals through Practice Connect. The speed of these systems improves the patient experience by allowing the physician to respond quickly and offer prompt electronic referrals to quality care.

Robert T. Braithwaite, Hoag Memorial Hospital Presbyterian: Patients want access to health care in a variety of ways. We place an emphasis on innovation to better meet the needs of our patients, connecting them with their physicians as quickly and conveniently as possible. This includes opening new facilities such as Hoag Urgent Cares, which offer online

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HEALTHCARE ROUNDTABLE



Value-based delivery is the foundation of the quadruple aim: improve the health of patients, improve the patient experience, reduce the cost of care, and empower physicians.

Ray Chicoine
President
Monarch HealthCare

check-in and current wait times, as well as digital services including telehealth. The convergence of these ideas provides Hoag the opportunity to deliver care efficiently. Hoag is known for a focus on technology, having been nationally recognized for a commitment to pioneering innovative medical and surgical advancements and investing in highly skilled clinical teams and facilities to expand the comprehensive services we offer and improve outcomes. Examples of technology that Hoag pioneered in Orange County include da Vinci surgical robots, Breast Tomosynthesis (3D Mammography), Surgical Theater virtual reality technology used in neurosurgery and the ExcelsiusGPS Robotic Navigation platform for spine surgery.

Richard J. Gannotta, UCI Health: UCI Health is proud to leverage its connection to a world-class research institution and leading school of medicine to create solutions that advance the state of care. Physicians in the H.H. Chao Comprehensive Digestive Disease Center are improving colonoscopy outcomes using artificial intelligence developed to help detect precancerous polyps. More than 100 patients have received AI colonoscopies and our gastroenterologists continue to perfect the system – soon, all UCI Health GI patients will benefit from this technology. The Center for Artificial Intelligence in Diagnostic Medicine, the creation of two UCI Health radiologists, designs AI systems that can help identify and outwit diseases. The center's first effort – already being tested at UCI Medical Center – can analyze a CT scan for cerebral hemorrhages in about 20 seconds, a task that often takes more than an hour in busy ER settings. For stroke patients and radiologists, that's a big breakthrough and a meaningful improvement in speeding a patient to treatment.

The cost of health care delivery continues to be top of mind among both the consumers of health care as well as many employers who pay for health care coverage. How has your organization implemented value-based delivery to reduce the cost of care while also improving quality?

Meghan Newkirk, UnitedHealthcare: Managing costs and care can be achieved through value-based care, which pays for actual health outcomes rather than the number of procedures. An example is "bundled payments" that reimburse providers under a single, set payment that is dispersed among everyone involved in that patient's care. UnitedHealthcare's Spine and Joint Solution payment program has helped reduce hospital readmissions for eligible patients by 22% and led to 17% fewer complications for joint replacement surgeries. The program saved on average \$18,000 per operation and \$3,000 in out-of-pocket costs per procedure. Accountable care organization (ACO) relationships promote a holistic and connected view of a patient's needs through data-sharing and identifying needed services. ACOs move reimbursements away from the fee-for-service model to the value-based approach,

where doctors receive incentives based on patient satisfaction and achieving clinical measures. Placing patients at the center of the health care experience can improve both the quality and cost of care.

Jennifer Mitzner, Hoag Orthopedic Institute: Hoag Orthopedic Institute (HOI) was created in 2010 for a value-based marketplace. Our clinical and business model align all our providers of care around quality, experience and cost. HOI has led the U.S. with a truly value-based care business model as well as innovating commercial bundled payments. As a result, HOI has been recognized as California's highest volume provider of total hip and knee replacements for the past six years as well as having some of the lowest readmission, complication and infection rates in the nation. As a vanguard in value-based care, HOI played a leadership role in spearheading commercial bundled payments. Since then, we have cared for over 1,000 commercial bundle patients and nearly 3,000 under Medicare's bundled payment program.

Barry Arbuckle, MemorialCare: A significant portion of healthcare spending goes toward routine imaging and surgery. As Southern California's largest high-value ambulatory care network, our convenient, high-quality free-standing facilities are not licensed as part of our hospitals, therefore, are less expensive to operate. Procedures are priced more competitively, approximately one-third of typical hospital prices, lowering costs for patients with high deductibles and insurers for procedures that can be performed safely in outpatient facilities. Our vast networks allow us to participate in value-based health plans, including Aetna Whole Health PPO and HMO accountable care organizations, Vivity partnership with Anthem and other health systems and our innovative direct employer arrangement with Boeing. About 316,000 patients participate in our value-based products with plans to reach 500,000 by 2021. We're reducing total costs of care, surpassing quality and patient satisfaction metrics and lowering pharmacy expenses. MemorialCare continues to develop our high-value ambulatory care network through planned growth, mergers, acquisitions and affiliations.

Ray Chicoine, Monarch HealthCare: Value-based delivery is the foundation of the quadruple aim: improve the health of patients, improve the patient experience, reduce the cost of care, and empower physicians. One way we integrate this aim into our daily work is with an internally-developed set of high-end predictive modeling tools. We want to proactively identify people who could benefit from additional support, and these tools help make that possible. We can then understand the individual's needs and, with the help of their physicians and our clinical teams, develop ways to meet those needs. As a team, we all come together to deliver high-quality care with lower costs and better outcomes, and it all centers on the individual patient.

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HEALTHCARE ROUNDTABLE



Drug therapy shortages are a new form of medication error that is causing harm. As we look for the root cause of these shortages, is clear that shortages result from prior government actions which have imbalanced the competitive market.

Ronald P Jordan
Dean
Chapman University School of
Pharmacy

External market issues such as the political upheaval in Washington, D.C. have disrupted the industry in many ways for the last two years. How have you met the challenges of policy changes?

Ronald P Jordan, Chapman University School of Pharmacy: Our work on patient safety research at Chapman University School of Pharmacy has helped us realize that drug therapy shortages are a new form of medication error that is causing harm. As we look for the root cause of these shortages, is clear to me and a pharmacoeconomics professor engaged in this area for years, that shortages result from prior government actions which have imbalanced the competitive market. The current administrations focus on drug prices and the middlemen Prescription Benefit Managers (PBM's) and Group Purchasing Organization profiteering through kickbacks and rebates may help right the market. An antitrust safe haven that is not good for patients that these organizations enjoy should be eliminated. We are hopeful the government will get there in its quest for lower drug costs.

The proliferation of value-based health care is changing the way physicians and hospitals provide care in Orange County. How are you ensuring the continuation of value-based health care as you expand operations and include outside partners in your enterprise?

Jennifer Mitzner, Hoag Orthopedic Institute: As a specialty hospital, Hoag Orthopedic Institute knows who we are and who we are not. Our culture was driven by entrepreneurial private-practice physicians who wanted to deliver value-based care of the highest quality to patients. That vision and conviction have built a business model that has been hardwired to drive greater understanding of our patients' needs and to scale their experience without compromising on quality and experience. In the last several years, as we have grown our business model and footprint in Orange County, we have incorporated our value-based model with new partners and affiliates. We are currently engaged with our newest allied partner, ProSport Physical Therapy and Performance, to reinvent the model of orthopedic care, rehabilitation and sports performance, a model that will aim to improve the overall patient experience, outcomes and save time and money for patients.

Barry Arbuckle, MemorialCare: Many health systems talk about value. Few deliver it. To truly deliver value health systems must provide lower cost, easily accessible locations. MemorialCare—the region's largest high-value ambulatory network of urgent care, surgery, dialysis and imaging centers—last year tripled our network of convenient, lower-cost imaging centers near where people live and work. MemorialCare's network attracts health system partners for our value-based health plan offerings, including Cedars-Sinai, UC Irvine Health, UCLA Health and other leading health systems, health plans and employers. Our academic partnerships increase the availability of highly trained physicians,

nurses and other clinicians. An affiliation between Miller Children's & Women's Hospital and UCLA Mattel Children's Hospital enhances access to highly trained specialists and children's healthcare services. Patient satisfaction remains strong. In 2018's Patient Assessment survey of 40,000 patients statewide, respondents rated MemorialCare Medical Group and Greater Newport Physicians #1 and #2 in Orange County. And MemorialCare's remarkable hospitals continually appear at the top of "Best Hospital" local media surveys.

Employers are becoming a more important stakeholder in the health care delivery system. How does your organization engage with corporate entities and what results do those have on patient care, costs and access?

Meghan Newkirk, UnitedHealthcare: Employers can help curb health care costs by using technology to reshape how benefits are offered to employees. Enabling access to information simplifies the process, creating an affordable and interactive experience. By utilizing online resources, such as UnitedHealthcare's Health Plan Manager, employers can analyze data to create employee-engagement programs, comparison shop for health care based on quality and cost, and simplify health care terms. These online resources encourage engagement, contributing to improved health outcomes and mitigated expenses. Encouraging employees to lead healthier lifestyles through well-being programs (including wearables) is yielding potential cost-savings – including financial incentives for achieving fitness goals and renewal discounts for employers based on aggregate team results. Finally, employers can maximize the effectiveness of their health care dollars by selecting specialty benefits, such as vision, dental and disability coverage as part of an employee's menu of benefits - creating peace of mind and building a culture of health.

Jennifer Mitzner, Hoag Orthopedic Institute: Orange County has always been a great vacation destination; however, it is fast becoming a great destination for travel medicine as well, particularly for commercial bundled payment patients. Hoag Orthopedic Institute was the first in Orange County to pioneer the development of commercial bundle payment models for local and national employers. Bundled payments are simply a fixed cost for an episode of care such as knee or hip replacement, with a warranty pledge. Joint replacements continue to be a major cost for many employers as they are one of the most common surgeries performed in the U.S. Patients who participate with employer-based direct contracting programs, including many in Orange County, come to HOI from all over the U.S. Our bundled payment patients and their employers report a high degree of satisfaction with this program and while this business is great for HOI, it also serves as a positive economic driver for all of Orange County.

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HEALTHCARE ROUNDTABLE



There are dozens of decisions that employers need to make that affect their health benefits budget as well as the health, well-being and productivity of their employees.

Gene Rapisardi
Market President, Southern
California and Nevada
Cigna

Barry Arbuckle, MemorialCare: Employers are seeking better value in the care their employees receive and health benefits they offer. MemorialCare addresses this by offering more value-based options for employers than any other health system in our communities. These include direct-to-employer customized contracts in which we accept responsibility for healthcare cost trend and quality expectations. MemorialCare is The Boeing Company's preferred partner for California's first-of-its-kind customized health plan option for many Southern California Boeing employees. In its first year, this innovative partnership reduced total cost-of-care by 4 percent, in part by reducing pharmacy spending by 21.5 percent and dramatically reducing inpatient hospital admissions and emergency department visits. And a 20 percent enrollment growth indicates high employee satisfaction. During the second of the five-year contract, Boeing and MemorialCare agreed to extend our partnership an additional two years. We also offer solutions to counter unhealthy lifestyles by engaging many local employers, schools and community organizations in healthy living partnerships.

Erik G. Wexler, Providence St. Joseph Health: Employers know that to attract the best and brightest they must invest in quality, affordable health care coverage that stresses wellness but also provides access to all levels of expert care in one electronic health care record. Through our employer relations program, we partner with employers to develop comprehensive employee wellness strategies that focus on effective illness prevention and lifestyle changes. We provide on-site programs for high-risk individuals that reduce hospital readmissions and emergency visits, and we make care accessible via health coaching and telemonitoring. We also bring the medical office to the employer with Wellness Corners that are close to local businesses, and onsite wellness centers that focus on healthy lifestyle choices. Rising costs have prompted employers to explore options to better control the health care options they provide. They are finding that direct contracts between health care providers and employers helps control costs for quality health care services.

Gene Rapisardi, Cigna: Consulting with employers is an important part of the work we do every day. For example, we advise employer clients on how to create a culture of health within their organization and how to implement a successful wellness program. We also help them determine what type of funding arrangement to choose and evaluate different health benefits plans that will best meet their needs and the needs of their employees, such as HMO, open access, high-deductible plans, etc. Do they want to offer a very broad network at a higher cost or do they prefer a high-performing network that's smaller but offers access to quality care at a better price? There are dozens of decisions that employers need to make that affect their health benefits budget as well as the health, well-being and productivity of their employees. It's our job to help them make choices that are right for them.

Value-based care is an important issue for many providers, including in Orange County. How has your organization adopted value-based care initiatives? What are the benefits of the emerging value-based initiatives and how will it affect healthcare providers, employers and patients in Orange County?

Erik G. Wexler, Providence St. Joseph Health: Value-based health care standardizes care by creating protocols that improve quality while helping to reduce rising costs. It aligns with our strategy to transform how health care is delivered. Through innovation, teamwork and the support of colleagues across our 51-hospital, seven-state system, Providence St. Joseph Health has seen some remarkable successes. Notably, sepsis "bundles," encourage timely recognition of the very serious blood infection, quick diagnostics and immediate treatment as necessary. The practice saves lives. Similarly, standard protocols for joint replacement knee surgery create expertise through repetition with steps that include, for example, the timeliness of getting a patient walking as soon as possible after surgery to hasten recovery, which results in shorter hospital stays.

Outpatient care is still trending upwards as both a convenience and cost-saving focus for consumers, employers and health plans. How have you addressed this transition and how has the growth of outpatient care advanced value in health care?

Jennifer Mitzner, Hoag Orthopedic Institute: Hoag Orthopedic Institute was founded in 2010 on a model that anticipated the shift to more outpatient care. HOI is comprised of a 70-bed inpatient hospital in Irvine as well as three ambulatory surgery centers in Newport Beach, Orange and Mission Viejo. We also recently partnered with ProSport Physical Therapy and Performance to further our business model into non-surgical outpatient care of musculoskeletal conditions, embracing that "getting you back to you" does not always require a surgical approach. The outpatient trend will continue to grow commensurately as more and more procedures evolve to outpatient care status. Our strategic plan calls for the building of more ambulatory surgery centers throughout Orange County and greater Southern California, increasing access to outpatient orthopedic care in more communities.

Ray Chicoine, Monarch HealthCare: We have a number of clinician-led health programs to guide our members and provide them with valuable resources and services. Externally we look to our affiliates and other partners such as Surgical Care Affiliates (SCA), a network of ambulatory surgery centers. SCA joined Optum in 2017 and offers our members access to high-quality and affordable surgical care. We share a similar focus on patient outcomes with SCA and know our members are benefitting from the highest quality facilities and surgeons in our community.

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