

# Cardiovascular Service Lines: Leading the Change

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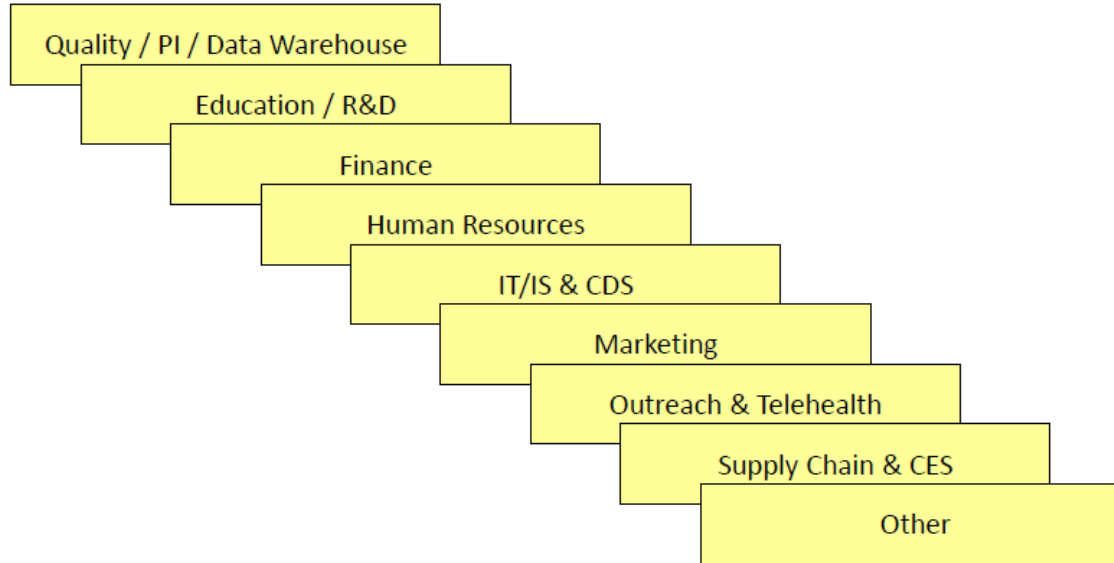
# Define Service Line

- Who
  - Cardiology CV surgery
  - Vascular
  - IR
  - Employed or all providers (different groups/deals will complicate this process)
- What
  - Practice
  - Hospital (procedural and nursing)
    - Inpt and outpt departments



# Who is in a CV SL

*Clinical Service Lines are supported by a team of key resources at the system-level*



*That work in collaboration with business unit clinical and operations staff*



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# Patients at the CENTER

## Cardiovascular service line defined:

Cardiovascular services organized the way patients experience them.



Horizontal CV Care Stream Across Traditional Vertical Structures



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# Management of the CV SL

	Weekly	Monthly	Quarterly
Financial Data	Volumes	Income Statements Productivity Cost per case Acuity/CMI LOS Blended financials	Trending Elements of QRUR
Quality	Adverse Events Outliers	Process Dash Board	NCDR STS Elements of QRUR Value programs
Strategic		HCAHPS CG-CAHPS	Market Share Outmigration Competitor analysis
Operations	Access	Project dashboards	Process improvement

# CVSL Governance

- **68% of respondents described their governance structure as one that incorporated the dyad leadership model and are physician and administrator collaboratively led.**

**Governance provides the opportunity to build trust.**



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# Cardiovascular Service Lines

Over the next 2 years, 75% of hospital executives respondents indicated that they will expand their service lines.

- 23% of hospitals said they are fully aligned with their physicians
- 67% of hospitals said they are partially aligned with their physicians
- 62% of hospitals say that they have difficulty aligning with their physicians
- 54% of hospitals say that they have difficulty aligning physician compensation
- 54% of hospitals say that they have difficulty acquiring strategic physician organizations
- Prediction that CVSL leadership team will drive integration success



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# Using data as a roadmap

- NCDR
- STS
- Hospital quality programs
- Physician quality programs
- Hospital Specific reports
- Publicly reported data



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# The plan

- You must have a plan that is reviewed, modified, and updated annually
- They physicians must be ACTIVE participants
- It must include finances and quality
- Is the practice a component of the SL or is it an appendage



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# The process

- If you work collaboratively you will move towards integration value faster
- Cultural integration FIRST, learn each others “ways” and create a new way – that will create value
- Hospital must have a vision that supports SL
- CV SL leadership will drive success



# The Future.....will come sooner than you think

- AUC
- Payment Reform: Value, ACO, bundles
- Post-acute care!!!!
- Population Health
- IS your SL ready



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