



# Best Practices for Integrating Market and Provider Data into Your Health System Management Structure



# Best Practices for Integrating Market and Provider Data

## *Presentation Overview*

- **Abstract:**

- Hospitals and Health Systems frequently struggle with aggregating Market and Provider data (Market Share - Inpatient & Outpatient, Patient Leakage Data, Specialty Supply & Demand, Employed Provider Productivity and Access Metrics, etc.) that should be the basis for strategic decision making within the organization. As a result, health system leaders frequently lack the information necessary to make decisions and measure performance.
- Based on HSG Advisors' experience in working with health systems around the country to create a centralized Market and Provider data planning environment with HSG Dashboard™, this webinar will outline best practices for centralizing market and provider data, tying data to organizational goals and objectives, and distributing data throughout the organization (Governance, Executive, Planning, Physician Network, Service Lines).

- **Learning objectives:**

- Understand best practices for aggregating relevant types of Market and Provider data for Hospitals and Health Systems
- Evaluate the appropriate level of data to push throughout each level of the organization
- Learn how to tie Market and Provider data metrics to Strategic Priorities and manage against such metrics over time

# HSG Speakers



## TRAVIS ANSEL

*MBA, ACHE*

**Chief Executive Officer  
Managing Director, HSG Strategy**

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**Strategic Healthcare Executive** experienced in system- and organizational-level management and planning for Physician Alignment Strategy, Employed Physician Network Strategy, and Accountable Care Strategy.

### EXPERTISE

- Employed Physician Network Growth
- Operational and Financial Performance
- Physician Network Strategy
- Management Infrastructure
- Market Development Strategy

### PROFESSIONAL EXPERIENCE

- Chief Executive Officer at HSG Advisors
- Multi-year enterprise-wide physician strategy planning for large, multi-hospital systems
- Physician Network management team development of long-term alignment and growth plans

### EDUCATION

- MBA, Vanderbilt University
- Dual BS in Finance and Business Management, UT Knoxville
- Member, American College of Healthcare Executives (*ACHE*)

# HSG Speakers



## DJ SULLIVAN

*MBA, MHA*

**Chief Strategy Officer  
Managing Director, HSG Claims Data  
Analytics**

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**Strategic Healthcare Executive** experienced in utilization of data in system- and organizational-level strategic planning and growth.

### EXPERTISE

- Claims Data Utilization
- Market Analytics
- Service Line Growth
- Medical Staff Development Planning
- Provider Need
- Market Development Strategy

### PROFESSIONAL EXPERIENCE

- Managing Director and Chief Strategy Officer at HSG Advisors.
- Provider of Claims Data Analytics market-level insights several hundred hospitals and health systems nationwide.
- Development of primary care and service line growth plans resulting in multi-million dollar increases in incremental service line and organizational revenues.

### EDUCATION

- MBA, University of Utah David Eccles School of Business
- MHA, University of Utah David Eccles School of Business
- BS, Pre-Medicine w Business Minor, Brigham Young University

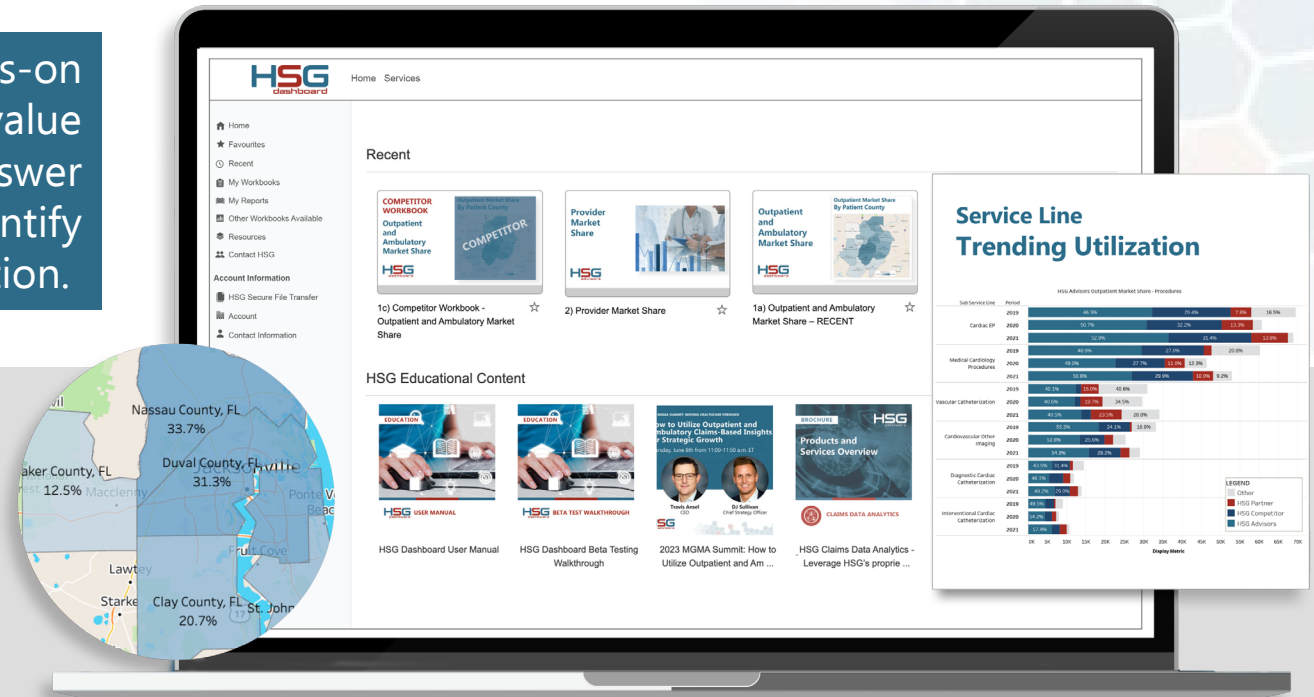
# Our Perspective on Integrating Market and Provider Data into Health Systems

**HSG Dashboard** is HSG's Tableau-based client data visualization environment that blends **HSG's proprietary All-Payer Claims Database, State-Level Inpatient Market Share, Outpatient Market Share, and Emergency Department and internal client health system data** to create unique, easily-interpretable reports, all housed in **one** central location, for utilization by **Health System Executive, Planning, and Employed Network Leadership** and other stakeholders focused on understanding the market and making strategic decisions.

**HSG's Strategic Advisory Team** employs a hands-on approach to ensure health system clients get the value they are seeking - helping health system clients answer questions about their markets and providers and identify incremental opportunities, turning information into action.

## Core HSG Dashboard Solutions:

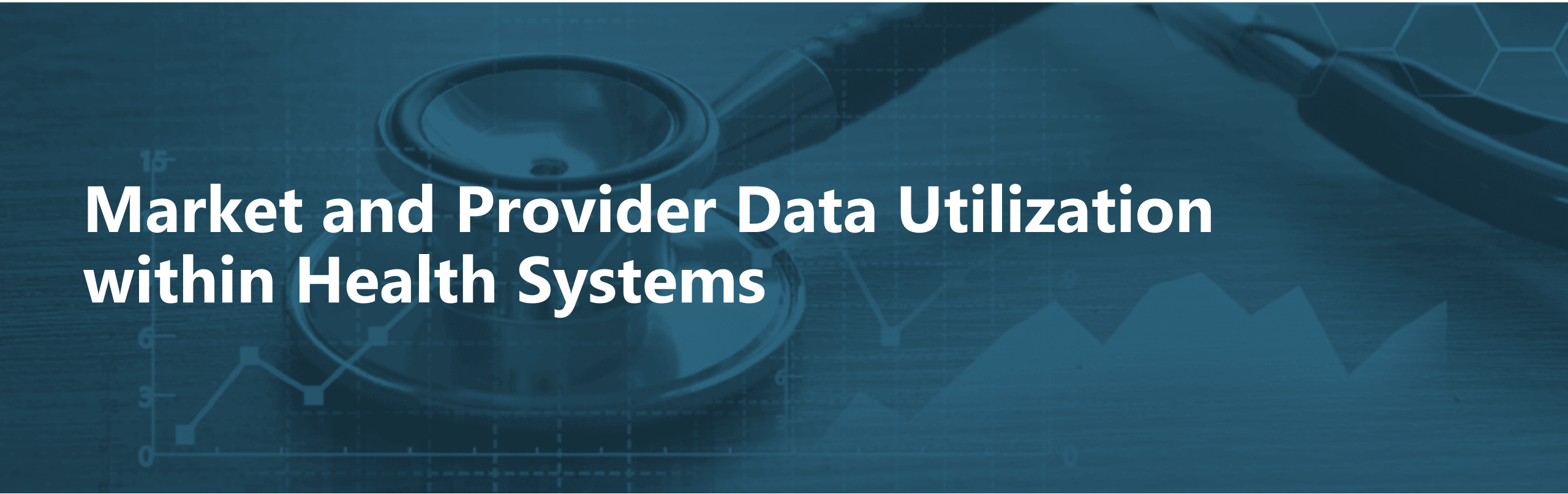
- HSG Outpatient and Ambulatory Market Share™
- HSG State-Level Inpatient Market Share™
- HSG Patient Flow™
- HSG Patient Share of Care™
- HSG Provider Market Share™
- HSG Provider Need Analytics™
- HSG Market Demographics™



# | Presentation Overview



- Market and Provider Data Utilization within Health Systems
- Challenges and Opportunities for Health Systems with Integration of Market and Provider Data
- Best Practices for Integrating Market and Provider Data within a Health System
- Common Challenges and Considerations by Health System Organizational Structure Type



# Market and Provider Data Utilization within Health Systems



# Market & Provider Data

## *Impact on Health Systems*

Data that help shape our health system's perspective of the **competitive market** and our **health system's positioning** within it.

- **Questions This Data Helps Answer:**

1. What is current state of market share performance?
2. How do patients utilize the care continuum and what market and provider dynamics drive their behavior?
3. What provider dynamics drive market share and overall performance?
4. How does changing provider supply or alignment impact performance?
5. How does geographic footprint of services impact performance?

- **Strategy Planning Impact:**

1. Overall Strategic Planning
2. Overall Growth Planning
3. Employed Provider Network Growth and Performance Improvement Planning
4. Service Line Growth and Performance Improvement Planning
5. Market Growth Planning
6. Medical Staff Development / Provider Workforce Planning



# Market and Provider Data

## *Definitions*

What	Source(s)
<b>Inpatient Market Share</b>	<ul style="list-style-type: none"> <li>• Typically State Hospital Association</li> <li>• Claims-Based (multi-state systems)</li> </ul>
<b>Outpatient Market Share</b>	<ul style="list-style-type: none"> <li>• Typically Claims-Based;</li> <li>• Some State Hospital Associations collect HOPD and limited Ambulatory data</li> </ul>
<b>Provider Market Share</b>	<ul style="list-style-type: none"> <li>• Claims-Based</li> </ul>
<b>Patient Leakage/Retention</b>	<ul style="list-style-type: none"> <li>• Can be measured on a limited basis through health system EMR</li> <li>• Comprehensive market-views are Claims-Based</li> </ul>
<b>Provider Supply and Demand</b>	<ul style="list-style-type: none"> <li>• Typically 3<sup>rd</sup> party and proprietary</li> </ul>
<b>Demographics &amp; Market Projections</b>	<ul style="list-style-type: none"> <li>• Census-Based</li> <li>• Otherwise 3<sup>rd</sup> party and proprietary</li> </ul>
<b>Employed Provider Productivity &amp; Access Metrics</b>	<ul style="list-style-type: none"> <li>• Health System Internal Data</li> </ul>



# Challenges and Opportunities for Health Systems with Integration of Market and Provider Data

# | Most Common Challenges

## 1. Observations are going to vary by organization size

- e.g. a \$2bn health system is going to have different specific challenges than a \$100m system

## 2. Fragmentation of Data

- Lots of data in different formats, in different places within the organization, different SL definitions

## 3. Siloed Perspectives

- e.g. - Data put together by the Planning Team may not necessarily have the focus that the Employed Network Leadership wants
- Data Turned Into Data, Not Information – DIKW Framework
- Data Not Visualized, Recurring, or Curate to the Audience

## 4. Data Not Meaningfully Tied to Organizational KPIs – we're measuring, and we're managing, but what's the goal?

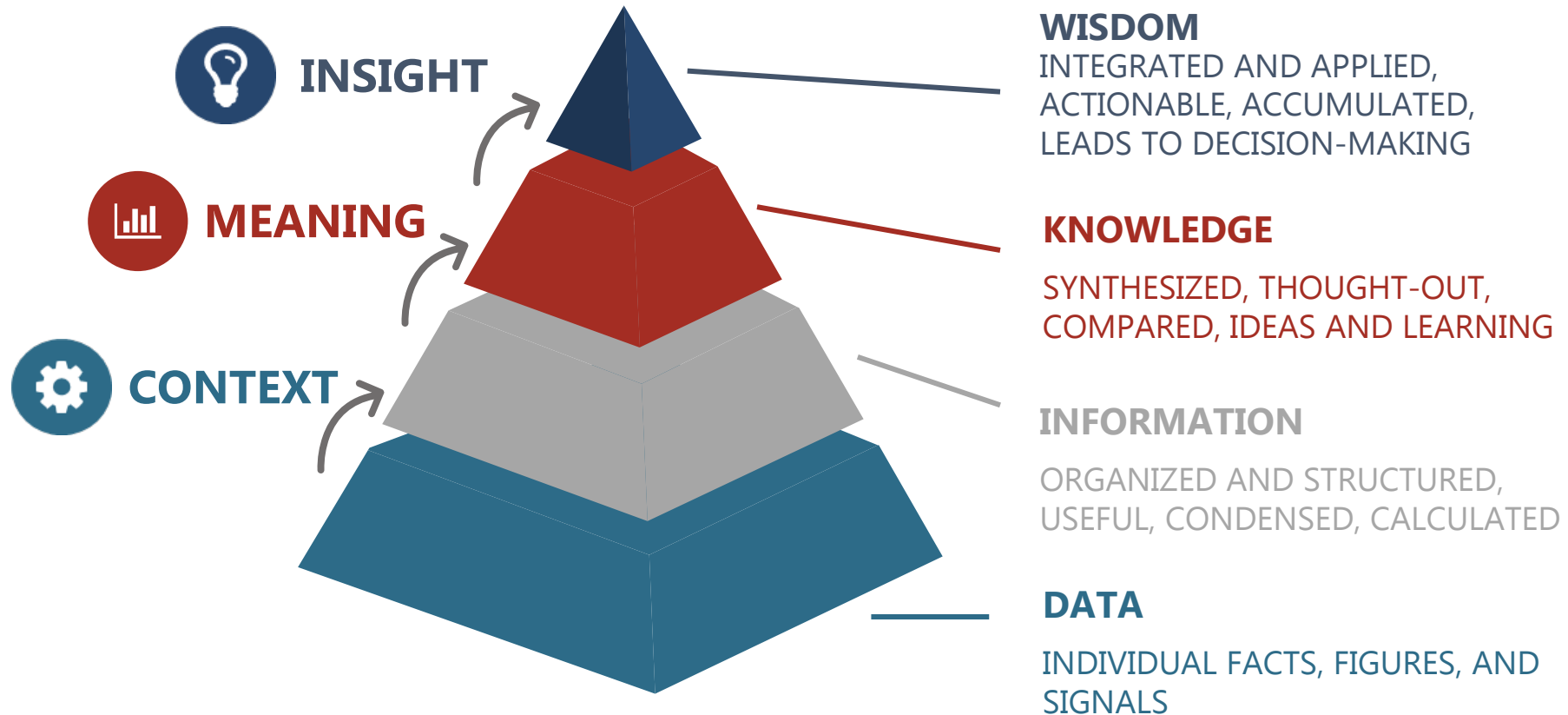
## 5. Market and Provider Data is on a Lag and Retrospective – how do we use it to look forward?

# | Fragmentation of Data

- Inpatient and Outpatient Market Share
- Provider Supply and Demand
  - Overall Market
  - By Strategic Market
- Succession Planning
- Existing Practice Capacity and Access
- Geographic Footprint / Drive Time Access
- Access Point Penetration
- Patient Retention / Referral Sources

These elements must be comprehensively evaluated and integrated together to evaluate and prioritize opportunities within markets and service lines.

# | Data, Information, Knowledge, Wisdom



# Organizational Impact

Inability to cohesively tie data elements together and disseminate through the organization typically leads to one of the following **decision-making barriers**:

## Anecdotal Observations

- “I think we need”
- Personal experiences are critical during drill-down to define root cause but should not be a measurement metric

## Analysis Paralysis

- Lacking specific data elements leads to no decision-making taking place
- Conflicting data sets, and/or outliers, lead to analysis paralysis where no decisions end up being made

## Strategic Disconnect

- Strategic focus is not in-line with what market information is saying.
- Market reality and data not leading to strategic decision-making
- Back to “I think we need” ...



# Best Practices for Integrating Market and Provider Data Within a Health System





*(paraphrased)*

- I need everything in one place
- I need data sets to match, specifically markets and timeframes
- I need my Board to get the highest level of directional information to ensure we're on track
- My exec team needs to know we're moving forward the right way, and depth of detail on critical service lines/initiatives
- My Strategic Planning Committee, my Employed Network Leaders and my Service Line Leaders need detailed, relevant-to-them information to drive operational and strategic decision making

- CEO, Midwest Community Health System, 2 hospitals

# Best Practices Overview

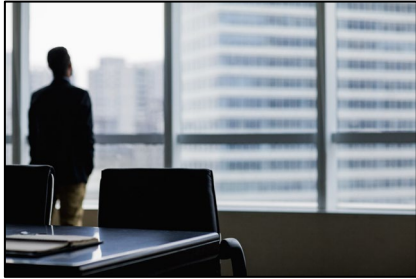
1. Create a centralized data structure with common market definitions and timeframes, and as comprehensive as possible of a data set
2. Create common management metrics and attach to strategic goals - what's actionable, what's a single metric of success, what's a metric by service line?
3. Define needs at each level of the organization based on span of control, breadth vs. depth needs
  - Governance
  - Executive
  - Strategic Planning
  - Employed Network
  - Service Line
4. Filter data throughout the organization with the appropriate context
5. Measure progress and reset goals as data evolves

## **NOTE:**

All of these have various challenges to implement, based on the type of health system and its leadership, planning and decision-making structures

# | Context Is Key

Getting the right data to the right stakeholders promotes understanding and utilization



## Executive Leadership

Executive leadership teams should have **key performance indicator(s) on their monthly or quarterly dashboards**. Executives need a big picture understanding of what opportunities exist and how where the organization is over/under-performing.



## Strategy/ Planning

Strategic planning personnel often have responsibilities over medical staff development planning, service line, and geographic growth initiatives. **Leveraging disparate data elements in one cohesive structure, and built within the same lense**, will lead to the greatest return on investment.



## Service Line Leads

Service line leadership need the most real-time and actionable data and insights available to make proactive and reactive decisions. **Specificity, and consistency, of data and information** is going to be crucial service line leads to make meaningful decisions that can move the organization forward.

# Tie Data To KPIs and Measure Over Time

Measure progress and reset goals as data evolves

Measure	& Manage
<ul style="list-style-type: none"><li>• What's our current state (benchmark)?</li><li>• What are the trends over time?</li><li>• What are the most immediate opportunities?</li><li>• Are we getting a return on investments for time and resources allocated?</li></ul>	<ul style="list-style-type: none"><li>• Ensure reporting mechanisms are simple and repeatable</li><li>• Ensure the ability to define opportunities for improvement and drill-down is easily accessible</li><li>• Build a plan and execute</li><li>• Continually evaluate progress and reset goals</li></ul>

**Goal:** Create a **simple & repeatable system** that keeps your organization focused on incremental improvement.

The background of the slide features a dark blue, semi-transparent overlay. In the center, a hand is shown holding a magnifying glass over a document. The document contains a line graph with several data points connected by lines. The graph's y-axis is labeled with '0', '3', '6', and '15'. The overall aesthetic is professional and analytical.

# Common Challenges and Considerations by Health System Organizational Structure Type

# | Types of Hospitals/Health Systems

**Single Hospital v.  
Multi-Hospital Health Systems**



**Service Line v.  
Medical Group v.  
Hospital Led Decision-Making**



**Contiguous v. Dispersed  
Geographic Service Areas**



# Considerations Based on Organization Size



Single Hospital



Multi-Hospital System

Common Themes	
Decision-Making	<b>Centralized</b>
Planning Team	<b>Limited</b>
Data Infrastructure	<b>Limited</b>
Data Analytics Team	<b>Limited</b>
3 <sup>rd</sup> Party Relationships	<b>Yes</b>
Reporting Delivery	<b>Inconsistent</b>

## Reporting Impacts:

- Identify 3-5 key growth objectives and standardize reporting based on audience
- Partnering with a 3<sup>rd</sup> party to provide ongoing planning, data infrastructure, and analytics will provide greatest ROI
- Deep dive on an as-needed basis

Common Themes	
Decision-Making	<b>Variable</b>
Planning Team	<b>More Robust / Centralized</b>
Data Infrastructure	<b>Centralized</b>
Data Analytics Team	<b>More Robust / Centralized</b>
3 <sup>rd</sup> Party Relationships	<b>Inconsistent Across Locations</b>
Reporting Delivery	<b>Somewhat Consistent</b>

## Reporting Impacts:

- Geographic dispersion of market(s) will be critical for reporting structure and mechanisms for delivery.
- Decision-making (hospital owned or system owned) will play significant role on what information needs to be shared with each audience.
- Centralization of data sources can become very challenging based on 3<sup>rd</sup> party relationships, data warehousing capabilities, etc.



# Considerations Based on Org. Structure



**Service Line**

Common Themes	
Decision-Making	<b>Service Line Leadership</b>
Growth Objectives	<b>Service Focused</b>
3 <sup>rd</sup> Party Relationships	<b>Service Line</b>
Data Management and Reporting	<b>Varies by Org. Type</b>

## Reporting Impacts:

- Information can become siloed
- Centralized data repository with ability to support all service lines comprehensively is critical to success
- Ability to navigate to detailed information quickly is crucial



**Employed Network**

Common Themes	
Decision-Making	<b>Medical Group Leadership</b>
Growth Objectives	<b>Provider Focused</b>
3 <sup>rd</sup> Party Relationships	<b>Centralized</b>
Data Management and Reporting	<b>Varies by Org. Type</b>

## Reporting Impacts:

- Information typically becomes very provider-centric
- Need to ensure service capabilities, geographic opportunities, and other metrics are not overlooked



**Hospital**

Common Themes	
Decision-Making	<b>Hospital Leadership</b>
Growth Objectives	<b>Hospital Focused</b>
3 <sup>rd</sup> Party Relationships	<b>Centralized</b>
Data Management and Reporting	<b>Varies by Org. Type</b>

## Reporting Impacts:

- Information typically becomes very hospital-centric
- Need to ensure outpatient access, practice metrics, and provider metrics are incorporated

# Considerations Based on Service Area



## Contiguous Service Area



## Dispersed Service Area

Common Themes	
Decision-Making	<b>Centralized</b>
Leadership Structure	<b>Localized</b>
3 <sup>rd</sup> Party Relationships	<b>Localized</b>
Data Management & Reporting	<b>Centralized</b>

### Reporting Impacts:

- Reporting needs to be focused on audience (executive, service line leadership, medical group leadership, etc.) to optimize data utilization
- Set a goal of incorporating all data elements into one location for ease of navigation

Common Themes	
Decision-Making	<b>De-Centralized</b>
Leadership Structure	<b>Localized</b>
3 <sup>rd</sup> Party Relationships	<b>Centralized &amp; Localized / Service Dependent</b>
Data Management & Reporting	<b>Centralized &amp; Localized / Service Dependent</b>

### Reporting Impacts:

- Ability to navigate to market-specific detail while simultaneously being able to perform market roll-ups is critical
- Centralization of data sources can become very challenging based on 3<sup>rd</sup> party relationships, data warehousing capabilities, etc.