



ADVENTIST EMPLOYED PHYSICIAN ONBOARDING

An enterprise wide initiative to streamline and consolidate all activities required to bring new physicians to a functioning and billable state. Onboarding brings strategy, focus, and financial discipline to physician talent acquisition and process management.



Organization

- AHS is a complex organization:
 - Enterprise Security
 - Hospital Facilities
 - Non-Staff Facilities
 - CVOs
 - PHOs
- States Rights Management Model
- Diversity among hospitals in 8 different states

Practitioners In MSOW

Who is entered into MSOW has changed during implementation

2011 - an individual who may be applying for membership and/or privileges at an AHS hospital or PHO.

2012 - an individual who may be applying for membership and/or privileges at an AHS hospital or PHO

OR

because the data is needed to flow downstream to the EMR system

2013 - an individual who may be applying for membership and/or privileges at an AHS hospital or PHO





OR

because their data is needed to flow downstream to the EMR system OR
because this is an AHS Employed physician



Facilities

Existing facilities

-  Hospital Medical Staff Office
-  NS Non-Staff Associated with Hospital
-  HS Provider-Hospital Organization (PHO)
-  CVS Credentials Verification Service (CVS)

New Facilities

-  GS Employed Group Practices
-  ES Recruitment Facilities



Scope

- APO project scope identified as:

“The work required to create a standardized process that begins with the offer of a letter of intent and ends with a fully credentialed physician who can bill for services”

Joanie White, Director
Office of Clinical Effectiveness, 2012



Objectives

- Focus on physician experience during employment process
- Reduce revenue loss associated with time between hire and ability to bill
- Support AHS's 2015 Vision of “completely paperless” process
- Provide concurrent credentialing, risk evaluation, and HR activities
- Reduce initial appointment and payer enrollment cycle times
- Unify work flow making it seamless to practitioners
- Automate components of the onboarding process
- Create system that shares real time data via software interfaces
- Eliminate duplicate work
- Eliminate delay/enhance coordination among corporate entities
- Simplify provider, network, and payer engagement



Background

- Software originally purchased for credentialing and privileging only
- MSOW software offers AHS single platform to enter practitioner data
- Can be used by variety of internal resources
- Due to robust Security – able to manage data & images to maintain confidentiality with respect to federal and state peer review statutes



Who Performs Data Entry

- New employed physician applicants
 - Entered by recruiters
- Routine Maintenance
 - record maintenance for office address and malpractice insurance entered by practice groups



Status & Status Category

- AHS currently utilizes the traditional MSOW Four Status'
 - Active
 - Applicant
 - Inactive
 - Suspended
- ❖ Status Categories determined by Medical Staff Bylaws or other organizational construct



With APO....

- Adding new Status' to MSOW
- Utilizing status group to differentiate persons who are not really applicants
- Recruitment personnel utilize:
 - Prospect
 - Candidate
 - MSONet Reference



Work Flow Milestones

- Five subcommittees identified how work was accomplished
- Work flow diagrammed by Six Sigma Black Belt
- Work flows designed in MSOW to utilize automation features foundational to this effort:
 - Online Applications
 - Web Crawls
 - Data sharing
 - Images



SuperApplication

- Concept - single application can collect data needed by all parties
- Partnering with software vendor Morrisey Associates, Inc. for customized programming
- AHS to copyright cutting edge collection tool



Legal

Working with legal team - 3 new releases developed:

- User Agreement - outlines responsibilities and obligations of all MSOW users to ensure confidentiality
- Controlled Substance Release - created to give AHS special consent required by law to obtain medical record information related to any controlled substance treatment
- Consent and Release - allows all parties involved to do their work



Data Milestones

- Data elements utilized identified
- Onboarding applications & other forms collected
- Cross referencing applications and forms to identify what data elements are utilized
- Analysis of current data elements in MSOW Software



Activities

- July 2012, Orlando, FL - Adventist Employed Physician Onboarding (APO) Forum
- October 2012 - project plan created
- November 2012 - workgroups began meeting
- February 2013, AMH Chicago, IL & FLG/FHMMC Orlando, FL - pilot sites identified
- Spring 2013 - site visits
- August 2013 - pilot sites education begins
- October 2013 - pilot sites begin
- Regional Kick Off Meetings (Non-Pilot Sites):
 - November 2013 - Florida-Region
 - January 2014 - Kansas and Wisconsin,
 - February 2014 - Texas, Georgia, & Kentucky



Staff Education/Orientation

- Utilizing technology to provide online education and training
- Each work group has two different sessions to work with the new workflow
- Ongoing 'Free Swim' sessions offered
- Special attention and support during go live rollouts



Corporate Wide Implementation

- December 2013 implement regional roll- out:
 - Week of December 3, 2013 - Florida
 - January 2014 - Kansas
 - February 2014 - Texas, Georgia, Kentucky, North Carolina and Tennessee



*Extending
the healing ministry of
Christ*

