

Allina Health

The Spine Care Value Journey

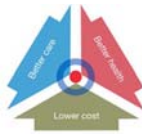
2018 Spine Consensus Conference
November 9th, 2018

Delivering on Triple Aim Goals

The high cost, high prevalence, fragmented treatment, and variable outcomes of spine care create an opportunity to dramatically reconfigure how spine care is delivered.

Spine care should be **patient-centered, not specialty centered**. It needs to be integrated between all the providers to maximize diagnosis and treatment. There needs to be clear, coordinated effort among all providers to avoid overutilization such as unnecessary tests, inappropriate , and/or ineffective treatment.

--Einar Transfeldt, MD, 2017, Metro Doctors: The Journal of the Twin Cities Medical Society



2 _____ AllinaHealth 

Barriers in Spine Care Management

- Fragmented care across Allina
- Variation in care across Allina
- Lack of communication between providers
- Difficulty obtaining seamless integration for new protocols within Electronic Health Record
- Poor support of, and collaboration with important Primary Care base



3 _____ AllinaHealth 

The Spine Care Value Equation

The Allina Health Spine Clinical Service Line provides **comprehensive spine services** throughout a defined care continuum.

Continuum based care includes prevention and education, medical management, physical therapy, surgical interventions, minimally invasive injection procedures, acupuncture, and osteopathic manipulation.

All services are aimed to **improve function and maximize return** to participation in vocational, personal, and recreational activities.

$$\text{VALUE} = \frac{\text{↑ IQ (QUALITY)} + \text{↑ IA (ACCESS)}}{\text{↓ COST}} \times \text{Appropriateness}$$

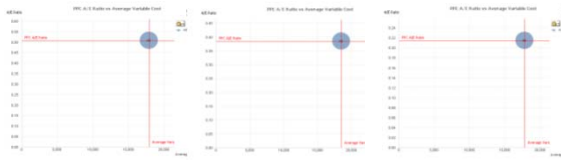
Spine Clinical Service Line: Metrics & Priorities

2016	2016	2017	2018
<ul style="list-style-type: none"> Build out hub and spoke models with integrated practice unit philosophy 	<ul style="list-style-type: none"> Drive Growth Deliver Value Expand to new markets 	<ul style="list-style-type: none"> Expansion and growth Invest in IS Infrastructure 	<ul style="list-style-type: none"> Model enhancements Further IS infrastructure
<ul style="list-style-type: none"> Formulate North and West Region strategies Launch Spine Line Develop and track outcomes data Value = Outcomes/Cost 	<ul style="list-style-type: none"> Grow Quality/ Program structure Fill existing access gaps by recruiting Drive value improvements through robust data New Payment models 	<ul style="list-style-type: none"> Integrated practice units spread throughout each region Seamless outcome measurement Optimal referral management Wake up call to build from the bottom up 	<ul style="list-style-type: none"> Engage Primary Care Further develop integrated practice units Investment in acute care pathways, addressing back pain earlier Pre-surgical pathways defined via patient facing technology Modified value equation

Spine outcomes-NOT COMPLETE

Measure of Success	Performance Metric	2014	2015	2016	2017	2018 YTD
Pain Management	Avg dc pill count	85	88	83	77	60
	Avg total dc opioid MMEs				676	511
	Avg dc opioid script duration				8.6	6.6
	Initial LBP encounter (EXRA)	15%	11%	9.10%	3%	3%
Quality						
Reduce Potentially Preventable Readmissions	PPR Actual to Expected Ratio	1.20	0.89	0.67	0.87	0.99
Reduce Potentially Preventable Complications	PPC Actual to Expected Ratio	0.87	0.71	.52	0.55	0.48
Reduce Surgical Site Infections	SSI Rate	1.17	1.46	1.18	1.14	
Decrease post-operative hospital length of stay	Performance to geometric mean length of stay	104%	99%	98%	96%	
	Hospital Days Avoided		353 Days	99 Days		
Improve access to services						
	Spine Line	NA	~ 1,159 calls	7,969		
	Unique Patients Medical Spine			TBD		
Patient Experience						
	Improving clinical value					
Education and Engagement						
Improve participation in patient education	Class or Video Attendance	12%	20%	25%	25%	
	Wellbe					

PPC A/E Ratio vs Average Variable Cost DRG 460

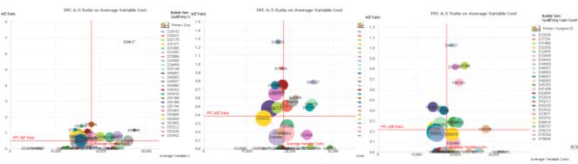


Average PPC A/E Ratio
Average Variable Cost

7



PPC A/E Ratio vs Average Variable Cost DRG 460



8



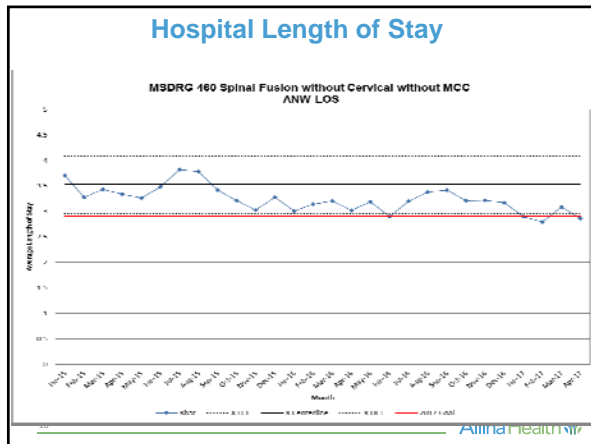
Hospital Length of Stay

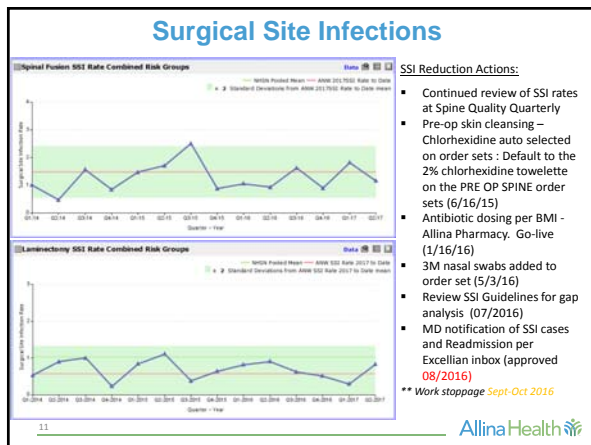
ANW Spine
% to GMLOS



9







Physical Therapy Initiatives

- Direct access and early referral to physical therapy as a point of entry in to the spine care model – partner with primary and specialty care
- Improved access to physical therapy services
- Lumbar and Cervical Clinical Practice Guidelines were updated based on a review of published evidence and staff educated.
- CKRI Outcome Measure for cervical and lumbar pain patients is FOTO (Focus On Therapeutic Outcomes)
 - CKRI performance is compared to national benchmarks – level of improvement and number of visits
 - Outcome data shared at the therapist level and being requested by certain payers (HealthPartners) as part of their value payment

AllinaHealth

Physical Therapy Initiatives

- Implement use of Keele STarT Back Screening Tool to inform recommended treatment approach



- Staff training on psychologically informed therapy – Neuroscience of Pain (Adrienne Louw)
- Staff training on motivational interviewing – patient experience and ensure plan matches patient choice.

13

AllinaHealth

Outpatient Medical Spine Program Initiative

Improved ease of access

- "Spine Line" implementation: One phone number to connect you to any part of the continuum.
 - Prior to 2015, multiple phone numbers connected to different spine services without any coordination between those services or settings
- Integrated practice units (IPUs) at our regional hub locations:
 - Coon Rapids, Minneapolis, Plymouth
- Expansion to new markets
 - Faribault, Coon Rapids, Cambridge, Isanti
- Addition of Interventional Spine services
 - Abbott Northwestern, WestHealth

New enhanced Shared Decision Making tool

- Two options Chronic Low Back Pain, Acute Low back Pain
- Ensure patient informed choice about treatment options
- Pay for performance measure for 2017 and 2018

Clinical integration

- Allina Health employed Chiropractors now part of Spine CSL
- Surgical partners- non operative workflow
- Primary care partnerships and Primary Spine Provider Training Program

14

AllinaHealth

2019 Areas of Focus for the Spine Clinical Service Line

- Continued integration with Primary Care Service line
 - Identifying frontline primary spine providers
 - Identifying clinicians who will serve in an advisory capacity
- Continued investment in surgical spine outcomes and transparency
- Direct access to Chiropractors and Physical Therapy for initial spine encounters
- Further development of integrated practice unit models in regional and metro sites- Buffalo, Faribault, Woodbury, Plymouth
- Consistent application and reporting of patient reported outcome measures within our spine network
- Opiate education, awareness, and reduction where appropriate
- Launch of spine robotics program at Abbott Northwestern

15

AllinaHealth

Questions?

16