

A blueprint for high-performing physician networks

By Gale Pryor | June 1, 2016

Key Stat

\$5.7M

in shared savings secured in Privia's first year in MSSP

Key Takeaways

- 1 High-performing physician networks focus intently on workplace design.
- 2 Privia offers a detailed blueprint for organizing around value-based care.
- 3 The shift to population health requires taking physicians on a journey.

In 2007, it was becoming clear that U.S. healthcare needed radical change. Spending was rising toward 16 percent of the GDP. High rates of chronic illness showed no sign of abating. The sustainability of our costly fee-for-service system was coming into question by policymakers and other healthcare leaders.

Jeff Butler discovered the seeds of a solution in the unlikeliest of places: sub-Saharan Africa.



Butler, a healthcare administrator and former director of the Advisory Board Company, had joined a mission-based venture to help stem the African

HIV pandemic. Because healthcare systems on the ground were weak or nonexistent, Butler and his physician partners set about building systems from scratch. They mentored physicians and community health workers and coaxed them into integrated networks. They relied on data and technology to track and connect care across large, remote populations. As their work joined that of other initiatives, the rate of HIV deaths in the region began to slow.

Returning to the States, Butler realized that this system of team-based care connected by technology – tested and proven in the midst of an unprecedented public health crisis – could be applied at scale to improve care for populations anywhere. Even in the U.S.



So in 2007 he founded Privia Health LLC and, in 2013, Privia Quality Network, one of the fastest-growing physician networks in the nation.

The company has grown to over 1400 physicians and over 250 care centers, adding 30 new practices each month in DC, Maryland, Virginia, Georgia, Texas and New York. Last year, Privia's ACO, Privia Quality Network, ranked among the top 15 percent of ACOs in the country, receiving \$5.7 million in shared savings for beating targets for cost and quality that the vast majority of ACOs missed. And the market has taken note: in 2014 a Goldman Sachs-led group invested \$400 million in Privia's investment holding company, Brighton Health Group.

When researchers examined key financial and operational indicators from the athenahealth network of more than 99,000 providers, Privia emerged as one of the strongest performers in all outcome measures.

"More than any organization we studied," noted Josh Gray, the principal researcher on the study,

"Privia stood out for having an intentional focus on workplace design – one that really enables physicians and staff to serve the patient well."

As healthcare's center of gravity shifts from hospitals to ambulatory and community settings, from "sick care" to preventive care, strong physician networks will be essential for providing the kind of effective, community-based care that is needed. And as health system leaders navigate a new course, Privia – purpose-built for value-based care – offers not only inspiration, but a blueprint for six key attributes of high-performing physician networks:

1. A galvanizing vision

Privia's vision – a network of integrated, data-driven care providers – was tested and proven in the midst of a pandemic. It is a novel approach to healthcare, designed to keep populations healthier while bending the cost curve down.



"We believe that most physicians in the country want to practice in a way that's most beneficial to their patients, yet most doctors don't have the infrastructure, technology, and teams they need to be able to provide that kind of care," says Butler.

By providing that infrastructure, sharing data, and collaborating with physicians on what actually works in patient care and practice management, Privia has re-designed healthcare delivery from scratch. This vision informs Privia's clinical investments, its partnerships with affiliated providers and facilities, and the growth of its network – and it helps Privia attract like-minded physicians.

2. Hiring for fit

Across the country, physicians are searching for fulfilling, financially sustainable ways to practice medicine in the midst of payment transformation. Some have despaired. Others have found Privia.

In 2012, Tiffini Lucas was a top-rated family medicine physician managing a two-physician practice in Chevy Chase, Maryland. But she was teetering on burnout. Government regulations were maddening. The workload was overwhelming.

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Scott Disch
National Practice Leader
PRIVIA HEALTH

The prospect of working with the benefit of Privia’s performance data, operational support and revenue services was attractive – for Lucas and for many other doctors. But not every doctor is cut out for Privia. The organization rigorously vets every physician and practice that wants to join the system, not only reviewing past performance as an indicator of future potential, but assessing cultural fit and alignment with the overarching vision.

“When Privia looks at selecting physicians to join the network, it really is around alignment to mission and vision,” says Scott Disch, M.P.H., Privia’s national practice leader. “The physicians we partner with desire to embrace the idea of practice transformation. In order to be a successful physician in a high-performing physician enterprise, a lot of changes are needed: Not only a new EMR or a new funds flow, but a new way of practicing medicine. They have to be willing to think about their panel differently. They have to want to be part of driving behavior change.”

Lucas was ready for the challenge. “Privia started when we saw that healthcare was moving toward fee for value,” she says. “That’s an ever-changing landscape – and they were on top of it. And because they valued the patient-doctor relationship as the most important part, it seemed like it was going to be a good fit.”

3. Autonomy to execute against clearly defined performance goals

Doctors joining Privia Medical Group must be willing to meet defined, measurable goals for performance, based on Privia’s expectations for clinical and operational improvement across its network. They have to be willing to measure their performance through data, and to share that data transparently with other providers. In some cases, they have to rethink their role in patients’ lives to meet these goals.



“We’re taking a practice and a physician on a journey,” says Disch, “to transform a practice of just sick episodic care to population health. Everybody, the MA, the nurse, and the physician, has to go on this journey.”

The journey begins when a care center comes onboard. Privia’s performance consultants study data from practices and individual providers, and set benchmarks across five areas: finance, revenue cycle, productivity and growth, population health, and patient engagement and satisfaction.

“We focus physicians on their key metrics and opportunities to improve,” says Disch. Privia’s performance consultants provide wrap-around support to physicians and care centers as they streamline workflows, find efficiencies, and set goals for performance. And they continue to report on performance after the onboarding is complete, asking even top practices to keep improving.

“Maybe it’s front office copay collections. Maybe it’s back-end denial rate,” Disch says. “We’re constantly challenging each other to drive change that ultimately allows them to be successful in their practices.”

How physicians meet their performance goals, however, is up to them; they are the leaders of their own practices. “It’s really an open conversation about their practice,” Disch says.

Lucas appreciates that partnership. “Often as physicians, we’re told what to do by CMS or other payers. And it doesn’t always seem to be in line with how we’re practicing medicine. In fact, it seems like an interference,” she says. “At Privia, we really are a partner in this process.”

4. Physicians’ voices in leadership

As partners in driving change to value-based care, Privia’s physicians are decision makers in policy and strategy for the overall organization. To enable physician leadership and shared governance, Privia has created a network of Physician Organized Delivery Systems, or PODS: regional groups of 10 to 25 physicians who meet monthly to share unblinded performance and quality data.



PODS meetings also offer physicians a place to dig deep into issues and the trends that they grapple with daily on the frontlines – from care coordination and patient experience to cost transparency and patient panels.

“We have these really robust discussions about where healthcare is headed,” says Lucas, who has become a PODS leader. “In the past, doctors often stood back, and we let healthcare evolve without being a part of it, and then had to figure out how to handle it after the fact. But being on the forefront of change gives us a bigger voice, and ultimately helps our patients.”

Disch sees the PODS as tools for engagement in the broader corporate mission – while still providing

physicians with autonomy and fostering the informal exchange of ideas that smaller practices enjoy.

“At the end of the day we see it as *their* network,” he says. “We want to be doing things that help them become better physicians, helping take care of the populations.”

5. Radical data transparency

It is unblinded data sharing, however, that drives continuous performance improvement across the organization. “Clinicians need to see the data, understand it, debate it, and arrive together at the solution,” says David Rothenberg, president of Privia Health. “And healthy competition helps to improve individual metrics. Doctors are A students. They want to do well. When we give them their monthly report on how they’re doing, nobody likes to be at the bottom.”

Reviewing data points together also leads physicians to share best practices with each other. In her early days at Privia, Lucas recalls thinking, “Well, I don’t know how I could possibly fit more people into my schedule.” In her PODS group, however, “we could talk about that and look together at best practices for open scheduling versus fitting in same-days, and how we’re triaging patients.”

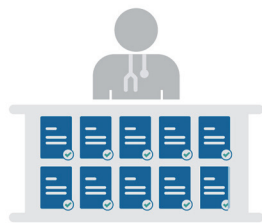
6. Strategic incentives

Privia also motivates physicians to embrace its model by rewarding them for meeting what on the surface might seem like basic engagement metrics: attending POD meetings, responding to emails, participating in educational webinars, and more. Although these incentive targets are fairly narrow in scope, they are foundational for deeper connections among physician colleagues and with the wider network. Disch explains: “At Privia, physician engagement is so valued that we have put it in the top tier. Our Privia physicians must hit engagement metrics in order to participate in shared-savings contracts.”

Physicians also earn incentive payments for practicing in ways that take costs out of the system, manage patients appropriately, and hit quality targets.

“We architect arrangements with payers and employers,” says Rothenberg, “so that the physician that engages with a patient over the phone, rather than bringing them into the office, isn’t financially harmed by doing something that’s more convenient, simpler and better.”

For Lucas, the system works. “Any time someone feels like they’ve got skin in the game,” she says, “they are more in tune with seeing things become successful.”



99%

of Privia physicians renew their contracts

And wrap-around administrative and performance support enables physicians to do the job they want to do. “When someone comes in with a headache, it’s my job to figure out not just what’s going on physically, but what’s going on emotionally and mentally and at home,” Lucas says. “I try to take the time to get to know my patients and what’s going on with them.”

The result: Happy doctors who stay the course. Privia keeps contracted terms with physicians relatively short so that, if necessary, “they have the opportunity to vote with their feet,” says Rothenberg. “At the end of their term, if they’re not happy, they can leave and go back to the way things were.”

Yet 99 percent of Privia’s physicians renew their contracts.

A journey just begun

Privia isn’t resting on its laurels and doesn’t expect transformation to get any easier from here. “There are no shortcuts to taking costs out of the system,” says Rothenberg. “This is a journey we’re going to be on together with our doctors for a long time, maybe a generation. And it’s hard work. But I think the doctors feel proud to be a part of that mission. This is the right thing for patients. And the right thing for doctors.”

Gale Pryor is associate editor of athenaInsight.



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