

TAHP Medical Director Forum

September 13 – 14, 2010

Westin – DFW Airport

4545 John Carpenter Freeway Irving, Texas 75063

Phone: (972) 929-4500

<http://www.westindallasfortworthairport.com/>

AGENDA

Monday September 13th

6:00 - 8:00 NETWORKING RECEPTION

Tuesday September 14th

7:45- 8:30 BREAKFAST

8:15 – 8:30 WELCOME AND INTRODUCTIONS

Fred Buckwold, MD, Facilitator

8:30 – 9:30

Colorado Low Back Collaborative - A Candid Overview and Lessons Learned

James S. Ogsbury, III, MD, Program Manager of the Colorado Low Back Collaborative

9:30 - 9:40

BREAK

9:40 - 10:30

Provider Input and Participation – Gaining Insight into Provider Engagement

Marian Wells, MHS, PA-C

10:30 –10:40

BREAK

10:40 – 11:30

Back Guidelines – Clinical Rigor, Meaningful Use ... and Other Intangible Factors

Elizabeth Kraft, MD

12:00 – 12:50

LUNCH PRESENTATION

Stanford Clinical Outcomes Research Model

1:00 – 1:45

Data Functionality as a Platform for Program Success

Byron Jones, MD

1:45 – 2:00

DISCUSSION WRAP UP

James S. Ogsbury, III, MD,

2:00 – 2:15

ANNOUNCEMENTS/WRAP-UP

Fred Buckwold, MD, Facilitator

Gail Wilensky - former MEDPAC, PPRC Chair, & former White House Deputy

**** Special guest presentation and welcome reception for TAHP invited guests ****

LOCATION:

DFW-Westin

DATE:

September 14, 2010

PRESENTATION:

3:00 p.m. – 4:30 p.m.;

RECEPTION:

4:30 – 6:00 p.m.



Texas Association of Health Plans

Medical Directors Quarterly Forum

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TAHP

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SPEAKER BIOS AND PRESENTATION SUMMARIES

James S. Ogsbury, III, M.D.

Dr. Ogsbury is a Board-Certified Neurosurgeon who, after 30 years of surgical practice specializing in neurosurgical management of spinal tumors and spinal problems, became the specialty medical director of a physician IPA, then a neurosurgical consultant in the occupational medicine arena. He is currently the program manager of the Colorado Low Back Collaborative (CLBC).

The Colorado Low Back Collaborative – A Candid Overview and Lessons Learned

Dr. Ogsbury will lead a discussion about the nearly four years of planning, development and difficult implementation of a collaboration between a large suburban hospital, its primary care and specialty physicians, including non-injecting physiatrists, as well as other pain specialists, psychologists, chiropractors and physical therapists – plus two insurance plans, a Colorado software company, and the 4-person program management team. The presentation(s) will elaborate on the CLBC protocol/clinical pathway designed, and agreed to and utilized by all CLBC participants. It will also describe the CLBC involvement in assisting two other programs which have chosen to use the basic characteristics of the CLBC.

Marian Wells, MHS, PA-C

Marian Wells is a Duke University trained, Masters-level certified Physician Assistant who has worked as a healthcare provider in a primary care family practice and also in an occupational medicine practice. Marian is currently a case manager for the largest work compensation insurance company in Colorado. This experience has led to a particularly unique understanding of the primary care physician, as the practitioner critical to successful management of patients in the CLBC.

Provider Input and Participation – Gaining Insight into Physician Engagement

The current state of the primary care provider is one of stress, time limitations, and decreasing reimbursements. Add to this the typical low back pain patient along with an aging population and you have one worn out primary care provider. The CLBC continues to coordinate closely with participating primary care providers – actively exploring treatment guidelines to offer better outcomes for the patient *and* the provider.

Elizabeth Kraft, M.D.

Dr. Kraft is a Board-Certified Family Physician who is currently a medical director for Anthem Blue Cross – Colorado. She is also Board President of Health TeamWorks, a non-profit Colorado organization specializing in practice transformation and medical home implementation. She has also worked as a guidelines developer for Milliman as well as an examiner in the NCQA Low Back Pain Program.

Back Guidelines: Clinical Rigor, Meaningful Use ... and Other Intangible Factors

You can lead a horse to water ... implementation of a PCP managed low back pain program, which includes all of the presumed necessary ingredients for a successful program, does not always guarantee success. *A culture of readiness trumps process.* The technical side of the CLBC included clinical rigor, integrated and meaningful use measures, an incentive for care management, NCQA recognition compliance, shared decision-making elements, emphasis on psychological status, collaboration, as well as components of comparative effectiveness via an internet-based platform. But the intangible factors of physician leadership and culture need to be addressed prior to successful program implementation. Network management and structure also pay an important role.

Byron Jones, M.D.

Dr. Jones is a Board-Certified Physiatrist who has been interested in outcome management for the past 14 years. He has 20 years of experience in private practice, specializing in the outpatient management of musculoskeletal disorders. He formerly serviced for 10 years as Medical Director/Chief Medical Officer for the Auto Division of a large managed care organization in Colorado. He is the founder of Salvus Software Solutions and is also a clinical participant as a physiatrist in the CLBC.

Data Functionality as a Platform for Program Success

Simplicity and multiple data functionality are key factors in successful clinical/IT implementation – especially given the present healthcare system environment. Dr. Jones will describe the custom designed software program essential for CLBC care management, data recording, as well as patient/physician education and shared decision-making. The goal of this software program was to electronically duplicate the clinical pathway in a manner that allowed current data capture, trending and outcomes analysis.