

The Athletic Trainers' Role in the Changing Healthcare Market

Kathy I. Dieringer EdD, LAT, ATC

WE are the missing piece!

Objectives

- Explain team based health care vs. patient centered health care
- Identify opportunities made available to ATs in today's healthcare market
- Explain initiatives/strategies identified by Healthcare Reform Workgroup
- Define ROI, and identify tools to demonstrate ROI in an AT's practice
- Integrate advocacy and value strategies into an AT's practice, including patient outcome surveys

Conflict of Interest

No Conflicts

- The views expressed in these slides and in today's discussion are mine alone
- My view may not be the same as the views of my company, clients, or colleagues
- I have no financial interests or conflicts in regard to the information provided
- Participants must use discretion when using the information contained in this presentation





Then and Now

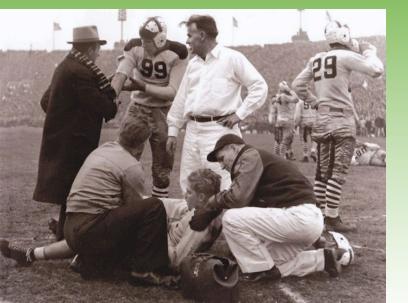
History

- Behind the scenes
- Support/Athletics Staff
- Little to no recognition
- Educational Apprentice

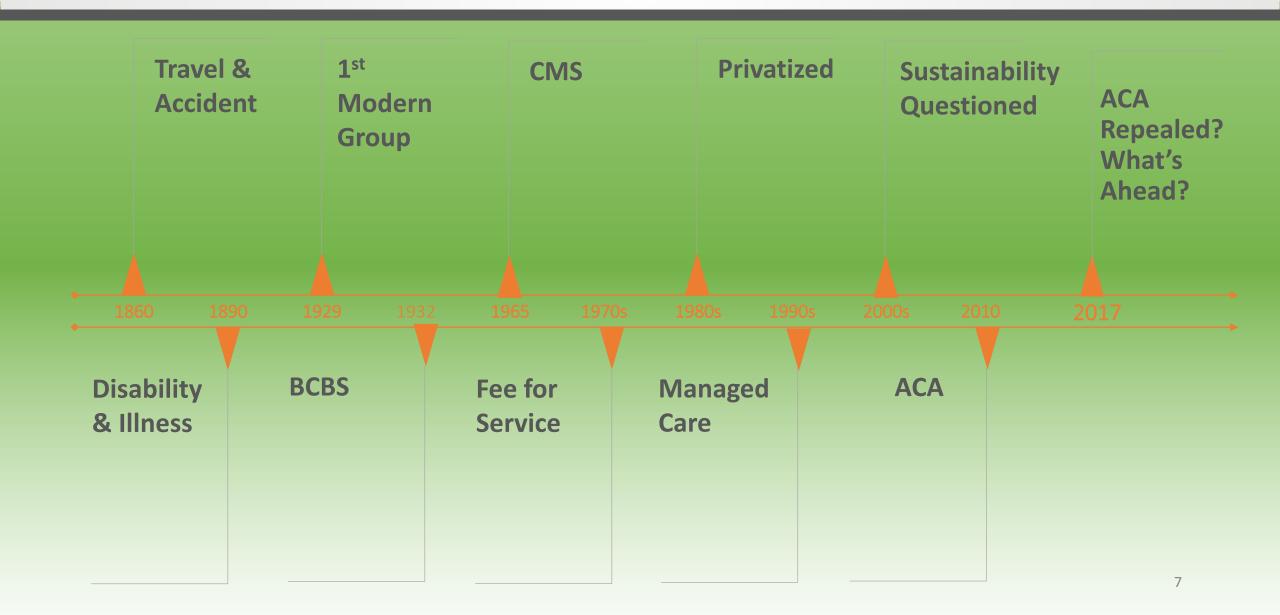
Today

- Multiple Settings
- Health Care Provider
- Medical Model
- Education Reform

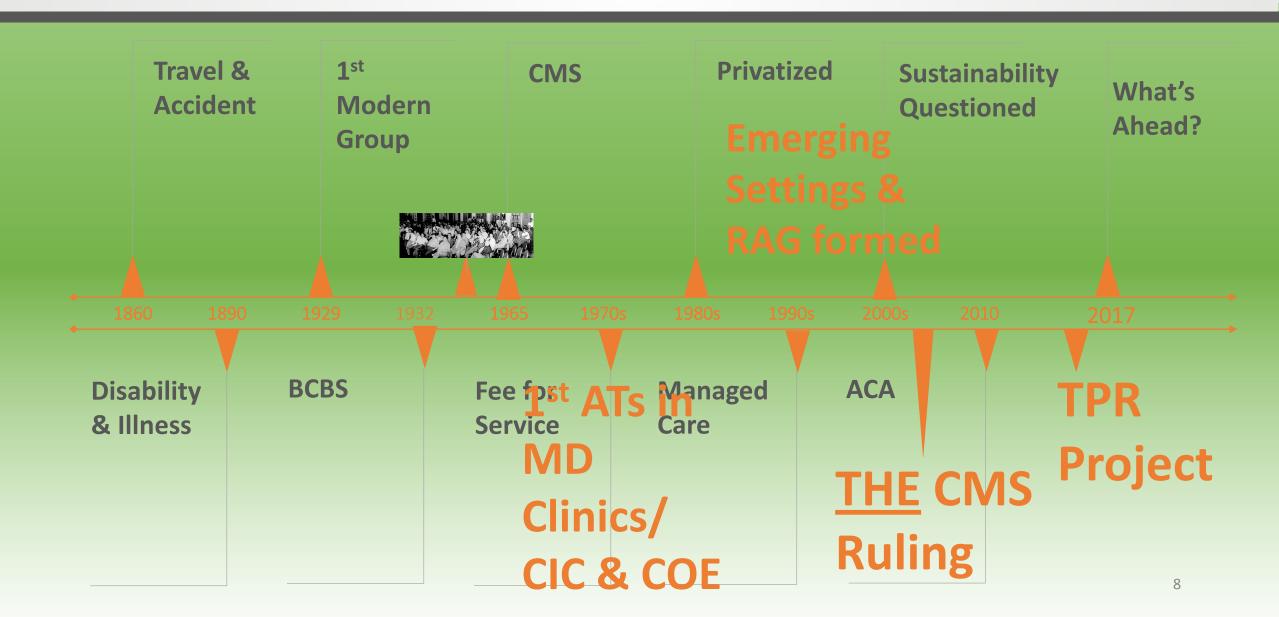




Healthcare



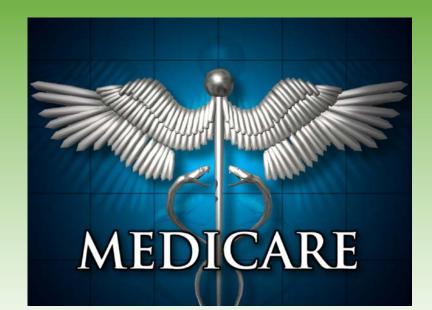
ATs in Healthcare



What happened?

 2002—CMS approved a policy restricting PM&R to PTs, OTs, and SLPs

- •CMS Lawsuit
- •Legislative Fix
- Regulatory activity



Good News/Bad News

Bad

Legislative Fix Difficult



Good

Only applies to fee for service

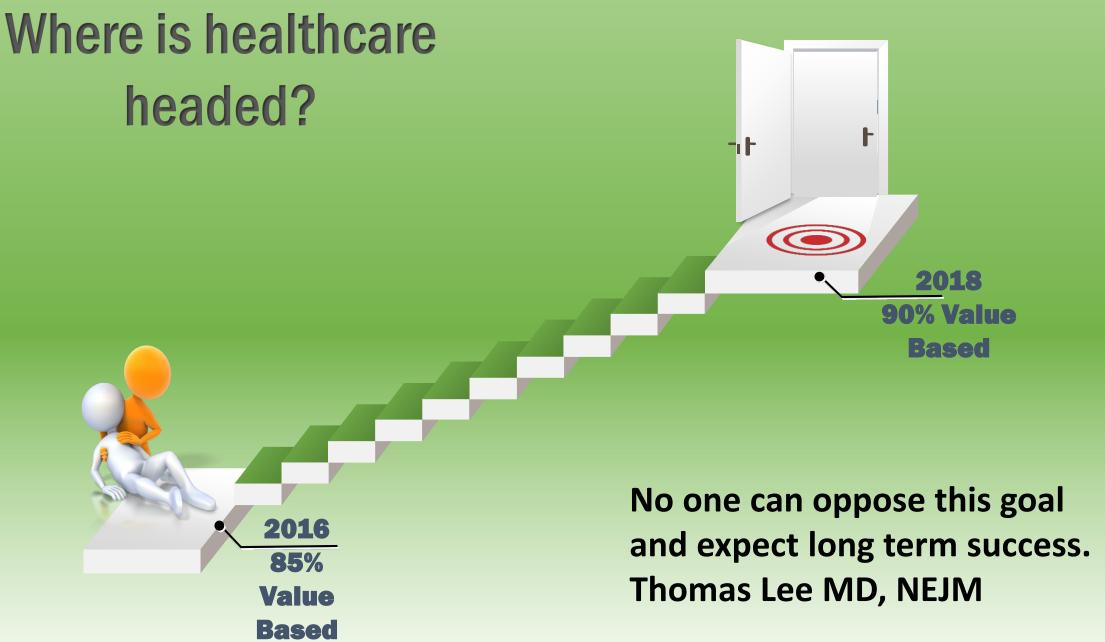


Value Based

Fee for Service



N



Quadruple Aim

Improve Health

Improving patient experience

- Quality
- Safety
- Decrease Costs
- Care <u>OF</u> the provider



OPPORTUNITY

VAL

Climbing the Stairs of Healthcare

Provide a necessary and valuable healthcare service

Embrace our strengths as providers.



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Where in The Value in Health Care?

■ Forbes



Harvard Business Review

HEALTH

SEPTEMBER 17, 2018

Healthcare, Piscal, And Tax JUL 21, 2014 © 12:01 AM 14,705 VIEWS

Where Is The Value Health Care?

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🚱 Yevgenly Feyman, Contributor

It seems that everywhere you look "va based purchasing" (or value-based car hailed as the savior of U.S. health care it, comes the promise of a system that for quality rather than volume. Follow money tells the same story - cloud-ba EHR giant Athena Health, for instance beat Q2 revenue estimates by about \$ million, and saw revenue up nearly 27 percent from the same period last year broadly, hospitals appear to be investi heavily in tracking the value of the car deliver: a Leap Frog Group survey not the number of hospitals using comput physician order entry has increased fr percent in 2009 to 43 percent in 2013

If nothing else, however, the prospect value-based care is an appealing mess After all, for decades, American health

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Getting Real About | Value

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by David Blumenthal and Kristof Stremikis

Words can spearhead social transformation. Let's hope tha other mantras - such as quality or managed care - have fails stakeholders, value may have a chance.

What seems special about the term is that, seemingly simpl Under its umbrella, a wide range of interested parties can fi improved patient outcomes to coordination of care to effici intuitively appealing. As Thomas Lee noted in the *New Eng* oppose this goal and expect long-term success."

The question, of course, is whether the term will help spur care sector so desperately needs. In this regard, a closer exits appeal but also exposes the daunting challenges facing b

Michael Porter has defined value as "health outcomes achient introductory microeconomics will hear echoes in this phra: introductory microeconomics will hear echoes in this phra: efficiency: output per unit of input. An efficient business gets the most output possate, given current technology, from every dollar spent.

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How to really measure the value in health c

By VIMAN 6, LEE MLB.A., M.D., PH.D.

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HOSPITALS

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Nearly two years ago, we e

moment in our history wh

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Peter Drucker once seid, "

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The Meaning of "Value" Health Care

The Meaning of "Velue" in Health

By PAUL KECKLY

There are terms in healthcare circles that get the around as if there's a common and widely accept definition.

Consider "quality:" every hospital touts its quali every physician confidently affirms their deliver high quality care, and every trade and profession sector in healthcare has its own definition that a with attributes of quality they deem most impor "Quality" is touted on every website and in every boardroom, but rarely is it defined and measure

"Outcomes" is another. Most ascribe positive ou the indicators on which they're based and the tin captured—days, weeks, months, or years—varier reliable measures are ephemeral: process measu because they're easier for regulators, policymaka "advising a patient to stop smoking or lose weig! with the actual outcome.

"Cost" is a third example of these elusive but widely used terms. It seems simple enough, but not so fast. When used by some, it's inclusive of only direct costs that can be easily captured in the supply chain, like parts, drugs, disposables; or things easy to count, like length of stay, prescriptions or the number of calls run through a call center. But "costs" get tricky when corporate overhead, R&D and





Value in health care: Time to exploratelying the curleos



Value in health care: Time to stop scratching the surface

Anupam B. Jena, Tomas J. Philipson April 7, 2016 4:41 pm | Forber

"Paying for value" has become a ubiquitous saying in healthcare. The federal government now financiall incentivizes (http://www.nejm.org/doi/full/10.1056/NEMp15004457query=featured_home&h hospitals to deliver "high-value" care through a series of programs including the hospital value-based purchasing program. By the end of 2018, half of all Medicare fee-for-service payments to physicians will be tied to quality or value (http://www.forbes.com/sites/brucejansen/2015/01/26/medicares-boit-from-fee-for service-means-SO-perment-value-based-ouv-by-2016/#22aa6376ab0). But perhaps no other sector than pharmaceuticals has hed as much scrutiny in trying to quantify value. We argue that our current notions of how drugs should be valued fail woefully short.



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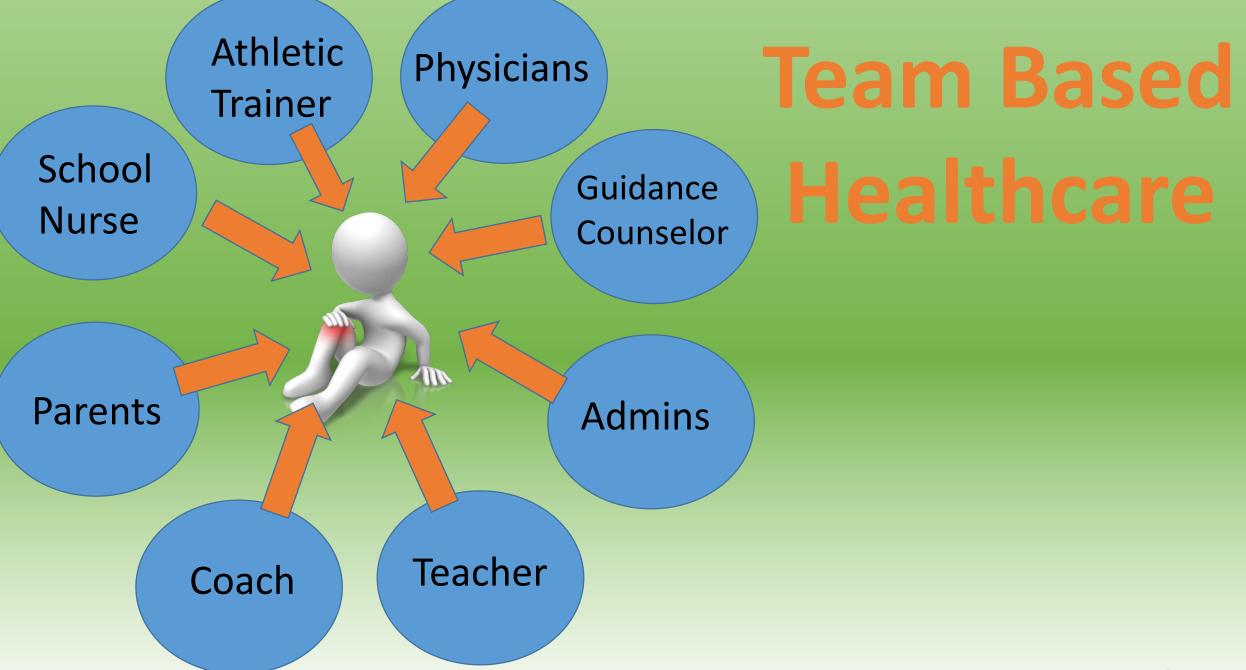
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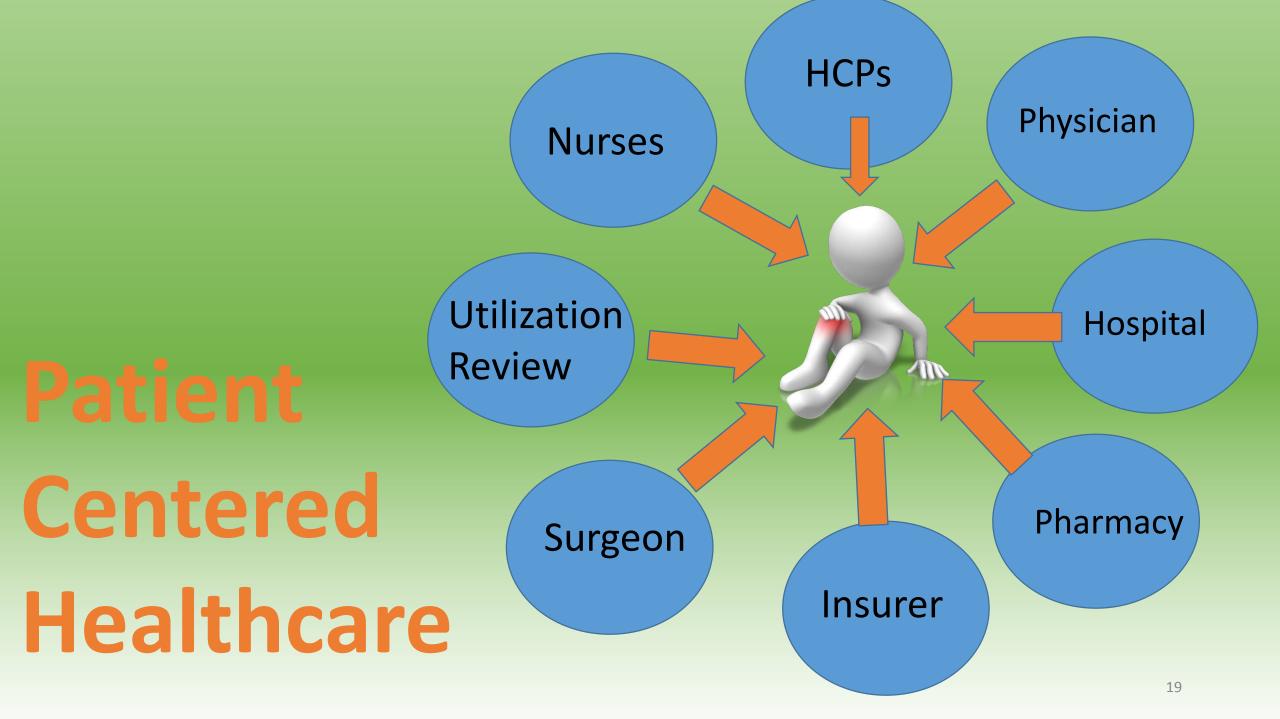
The rising costs of specialty drugs - which accounted for 4% of all health care spending in 2014 - have led many observers of the pharmaceutical industry to question the value that new drugs provide and the impact on health care budgets (or 'budget impact,' as the terminology goes). With these drugs effecting potentially large markets - e.g., PCSK-9 inhibitors for high cholesterol and new medications for hepatid

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"Team-based health care is the provision of health services to individuals, families, and/or their communities by at least two health providers who work collaboratively with patients and their caregivers—to the extent preferred by each patient to accomplish shared goals within and across settings to achieve coordinated, high-quality care."

Institute of Medicine of the National Academies





Worth Vs Value



Source: Linda Mazzoli ATC, PES

What is Value?

Quality / Cost



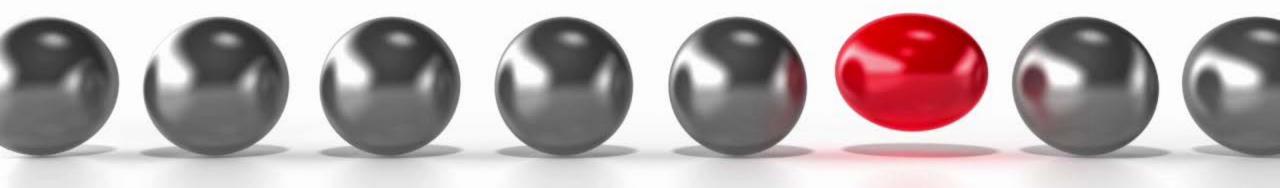
Jon Schultz MD

THE VALUE EQUATION RECONSIDERED FOR HEALTH CARE

Value = Quality* Payment**

*Patient outcomes + safety + experiences** Cost to all purchasers & providers

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Demonstrating Your Value

Data Collection

- Patients seen
- Hours worked
- Treatments provided
- ROI--\$\$\$
- Value Models
- Advocacy
- Outcome Surveys
- Outcome Data

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How do we Make





- Higher salaries
- Improved job conditions-staffing, hours, budget, etc.
- 100% saturation in high school, middle school, club sports
- ATs report to HCPs, not coaches
- ATs are <u>THE</u> voice for college athletes' healthcare
- Improved credibility
- Insurance payer recognition

HOW? Focus on our Value!

Expertise

- Prevention
- Concussion Management
- Return to Play
- •Emergency Care
- Rehabilitation

Prevention Risk Mitigation •FMS Med. opponence
Streng... & Conditioning

Continuum of Caro

- Injury Prevention
- On site evaluation

- Referral source
 Referration of the second secon
- Only who sees their patients throughout the entire continuum of care

Per AMA President

Mid-level provider short
By 2025, shortage

106,000

Advocacy



Healthcare Reform Workgroup

- Athletic Trainers
 Physicians
 Insurance Representatives
- Regulatory Agencies

- Embrace Value Based Healthcare
- Identify Opportunities
- Take Advantage of Opportunities
- Demonstrate Patient Outcomes
- Demonstrate your value!





Accountable Care Organization Juplication of are More Cost effective Coordinated among **HCPs**

https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/ACO/index.html

5 Key Functions of Medical Home

 Comprehensive Care Patient Center
Coordir
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Rural Based Healthcar

Primary Care Throw or other of the other oth Lare



How do we bridge the gap?

Secondary Schools Foundation of Adv 70% of Sec 37% POULT Acceleration Acce . Schools access Joi have FT AT se 100%

College/University Voice of athlete health Small college/union
similar resc
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Population
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How Can You Make

- •NPI
- Functional outcome sur
- Appropriate docu
- Healthcare
 Profe Lure & behavior
- •Evider Lu Practice
- Inter-possional Education
- International

Happer

And.....

Medical Model (College ary School) , club, rec. sports •AT in EVEP •Out call to Action Hearncare Reform Workgroup

The real opportunity is next time, not last time.

Resources

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