

UC Health Division of UCOP Strategy and Opportunities for Collaboration

October 15, 2019

UC Health: The Challenge

- The UC Health System is challenged by a highly competitive environment characterized by:
 - Declining reimbursement from public and private payers; unpredictable health policy
 - Consolidation and rapid expansion of other health systems (Mayo, Hopkins, UT's MD Anderson, Kaiser)
 - Increasing emphasis on the delivery of “value based” care; providers are being asked to take financial risk for the care provided
 - Costs increasing more rapidly than revenues leading to shrinking margins to support capital needs and the academic missions
- These factors make it clear that system size, solid financial performance and increased emphasis on quality and accountability will be metrics for success.
- The environment requires scale, systems integration, agility, and rapid strategic innovation.

UC Health Division Strategic Objectives

Systemness	Cultivate a systemwide approach to optimize decision-making and to implement the highest quality health sciences education, research and clinical care toward the improvement of health for all Californians and beyond
Innovation	Develop, catalyze and disseminate new ideas, methods, and technologies to advance and continuously improve health sciences education, research, clinical care and health plans
Operational Excellence	Optimize delivery of programs and services through systemwide implementation of best practices that promote efficiency, effectiveness and quality
Financial Stability	Ensure financial stability of the UC Health enterprise through efficient and effective financial management practices to support teaching, research and clinical care
People	Attract, develop and retain diverse, highly productive, talented, and motivated people who exemplify our core values and thrive in a culture of service, innovation and change
Policy & Advocacy	Advance UC Health's mission by championing a strong health-related perspective within UCOP and by marshalling campus expertise and external partners to effectively advocate on key health policy issues

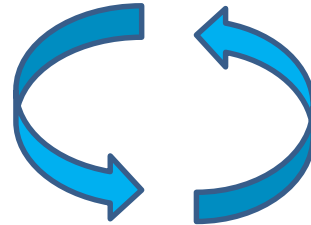
UC Health Division Goal Snapshot

Goal #	Owner	Goal Topic	Strategic Objective					
			Systemness	Innovation	Operational Excellence	Financial Stability	People	Policy & Advocacy
1	Graham	Drive Savings and Efficiencies Through LSfV	■		■	■		
2	Engel	Develop and Launch Systemwide Strategic Initiatives	■	■	■	■	■	■
3	Engel	Create Quality / Population Health Management Function	■	■	■	■		
4	Stobo	Improve Systemwide Financial Analysis	■		■	■		
5	Engel	Establish Center to Leverage Systemwide Data	■	■	■	■		
6	Tauber	Offer Competitive & Compelling UC-Branded Health Plans	■	■	■	■		■
7	Engel	Strengthen UC Health Internal Effectiveness			■		■	
8	Nation	Develop Systemwide Enrollment Plan & Strategy	■		■			
9	Nation	Advance Progress in Promoting Diversity & Inclusion	■		■		■	
10	Nation	Advance Interprofessional Health Sciences Education	■	■	■			
11	Engel	More Effectively Influence Public Policy as a System	■		■			■
12	Buchman	Expand Critical Student Health Partnerships	■		■	■	■	

■ = Goals Funded by Health Systems

UCH Goal 5 – Establish Center to Leverage Systemwide Data

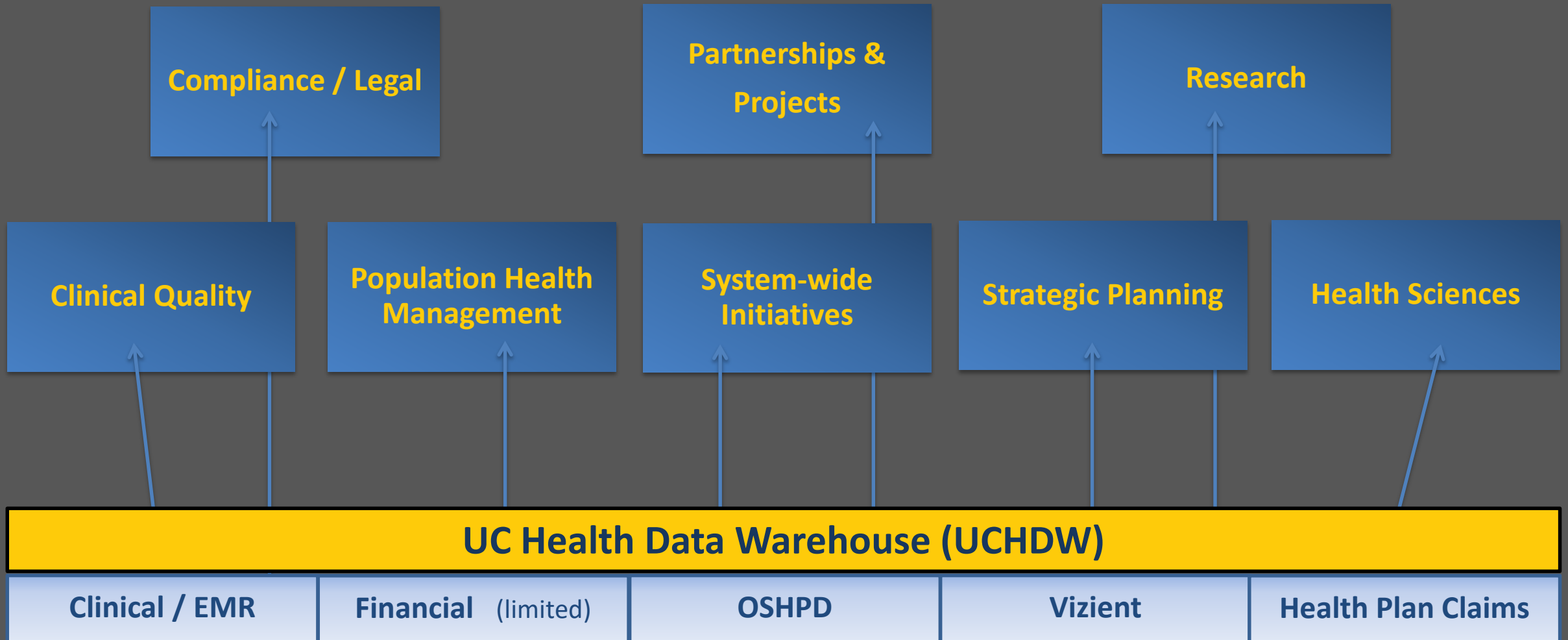
Support research, inform and improve business and clinical operations, and generate efficiencies through economies of scale by establishing a new center within UC Health for system-level data-driven insights, innovation and transformation starting in March 2018



UCH Goal 3 – Create Quality / Population Health Management Function

Advance the quality and efficiency of care delivery, improve patient outcomes, and reduce costs by providing leadership and support on the development and implementation of a data-driven system-wide quality and population health management function beginning in January 2018

Health Data Supports Numerous Functions System-Wide



Center for Data-Driven Insights & Innovation

Oversight Board (Chaired by EVP, UC Health)

Chief Data Scientist (Atul Butte)

Executive Director / Chief Health Data Officer (Cora Hahn)

Building / Maintaining Technical Infrastructure

- Supports efforts within clinical enterprise as well as ACOs, self funded plans:
- Compiling, structuring data (including from third parties)
 - Generating reports, visualizations
 - Interoperability with other campus systems

Data Science (Analytics)

- Working with the business / clinicians / scientists – determine how to use the data strategically to derive the desired information in useful and accessible form
- Pioneer and develop novel data analytics and computational capabilities to drive value and insights (clinical, operational and research) from UC Health data

Data Governance

- Policies / Guidelines
- Lead Health Data Governance Committee to assess appropriateness of proposed projects
- Analyze positive and negative outcomes of projects UC has undertaken
- Share learnings, refine policies and practices

Strategy and Support

- Collaborate with campuses to develop strategy to inform, measure and drive our efforts
- Identify and accelerate projects and partnerships opportunities
- Facilitate resolution of internal conflicts and legal, ethical, reputational issues
- Project management

CENTER FOR DATA-DRIVEN INSIGHTS AND INNOVATION

(MEMBERSHIP FOR OVERSIGHT BOARD)

Committee Leadership

Chair - *John Stobo*, MD (EVP, UC Health)

Vice chair - *Elizabeth Engel*, JD (CSO, UC Health)

Campus Appointees

UCLA

Michael A. Pfeffer, MD (CIO)

UCSD

Chris Longhurst, MD MS (CIO, Assoc. CMO)

UCR

Katherine Hansen (COO)

UCD

Jason Adams, MD (Medical Director over Data Analytics)

UCI

Nasim Afsar, MD MBA SFHM
(Chief Ambulatory Officer and CMO for ACOs)

UCSF

Gina Intinarelli, RN PhD RN
(VP, Pop Health Management)

At Large Appointees

CMO / CQO Representation:

Rotating CMO Lead
(currently *Robert A. Cherry*, MD, UCLA)

Research Perspective:

Rotating Lead – Chair of UC BRAID
(currently *Steven M. Dubinett*, MD, UCLA)

Non-Health Campus Perspective:

TBD

Ethics Perspective:

Barbara Koenig, PhD, UCSF
(Director UCSF Bioethics Program)

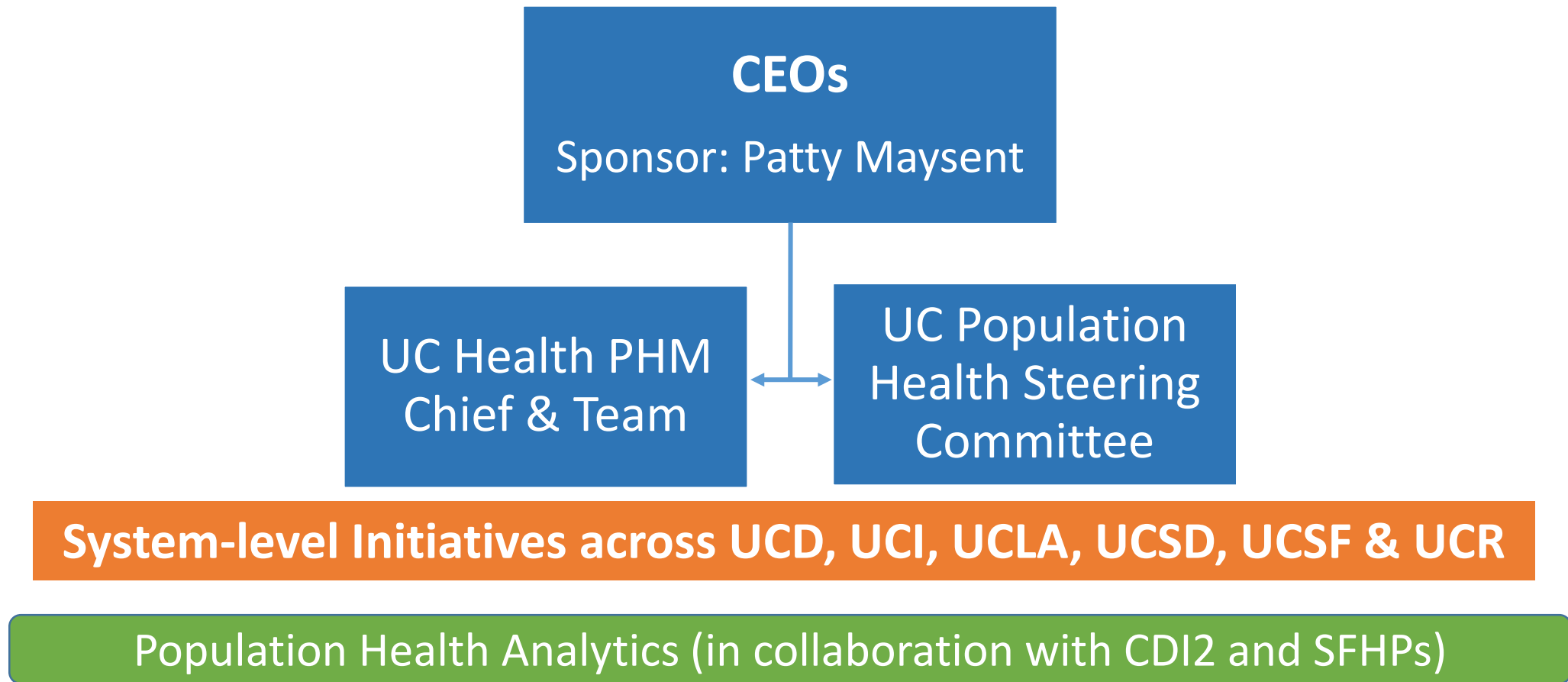
Business / Innovation Expertise:

Rob Currie, MBA UCSC
(CTO, UCSC Genomics Institute)

OGC (Ex Officio Member):

Hilary Kalay, JD

Population Health Management Organizational Infrastructure



Framework for Initial Population Health Management Work

- Significant **care improvement**
- Meaningful impact on **quality/costs**
- Rapid progress
- **Reduce variation** between the campuses
- **Use of existing infrastructure** (local programs, processes, people, data)
- **Coordinated**, collaborative efforts

Initial Scope of Work



- Self-funded plans (UC Care)
- Long Term Incentive Plan (Diabetes and Hypertension care)
- UC Population Health Management Landscape Assessment

What we've done: UC Care Initiative

- ✓ UC Care comparative dashboards created
- ✓ Campus Population Health Leaders agreed on 3 key areas for intervention
- ✓ 12 campus subject matter experts convened
 - ✓ **58 strategies identified; 27 already implemented**

What we've done: LTIP Goal re Diabetes

Milestone #1: *Identify core variations in diabetes care to improve care, outcomes and reduce cost*

✓ Completed



Milestone #2: *Develop the “UC Way” for at least three diabetes prevention / care management protocols across the campuses*

- ✓ UC comparative dashboards developed for the diabetes outcomes measures
- ✓ 24 SMEs convened and chose 3 care management protocol foci
- ✓ Campus champions and initial interventions identified

Opportunities for Systemwide Collaboration

Partner with BRAID to improve patient care and outcomes, and generate value:

- Leverage system-wide and local efforts and infrastructure
- Develop the right data sets, analytical tools for the UCHDW
- Develop and translate UC's QI / pop health discoveries to clinical practice
- Train our students, faculty and staff re data use, building and participating in a LHS
- Overall, drive a culture of continuous learning and feedback – a LHS community....

Thank you!