

Filling in the Blanks: Addressing Degree of Physician Alignment in Medical Staff Planning

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If your organization is like most health systems and hospitals, your physician recruitment plan may be based on a less than complete picture of your existing physician base. Many medical staff recruitment plans do not consider the extent to which the organization's physicians and their patients are making use of the organizations inpatient and ambulatory resources vs. those of competitors (that is, their degree of alignment). By developing an understanding of degree of physician alignment, you can gain a more accurate picture of your physician needs, and reveal opportunities to grow your medical staff and build for the future.



COUNTING "FRACTIONAL" PHYSICIANS

When a physician's patients receive some of their care outside your organization's network, that physician, whether employed or independent, is effectively less than one physician for the purposes of medical staff planning. To understand the extent to which your organization's physicians are splitting, start by using available data sources.

Where they exist, state level databases, such as SPARCS in New York, or proprietary claims-based databases, can give you a clearer understanding of how and where patients are accessing services. At a minimum you can look at the volume per physician you receive from physicians in each specialty who are known to be "loyal," and compare that to other physicians in the same specialty, to get a sense of what the latter group may be taking elsewhere.

It's equally important (if not more so) to interview physicians who have their finger on the pulse of the medical staff and who are part of the referral networks that support your hospital. Alignment of primary care physicians can best be assessed by the specialty referrals that they make. Interviews will help you nail whether your PCPs are sending patients to physicians not on your medical staff, and if so, may also tell you why: Is it

dissatisfaction with a particular physician or group, or longstanding relationships with unaffiliated groups?

Through this quantitative and qualitative information, you can better characterize your current medical staff and the opportunities for improved alignment. From there you can determine how many more physicians you need, and in which specialties, to achieve your planning goals.

FULFILLING RECRUITMENT NEEDS

The effort dedicated to understanding your medical staff's degree of alignment will pay dividends when it comes to determining how to fulfill your physician needs. Understanding splitting behavior presents an opportunity to reach out and pursue alignment measures, and discuss how you can fulfill mutual goals. To the extent that closer alignment can be achieved, some of the need for new physician resources can be reduced.

Identification of weakly aligned physicians may also reveal problems in particular specialties, or broader issues in your hospital, such as:

- Excessive wait times for certain physicians
- A specific need that isn't being met, such as a provider that fulfills certain cultural expectations
- Lack of physician awareness about certain in-network providers and practices
- Perceived inferior quality of care by certain specialists
- Operational issues, such as difficulty in scheduling certain types of cases
- Inadequate technology, or tools that are inferior to competitors'

You may also identify unaffiliated groups to whom your physicians refer, some of which may be interested in working with you. A discussion with such a group may identify areas of mutual interest for a relationship going forward. As word of this outreach bolsters your reputation in the physician community, other unaffiliated groups may start approaching you.

Take complete stock of what you have before planning for the future – not only will it help you identify your true needs, it may help you to fulfill them, as well. ●