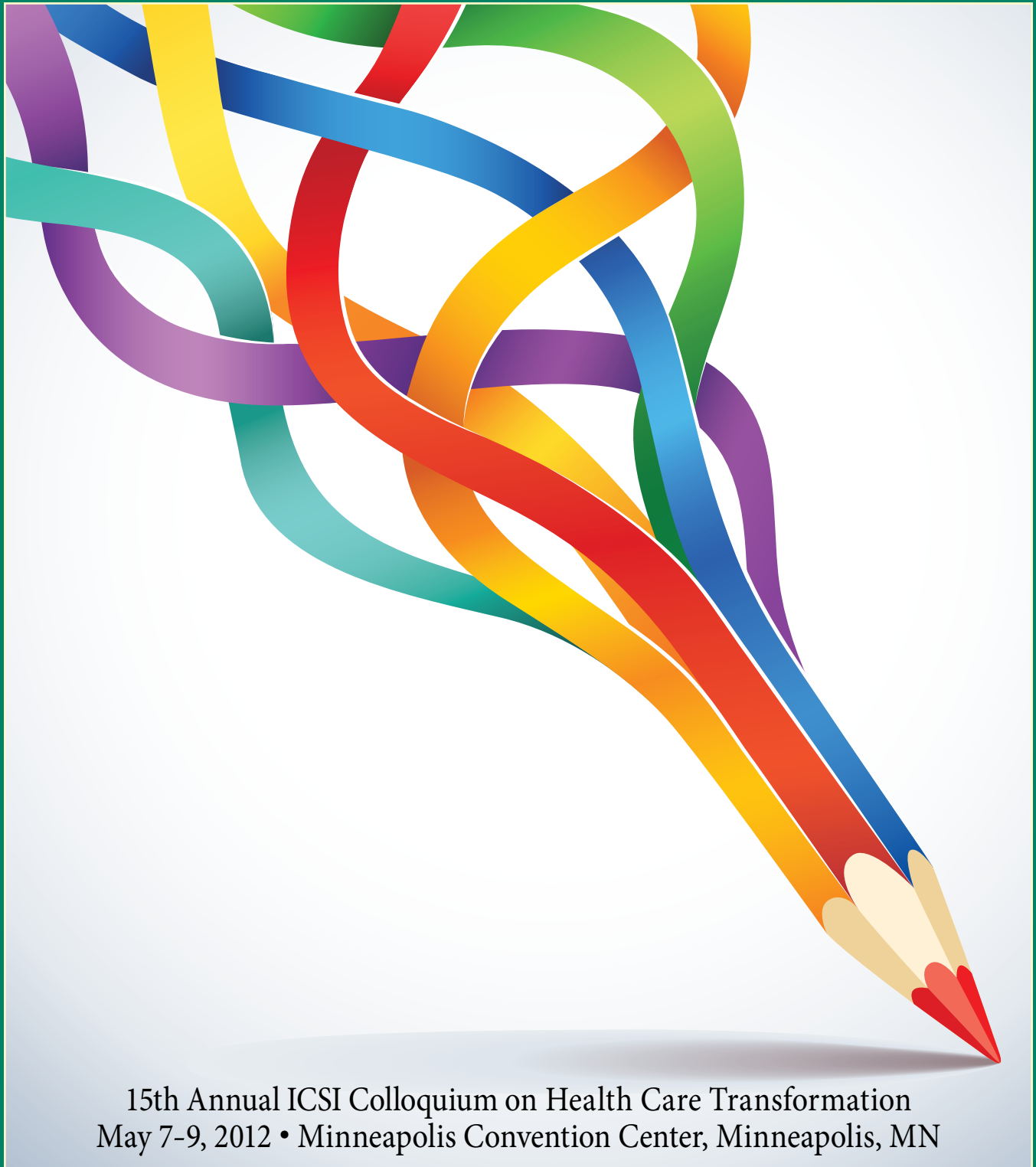


Co-creating our Future

Engaging Patients, Accelerating Change, Improving Value



15th Annual ICSI Colloquium on Health Care Transformation
May 7-9, 2012 • Minneapolis Convention Center, Minneapolis, MN



Introduction

We in health care share a common vision—that of a healthy tomorrow for our patients and communities. The challenges to reach that vision are complex, yet there are strategies to overcome them, such as embracing the Triple Aim, focusing on both health care and health, forging new collaborations to accelerate change, and engaging patients to co-create our envisioned future.

The 15th Annual ICSI Colloquium provides insights into all these strategies and more. In true Colloquium fashion, it showcases innovative care delivery and payment models, inspires with outside-the-box thinking, and provides the collaborative networking that makes this event a leading national meeting on health care transformation.

Regional and national experts are addressing topics ranging from accountable care organizations (ACOs) and total cost of care, to risk sharing, the future of primary care and preventing avoidable hospital readmissions. The program also focuses on quality improvement and safety, and there are presentations addressing the growing importance of enlisting community partners and engaging patients in their care in order to reshape our health system.

New This Year: A Bonus Track

This year ICSI has added a fourth track on integrating behavioral health and primary care. It will address such topics as applying collaborative care models like DIAMOND to behavioral health conditions beyond depression, integrating behavioral health into medical home models and ACOs, and bringing quality improvement processes and measurement into the behavioral health field.

- Q** Quality/Safety *Track*
- L** Leadership/Accountability *Track*
- P** Patient Engagement/Consumer Experience *Track*
- B** Behavioral Health/Primary Care *Track*





Who Should Attend

- All stakeholders involved in transforming health care
- Medical group and hospital senior executives, administrators and medical directors
- Clinicians, including primary and specialty care physicians, behavioral health specialists, nurses, care managers and others
- Quality improvement and quality assurance management staff
- HIT/EHR personnel
- Health plan executives
- Policymakers and health educators
- Other stakeholders in health care and health, including employers, public health officials, citizen advocacy groups, patients and health care media

Objectives

At the conclusion of the Colloquium, participants should be able to:

1. Describe new innovative methods for meeting one or more of the Triple Aims.
2. Identify innovative and participatory approaches for involving consumers in co-creating solutions that foster healthier communities.
3. Understand how to integrate behavioral health into primary care and/or expand proven models for treating patients with depression to treat other behavioral health or chronic diseases.
4. Discuss the essential role and characteristics of leaders, including executives, staff and citizens, required to successfully lead advancements to achieve the Triple Aim.
5. Discuss ideas and designs for achieving the Triple Aim, ranging from improving population health, the patient experience and the affordability of care, that have been developed and implemented by health care organizations, and identify at least one idea that could be used in his/her own health care organization.
6. Describe how to use social media, shared decision making and an understanding of culture change to engage an increasingly disparate patient population.
7. List one or two ideas that could be implemented in his/her health care organization to help sustain better care at a lower cost.

About ICSI

The Institute for Clinical Systems Improvement (ICSI) is a non-profit, quality improvement organization working with medical groups, hospitals, health plans and others in the health community to achieve the Triple Aim of improving population health, the patient care experience and the affordability of care. As the Upper Midwest's leading health care collaborative, ICSI brings diverse stakeholders together to find solutions to complex system problems that no single group can solve alone. ICSI is comprised of 55 medical groups representing 9,000 physicians, and is sponsored by five Minnesota and Wisconsin health plans.

Keynote Speakers

It's easy to embrace the Triple Aim; achieving it is another matter. That's why you're attending the Colloquium. And that's why we're excited about this year's keynote speakers. They are some of the nation's foremost leaders and thinkers on harnessing technology to accelerate improvements in health care, and on how to best leverage today's changing care provider mix to improve quality and lower costs. They're guaranteed to intrigue, educate and inspire you on ways to tackle your tough health care issues.

Todd Park

*Chief Technology Officer
U.S. Health and Human Services
Washington, D.C.*



Unleashing the Power of Data, IT and Innovation to Improve Health

Tuesday, May 8, 9:00 – 10:15 a.m.

If anyone can help illustrate how these three components support the Triple Aim, it's Mr. Park. He was appointed as Chief Technology Officer of the U.S. Health and Human Services Department following the success of Athenahealth, a company he co-founded and which became one of the most innovative, socially oriented, and successful health IT companies in the industry. He has also served as a management consultant on health care strategy, technology, and operations, and as a Senior Fellow at the Center for American Progress, focusing on health IT and health reform policy. Mr. Park graduated magna cum laude and Phi Beta Kappa from Harvard College with an AB in economics.

Thomas Bodenheimer, MD

*Professor of Family and
Community Medicine
University of California San Francisco
San Francisco, CA*



Share the Care: Why High-Performing Teams Are a Necessity in Primary Care

Wednesday, May 9, 9:00 – 10:15 a.m.

Primary care faces a dilemma. For many years there will not be enough primary care clinicians (MDs, NPs, PAs) to care for the needs of the aging population, yet the overly large panel sizes required by this shortage leads to poor access for patients, inadequate care, and an unsustainable clinician worklife. The only way to resolve this dilemma is for every practice to create teams that truly share the care for a panel of patients, thereby increasing the capacity of the practice to see more patients without adding to clinician work. Building teams is difficult, and this presentation, which includes interactive activities with the audience, will provide some tools that assist in creating teams that share the care.

Dr. Bodenheimer is recognized for his leading work in helping to define and support the future of primary care in the U.S. His presentation will share his “deepened” view of how to transform primary care moving forward. Dr. Bodenheimer has been part of the Department of Family and Community Medicine at the University of California San Francisco (UCSF) for the past 20 years. He is the co-author of the book “Improving Primary Care: Strategies and Tools for a Better Practice,” and the health policy textbook “Understanding Health Policy.” He has written numerous health policy articles in the *New England Journal of Medicine*, *JAMA*, and the *Annals of Internal Medicine*. Dr. Bodenheimer graduated cum laude from Harvard Medical School and completed his residency at UCSF.

Pre-Conference Workshops

Monday, May 7, 1:00 – 4:30 p.m.

(Choice of Session 1, 2 or 3)

Session #1: Making Social Media Practical: Health Applications for Transformative Technologies

Lee Aase, Director, Center for Social Media, Mayo Clinic, Rochester, MN
Gary Oftedahl, MD, Chief Knowledge Officer, ICSI, Bloomington, MN

The social media revolution is the defining communications trend of the third millennium. From blogs to Facebook to Twitter to YouTube, the power of worldwide broadcasting and publishing is now available to anyone.

In this workshop, Lee Aase, Director of Mayo Clinic's Center for Social Media, will discuss how and why health care providers can and should harness these revolutionary technologies in their transformation efforts. He will deepen your understanding of social media tools and will share concrete examples of Mayo Clinic's innovative applications, and with ICSI's Gary Oftedahl will lead a group discussion of how they can contribute to improving the patient experience and population health outcomes while reducing per-capita costs.

Mr. Aase is also Chancellor of the Social Media University, Global, a free online higher education institution providing practical, hands-on training in social media.

As Chief Knowledge Officer at ICSI, Dr. Oftedahl applies his knowledge on quality improvement, adaptive leadership and the collaborative process to numerous ICSI health care redesign initiatives. He was named one of the 100 most influential health care leaders in 2008 by Minnesota Physician magazine.

Session #2: Crucial Conversations®: Tools for Talking When Stakes are High

Nickijo Hager, RN, MSN, Vice President of Mission and Organizational Development, Mayo Clinic Health System, Franciscan Healthcare, LaCrosse, WI

This session provides an overview of the research-based Crucial Conversations toolkit that introduces key skills that improve value by ensuring results while creating an environment of mutual respect and honesty. This engaging interactive experience will challenge your current communication patterns and boost your emotional intelligence, enhancing both personal and professional communication.

Nickijo L. Hager, RN, MSN, has served Mayo Clinic Health System, Franciscan Healthcare in LaCrosse, WI as Vice President of Mission and Organizational Development since 1994. Ms. Hager grounds her work in organizational development centered around values integration, team development, communication, spirituality and presence as well as health care ethics. She holds a BS in nursing from the University of North Dakota and a MS in nursing from Marquette University.

Session #3: Co-creating a Medication Management System for the Triple Aim

Brian Isetts, RPh, PhD, BCPS, Health Policy Fellow, Centers for Medicare and Medicaid Services, Baltimore, MD; Professor, Department of Pharmaceutical Care & Health Systems, University of Minnesota, Minneapolis, MN

This workshop will describe how health systems are successfully incorporating comprehensive medication management in care model innovation, and help participants build medication management systems consistent with value-based health financing. Dr. Isetts will lead a faculty that will apply an all-teach, all-learn networking style technique, pairing up audience members with individuals who've successfully addressed medication management challenges; this will provide enhanced learning opportunities. Participants will learn how to address the challenges and obstacles often confronted in creating a successful medication management program.

Dr. Isetts is well qualified to tackle this topic, having spent the past year working within CMS' Innovation Center helping to evaluate medication management in the Partnership for Patients Campaign and in ACOs. As a professor, he has helped expand patient access to medication therapy management services within the practice of pharmaceutical care. Joining him on the faculty will be:

Edward Jungbauer

Health Care Transformation Patient, St. Paul, MN

Terry McInnis, MD, MPH

President, Blue Thorn, Inc., Cary, NC

David Moen, MD

President, Fairview Physician Associates, Minneapolis, MN

Laura Odell, PharmD, MPH

Medication Therapy Management Coordinator, Mayo Clinic, Rochester, MN

Jeff Schiff, MD, MBA

Medical Director, Minnesota Department of Human Services, St. Paul, MN

David Schulke

Vice President, Research Programs, American Hospital Association, Washington, DC

Kris Soegaard

Chief Operating Officer, Buyers Health Care Action Group, Bloomington, MN

Linda Strand, PharmD, PhD, DSc (Hon)

Vice President, Professional Services, Medication Management Systems, Inc., Eden Prairie, MN

Four Tracks for More Learning Opportunities

This year's breakout sessions are organized in four tracks. You can attend sessions in any track you desire. The tracks are indicated by icons to help guide you through the program.

Q Quality/Safety

L Leadership/Accountability

P Patient Engagement/Consumer Experience

B Behavioral Health/Primary Care

7:30–8:30 a.m. Continental Breakfast

8:30–8:45 a.m. Welcome and Announcements

Brian Rank, MD, Chair, Board of Directors, ICSI, Medical Director, HealthPartners Medical Group and Clinics, Bloomington, MN

Craig Acomb, MS, Chief Operating Officer, ICSI, Bloomington, MN

8:45–9:00 a.m. Setting the Stage

Sanne Magnan, MD, PhD, President and CEO, ICSI, Bloomington, MN

9:00–10:15 a.m. Keynote Address

Unleashing the Power of Data, IT and Innovation to Improve Health

Todd Park, Chief Technology Officer, U.S. Health and Human Services, Washington, DC

10:15–10:35 a.m. Break

10:35–11:50 a.m. Breakout Session 1

Q The RARE Campaign – Reducing Avoidable Readmissions Effectively

Kathy Cummings, RN, BSN, MA, Project Manager, Institute for Clinical Systems Improvement, Bloomington, MN

Mickey Reid, RN, BSN, MSM, Patient Safety/Quality Manager, Minnesota Hospital Association, St. Paul, MN

Karla Weng, MPH, Program Manager, Stratis Health, Bloomington, MN

Reducing avoidable hospital readmissions has become a national quality and cost imperative. In 2011, the Institute for Clinical Systems Improvement, the Minnesota Hospital Association and Stratis Health launched the Reducing Avoidable Readmission Effectively (RARE) campaign, partnering with organizations across the state to reduce 4,000 avoidable readmissions by December 31, 2012. In this presentation, you will hear about the RARE campaign strategies and the progress on the overall campaign goals to date. Additionally, several RARE campaign participants will share their innovative strategies, outcomes and specific lessons learned related to reducing avoidable readmissions.

L Medicaid ACOs – A Public/Private Sector Approach to Achieving the Triple Aim

Paul Erickson, MD, MPH, Medical Director, NorthPoint Health & Wellness Center, Minneapolis, MN

Scott Leitz, Assistant Commissioner for Health Care Administration, Minnesota Department of Human Services, St. Paul, MN

Sanne Magnan, MD, PhD, President & CEO, Institute for Clinical Systems Improvement, Bloomington, MN

Mark Skubic, Vice President, Park Nicollet Health Services, St. Louis Park, MN

John Smylie, MPH, Chief Operating Officer, Essentia Health, Duluth, MN

This session will provide an overview of the work being done at the state and health care provider level to create an ACO model to be used in caring for those citizens who are receiving Medicaid. The participants will describe their individual efforts, and identify the opportunities and challenges confronted in creating their programs. The session will provide an opportunity to hear from multiple perspectives which will increase the audience's knowledge of key elements to be considered in moving this work forward in nine proposed pilots across Minnesota.

P Patient Activation: Leveraging the Patient's Knowledge, Skills and Confidence to Improve Quality, Cost and Satisfaction Outcomes

Judith Hibbard, DrPH, Professor Emerita, University of Oregon, Eugene, OR

Valerie Overton, DNP, CFNP, Vice President, Quality and Innovation, Fairview Medical Group, Minneapolis, MN

Every clinician has wondered about why some patients have success managing their health and others struggle with even simple behavior change. The Patient Activation Measure (PAM) is a valid and reliable tool to measure differences in how patients feel about their knowledge, skills, and confidence in managing their health care. Patient activation has been found to be significantly related to health care outcomes. Dr. Judith Hibbard and Val Overton, DNP will discuss results of PAM research done at Fairview Health Services related to health outcomes. They will describe how PAM can help clinicians tailor patient care to improve clinical outcomes, as well as operational challenges and opportunities using the PAM tool.

B Improving Depression in Behavioral Health Settings

Bryan Gannon, LCSW, Director, Navigation, and Harriet Hall, PhD, President and CEO, Jefferson Center for Mental Health, Wheat Ridge, CO
Melinda Beard, MHA, Financial and Quality Analyst, and John Schmitz, MD, Medical Director, Adult Psychiatry, St. Cloud Hospital/CentraCare Health System, St. Cloud, MN

Mental health clinics both locally and nationwide have participated in ICSI's depression collaborative, drawing from key components of DIAMOND for primary care. Hear from mental health leaders on how they establish reliable screening and make systematic treatment decisions to advance clinician accountability and improve patient experience. This session provides a key opportunity to bridge best practices between primary care and behavioral health.

11:50 a.m.–12:50 p.m. Lunch

12:50–1:50 p.m. Breakout Session 2

Q A Showcase of Work Designed to Achieve the Triple Aim

Numerous health care organizations have implemented programs to accelerate efforts that improve the health of the population, the care experience and the affordability of care. This poster session will enable you to visit one-on-one with representatives from such care delivery organizations as Mayo Health System and Olmsted Medical Center, health plans, the Minnesota Department of Human Services, and other stakeholders on their quality improvement and care redesign initiatives. The session provides a great opportunity — and sufficient time due to the breakout session — to learn best practices from your peers that can be implemented in your own organization.

L Advanced Leadership for Advanced Primary Care: A Case Study

Macaran Baird, MD, MS, Professor and Head, and C.J. Peek, PhD, Associate Professor, Department of Family Medicine & Community Health, University of Minnesota, Minneapolis, MN
Ralph Jacobson, MCP, MA, MAIR, Principal, The Leader's Toolbox, Inc., Minneapolis, MN

Primary care clinics are moving toward health care home and the Triple Aim. This requires major shifts for clinicians and staff as they create higher levels of teamwork with each other, with patients, and with their external partners — while taking on unfamiliar business and operational models such as “accountable care” and Lean. Clinician leaders and administrative partners lead this change, but their usual methods are better suited to technical adjustment than adaptive challenge. This is the story of implementing a practical set of leadership tools robust enough to embrace change, address issues historically avoided, and actively involve the entire organization in its own transformation.

P An Integrated Framework for Reducing Health Disparities

Beth Averbeck, MD, Associate Medical Director, Primary Care, HealthPartners, Bloomington, MN
Dave Johnson, MBA, Regional Clinic Director, HealthPartners, St. Paul, MN

In 2001, HealthPartners Medical Group established a foundation and plan for ensuring that care and service is of equally high quality for all populations, regardless of a patient's insurance coverage, race/ethnicity, and preferred language. Over the last 11 years, we have sustained our focus on achieving equity, and with each year we have seen progress toward that goal.

Leveraging data has been a consistent strategy throughout each stage of our work. Beginning in 2004, we worked closely with the community to establish a set of demographic categories, and then implemented standardized processes to collect self-reported data from patients. In 2007 we started analyzing health care disparities by demographic group, enabling innovation teams to work in partnership with communities to design interventions specifically targeted at subpopulations of patients with worse outcomes. Over the last year, we have implemented EBAN, a learning collaborative that partners community advisors with local care teams, to test specific strategies. As part of this session, we will present our structure and process to collect and analyze the data and share successful strategies for mammography, colorectal cancer screening, pediatric immunizations, and diabetes care.

Reducing disparities is not only the right thing to do, but it is also a practical, data-driven method for increasing our global performance in quality. From this perspective, reducing disparities is a key strategy that every health care organization should consider.

B From Implementation to Optimization: Why Integrating Mental Health in Primary Care is Critical for the Development of a Health Care Home

Timothy Hernandez, MD, Medical Director for Quality, Family HealthServices Minnesota, St. Paul, MN
Laura Quigley Swanson, BS, Care Manager, Family HealthServices Minnesota, White Bear Lake, MN

We will discuss how our organization used a collaborative model for depression management to improve our providers' skills, introduce a model of team-based care, integrate psychiatric services into our primary care group and develop a population approach for depression. The model is evolving to include screening and providing brief interventions for substance abuse and has become a foundation for the development of our Health Care Home.

1:50–2:10 p.m. Break

2:10–3:10 p.m. Breakout Session 3

Q Engaging and Activating Patients: The Power of the Chronic Disease Self-Management Program

Lynn Balfour, MBA, Executive Director, Minnesota Academy of Family Physicians Foundation, St. Louis Park, MN

Donald Clark, Master Trainer, Chronic Disease Self Management Program, Native American Community Clinic, Maplewood, MN

Carolyn Kampa, MD, Family Physician, Allina Health, Cambridge Medical Center, Cambridge, MN

Pamela Van Zyl York, MPH, PhD, RD, LN, Supervisor, Minnesota Department of Health, St. Paul, MN

In this presentation we will describe the Stanford Chronic Disease Self-Management Program and how it is being implemented in Minnesota. This program is being offered to adults with ongoing health conditions across the state by a variety of community organizations including health care clinics. Many of these clinics are using the program to engage and activate patients as they implement their health care home practice. This evidence-based program is supported by 20 years of research demonstrating positive health outcomes and cost effectiveness. Participants show significant improvements in self-rated health, symptom management and self-efficacy, and a reduction in ED and physician visits and hospital stays. They improve health behaviors including physical activity and healthy eating and report less stress and pain. Participants learn key self-management strategies including goal setting, action planning and problem solving. Physicians report increased patient engagement in their health and more productive interactions with their patients.

You will hear from those coordinating the program implementation in Minnesota, a participant who has gone on to be trained as a program leader and trainer, and a physician who has worked with patients who attended a Chronic Disease Self-Management Workshop. We'll discuss how this program is being integrated into health care settings to support improved patient outcomes and effective utilization of health care resources. And, you'll learn how you can become involved.

L Co-Creating the Health Commons

David Labby, MD, PhD, Medical Director and Director of Clinical Support and Innovation, CareOregon, Portland, OR

This presentation will describe the development of Coordinated Care Organizations (CCO) in Oregon, focusing on the regional effort to build an integrated physical / behavioral / dental system for the Medicaid population of the three counties surrounding Portland, Oregon: what brought all the major hospitals, health systems, providers and payers into a single collaborative to launch the new CCO; the community-based model of care created in response to the immediate necessity to operate at significantly lower funding; and the governance structure that is being collectively created to enable that transformation. This presentation should be informative to anyone involved in bringing together diverse and sometime competitive parties into new forms of accountable care with the goal of improving patient experience and outcomes and lowering costs.

P Honoring Choices & Public Television: An Innovation in Health Care Transformation

Bill Hanley, Vice President, Twin Cities Public Television, St. Paul, MN

Kent Wilson, MD, Medical Director, Honoring Choices Minnesota, Twin Cities Medical Society, St. Paul, MN

End of life (EOL) discussions are difficult though beneficial to families, health care teams and care facilities when well done. The Twin Cities Medical Society, through its Honoring Choices (HCM) Advance Care Planning (ACP) program, has partnered with public television (TPT Channel 2) to initiate a community conversation about ACP & EOL issues. Learn how medical resources combined with personal stories and presentations are used to demystify taboo issues, inspire participation in family discussions, model family discussions, support families with an online "toolkit" and prepare families and caregivers to make EOL decisions and complete health care directives. This partnership, with its many facets, may provide a key step on the path to a more patient-centric care system.

B Using the Evidence to Manage Anxiety in Primary Care

Carrie Bronars, PhD, Postdoctoral Fellow; Jay Mitchell, MD, Family Medicine; and Mark Williams, MD, Assistant Professor, Mayo Clinic, Rochester, MN

Anxiety disorders are extremely common and affect almost 29% of the population by age 75. In primary care, it is common to come across a patient with anxiety, but on-site resources to manage this problem with evidence-based treatments are rare. The Coordinated Anxiety Learning and Management (CALM) model for the care of anxiety patients in primary care has been shown to improve anxiety outcomes for panic disorder, PTSD, GAD and social phobia in research studies. The Integrated Behavioral Health group at Mayo Clinic, Rochester, endeavored to be the first clinical site to translate this model into practice. This presentation will include a review of this model by a psychologist involved in the project. We also will ask one of our primary care providers to describe the impact on his practice when we introduced these services into one clinic, and a psychiatrist familiar with the DIAMOND project will discuss how this intervention and the DIAMOND services (also present in that clinic) interconnect. Our hope is to provide the audience with useful information about this model in considering ways to implement such services in their own clinics.

3:10–3:30 p.m. Break

3:30–4:30 p.m. Breakout Session 4

Q It's Not About Us – Patient Driven Care within a Community Context

Alan Glaseroff, MD, Director, Stanford Coordinated Care, Stanford School of Medicine, Stanford, CT

Dr. Glaseroff will discuss the approach and results from a decade of regional population health improvement efforts in Humboldt County, CA, one of the 17 regions in the U.S. participating in the “Aligning Forces for Quality” initiative sponsored by the Robert Wood Johnson Foundation. Dr. Glaseroff will focus on building a system with intentionality that is organized around the concept that “patients are the most important factors in their own outcomes.” This approach stresses a partnership between patients and providers on all levels of health care design and implementation. The experience in Humboldt serves as a model for organizations and regional health initiatives seeking to achieve the Triple Aim of population health, patient experience, and lowering the per capita cost of care.

L Minnesota's Leadership Role in Health Care Transformation

Brian Isetts, RPh, PhD, BCPS, Health Policy Fellow, Centers for Medicare and Medicaid Services, Baltimore, MD; Professor, Department of Pharmaceutical Care & Health Systems, University of Minnesota, Minneapolis, MN

The purpose of this program is to describe the impact that care model innovation in Minnesota is having on national initiatives to redesign health delivery and financing. During this workshop session, participants will be challenged to extend these contributions using a semi-structured group think process. The prerequisite for attendance at this session is a willingness to share bold approaches for achieving results consistent with the Triple Aim.

P Long Stories

Regina Holliday, Artist Patient Activist, Washington, DC

This session will emphasize the role of the electronic health record (EHR) in the life story of a patient. Speaking from the experience Regina Holliday gleaned from caring for her husband in five facilities at the end of his cancer journey, she will focus on the power of the patient story in improving medical care. She will further stress that these stories, both visual and verbal, are the heart and soul of the EHR.

B Implementing and Sustaining Behavioral Health Integration

Neil Korsen, MD, MSc, Medical Director, Program for Integration of Medical and Behavioral Health, MaineHealth, Portland, ME

This presentation will describe MaineHealth's Program for the Integration of Medical and Behavioral Health, a system-wide quality improvement program that has helped several dozen primary care practices to integrate behavioral health clinicians as members of the primary care team. Dr. Korsen will describe clinical, operational and financial factors that lead to successful integration. He will discuss how the program works at multiple levels of the health care system, with front line primary care providers and staff, practice leadership, and organizational leadership, to achieve sustainable models of integration. Practical tools that can be used to support integration will be shared.

7:00 a.m. Continental Breakfast

7:30–8:30 a.m. Breakfast Discussions

Maximizing ICSI Membership

Jim Bluhm, MPH, Team Director; Gail Hunt, Project Manager; and Claire Neely, MD, Medical Director, Institute for Clinical Systems Improvement, Bloomington, MN

This forum will update ICSI members on the range of member opportunities available to them and how they can maximize the benefits they receive from participating in them. Representatives from several ICSI member medical groups will share how their involvement in such ICSI activities as strategic initiatives, pilots, work groups and creating evidence-based scientific documents — as well as their self-selected internal initiatives — benefited them professionally, and advanced their organization’s quality improvement and health care redesign efforts. ICSI staff will share how the opportunities can benefit ICSI members and how they connect to achieving the Triple Aim. They will also provide guidance on how to engage in membership opportunities to gain maximum value, and how best to partner and communicate with ICSI Member Relations staff to remain aware of opportunities. The breakfast will also offer an excellent opportunity to network with other ICSI members.

Leadership for Tomorrow, Not Today

Scott Ketover, MD, AGAF, President and CEO, Minnesota Gastroenterology, Minneapolis, MN
David Moen, MD, President, Fairview Physician Associates, Minneapolis, MN
Keith Oelschlager, MD, CEO, Family Health Services Minnesota, St. Paul, MN
Gary Oftedahl, MD, Chief Knowledge Officer, Institute for Clinical Systems Improvement, Bloomington, MN
Rachelle Schultz, CEO, Winona Health, Winona, MN

Today’s complex environment requires leadership which will address previous values, beliefs, and behaviors and the need to see changes in many of these. Based on the adaptive model of leadership, the panel will discuss how they have led work in addressing the adaptive challenges which are facing us in health care today. You’ll have an opportunity to hear a discussion from four seasoned leaders in different types of organizations which will be of value in your leadership work in your own organization.

Engaging Conversations Engage Patients

Jan Schuerman, MBA, Team Director, and Cally Vinz, RN, Vice President, Health Care Improvement and Member Relations, Institute for Clinical Systems Improvement, Bloomington, MN

Engaging patients as partners in making health care decisions remains elusive for many. Learn about ICSI’s Collaborative Conversation™ Model which provides the underpinnings and workflow for truly engaging the patient. Our session will help

you develop an understanding of why a behavioral approach to Shared Decision Making (SDM) helps facilitate patient/family centered care. The Collaborative Conversation™ approach can be applied throughout the care continuum in a wide range of health care situations. This session will help you develop a behavioral approach for integrating patient centeredness into usual care; utilize the Collaborative Conversations Map as a road map to improved patient care; and identify opportune times to introduce decision aids into the Shared Decision Making process.

8:30–8:45 a.m. Break

8:45–9:00 a.m. Opening Remarks

9:00–10:15 a.m. Keynote Address

Share the Care: Why High-Performing Teams are a Necessity in Primary Care

Tom Bodenheimer, MD, University of California, San Francisco, CA

10:15–10:35 a.m. Break

10:35–11:50 a.m. Breakout Session 5

Using TCOC Data to Drive Affordability: Puzzle or Mystery?

Paul Berrisford, MBA, Chief Operating Officer, Family Health Services Minnesota, St. Paul, MN
Howard Epstein, MD, Chief Health Systems Officer, Institute for Clinical Systems Improvement, Bloomington, MN
Susan Knudson, Vice President, Health Informatics, HealthPartners, Inc., Bloomington, MN
Ann Robinow, President, Robinow Health Care Consulting, Edina, MN
Daniel Trajano, MD, MBA, Senior Medical Director of Quality, Care Innovation, and Population Health, Park Nicollet Methodist Health Services, St. Louis Park, MN

The IHI Triple Aim strives to “reduce, or at least control, the per capita cost of care” for a population. Two suggested measures for per capita cost include: total cost per member per month (PMPM) and hospital and ED utilization rates. However, there are many possible measures that can be used to address the total cost of care (TCOC) for an individual, for a defined population (focused on disease, condition or demographic status) or for an entire population, as encountered in many shared savings agreements or accountable care organization (ACO) initiatives.

As in clinical quality improvement, data is required to measure and drive focused interventions in order to achieve TCOC improvement. Panelists will attempt to address from different perspectives what kind, how much, and in what format data is needed in order to drive actionable cost containment efforts. They will also demonstrate how TCOC data can be used along with clinical quality improvement and patient experience data to ensure improvement in the actual total value of health care.

L Navigating Complexity: Clinical Integration, Care Models, and Physician Compensation

Mark Werner, MD, CPE, Senior Vice President and Chief Clinical Integration Officer, Fairview Health Services, Minneapolis, MN

Transformational efforts surround every aspect of health care. This requires a sophisticated and nuanced approach capable of addressing the need for clinical integration, enhancing population management capabilities, and creating new care delivery models, all while growing physician engagement and leadership. Often this takes the form of striving for “alignment” by creating shared objectives, new accountabilities, and configuring compensation programs to achieve desired results. Fairview has been deeply engaged in this work, having made notable progress in the development of an integrated multi-specialty network while seeking to leverage innovation and the advances inherent to an academic medical center. If you are managing change, seeking the illusory understanding of clinical integration, building physician leaders, and trying to tie it together with compensation models, we can learn together in this session.

P Unleashing the Culture: Reaching Hearts and Minds Through Patient- and Family-Centered Care Education and Partnerships

Marlene Fondrick, MSN, BSN, RN, Program Specialist, Institute for Patient- and Family-Centered Care, Richville, MN
Sheila Delaney Moroney, MPH, Director, Patient Experience Services, Hennepin County Medical Center, Minneapolis, MN

Learn how to drive culture change by engaging physician leaders and partnering with patients and families. This session will highlight the education, communication, and engagement strategies used at Hennepin County Medical Center (HCMC) to accelerate patient experience improvement and create a high-performing health delivery system. As a Level I Trauma Center and safety net hospital, HCMC serves a hugely diverse patient population from throughout Minnesota and beyond. Socioeconomic and ethnic diversity pose unique challenges in creating a patient- and family-centered care system. Patient and family participation in this culture change initiative has been a key component. Recommended best practices and tools for partnering with patients and families and curriculum design for organization-wide education and engagement will be shared with session attendees.

B Mental Health in the Mainstream of Medicine: Integrating Care and Bridging the Quality Chasm

Harold Alan Pincus, MD, Professor and Vice Chair, Columbia University, New York, NY

New models of health care delivery and financing require expanded linkages between mental health and general medical care. This presentation will discuss progress and challenges in integrating care and improving quality.

11:50 a.m.–1:00 p.m. Lunch

1:00–2:00 p.m. Breakout Session 6

Q Changing Behavior: Safe and Effective Induction of Labor

Penny Wheeler, MD, Chief Clinical Officer, Allina Health, Minneapolis, MN

Dr. Wheeler, leader of Allina Health’s quality work, will discuss Allina’s Clinical Service Line approach, infrastructure, and physician alignment strategy that improved the lives of obstetrical patients and their newborns. The powerful patient impact, influence and behavioral change of physicians, and top lessons learned will be reviewed.

L Value Creation at Mayo Clinic

Stephen Swensen, MD, Medical Director, Office of Leadership and Organization Development, Mayo Clinic, Rochester, MN

The Mayo Clinic Director for Quality will describe Mayo’s Value Creation System that includes a validated Model of Diffusion. Results of improved outcomes, safety, service and a positive financial return on investment will be presented.

P Dean is Listening... The Journey to Exceptional Patient Engagement

Mark Rothwell, MBA, Vice President, Marketing and Communications, Dean Clinic, Madison, WI

The road to an exceptional experience must begin with building a relationship with your patients. If you don’t know what they want, feel or need your road will be a bumpy one. Come and hear how Dean Clinic is building strong relationships by partnering with our patients to proactively capture their thoughts via an interactive online patient panel.

If your organizational vision is to provide an exceptional patient experience you must know what your patient wants or needs and satisfy them each and every time. You can’t rely on a reactive approach that only leverages historical feedback; you must combine it with a more engaging and proactive one.

Word of mouth is still the most effective marketing tool an organization can leverage. Creating a living and breathing online patient panel will not only provide you with timely and engaging insights that will be the foundation of your experience, it will also enhance the relationship with the exact people you are trying to satisfy. If you engage your patients in a thoughtful, two-way dialog that transforms your experience they will become your most valuable asset — a brand promoter. These valuable patient relationships will grow into sustained brand equity that will result in substantial improvements in financial performance.

B Improving Health Outcomes: Connections with Positive Psychology

Sarah Pressman, PhD, Assistant Professor of Psychology, University of Kansas, Lawrence, KS

There is an increasing interest in the integration of behavioral health concepts into the traditional medical model. The focus on co-creating health will require a new level of engagement of our patients as participants in managing their health. Learn about how positive psychological factors impact health outcomes, and how we might introduce them into our clinical work in transforming health care.

2:00–3:30 p.m. Closing Session

Impressions of the Colloquium

Regina Holliday, Artist Patient Activist, Washington, DC

Regina Holliday will be producing three paintings over the course of the Colloquium to provide a patient perspective on what she's seen and heard during the sessions. She will open this session by revealing her paintings and explaining what they illustrate. One of these unique paintings will be raffled off to someone in attendance.

The Path to Higher-Value Health Care: Who Will Win and Who Will Lose?

Harold Miller, President and CEO, Network for Regional Healthcare Improvement, Pittsburgh, PA

There's broad agreement that health care costs are too high. But does that mean cutting services to patients, cutting payments to physicians and hospitals, loss of health care jobs, or all of the above? Harold Miller will show how win-win approaches are possible if all stakeholders can work together in the drive for higher-value health care.

Gary's Book Giveaway

Gary Oftedahl, MD, Chief Knowledge Officer, Institute for Clinical Systems Improvement, Bloomington, MN

ICSI's Chief Knowledge Officer is known for his capacity for reading many books, and contemplating how they can be linked to our work in improving health care. Join Dr. Oftedahl as he hosts a drawing to give away his "top ten" books which have been an inspiration and support in his work at ICSI over the past year and might inspire your work in the years to come.

Poster Session

This year ICSI is making poster boards at the Colloquium available through two venues:

1) as a standalone session opposite other presentations as part of the program, and 2) during lunch and break periods. This gives you more opportunities to learn how ICSI members and others are co-creating new ways of delivering care, becoming accountable care organizations, engaging patients and communities, and managing chronic and complex diseases.

Please make sure you visit the posters through one of these two venues to recognize the excellent work of your peers, and to come away with knowledge on how to similarly improve your organization's practices.

Accreditation

Physician

HealthPartners Institute for Medical Education is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.

HealthPartners Institute for Medical Education designates this live activity for a maximum of 15.00 *AMA PRA Category 1 Credit(s)*[™]. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

American Academy of Family Physicians (AAFP)

Application for CME credit has been filed with the American Academy of Family Physicians.
Determination of credit is pending.

Minnesota Board of Nursing

This program has been designed to meet the Minnesota Board of Nursing's criteria for 18.0 contact hours of required continuing education. It is the responsibility of each nurse to determine whether a continuing education activity meets the criteria established by the Minnesota Board of Nursing.

Disclosure Policy

It is the policy of HealthPartners Institute for Medical Education, Center for Continuing Professional Development to provide balance, independence, objectivity, and scientific rigor in all of its sponsored educational activities. All faculty, course directors, and planning committee members participating in sponsored programs and/or their spouse/partners are required to disclose to the audience any real or apparent conflict of interest related to the content of this activity. Disclosure information is reviewed in advance in order to manage and resolve any potential conflicts of interest, and shared with the audience prior to the activity's presentations.

Colloquium Registration Desk Hours

The Colloquium Registration Desk is located adjacent to Ballrooms A and B on the main floor of the Minneapolis Convention Center.

Monday, May 7..... 10:00 a.m. – 5:00 p.m.

Tuesday, May 8..... 7:00 a.m. – 4:30 p.m.

Wednesday, May 9 7:00 a.m. – 1:00 p.m.

Continental Breakfast

A continental breakfast will be served adjacent to Ballrooms A and B on the main floor of the Minneapolis Convention Center.

Tuesday, May 8..... 7:30 a.m. – 8:30 a.m.

Wednesday, May 9 7:00 a.m. – 8:45 a.m.

General Information

Location and accommodations — The 2012 ICSI Colloquium on Health Care Transformation will be held at the Minneapolis Convention Center in Minneapolis, MN. Accommodations are available at the Millennium Hotel, which is connected via a skyway to the Minneapolis Convention Center. See hotel reservation form for details.

Parking — Convenient parking may be found in the Convention Center Parking Ramp on 3rd Avenue South at \$9.00 per day. This ramp is on the east end of the Minneapolis Convention Center, and nearest the Colloquium sessions. Additional parking (also at \$9.00 per day) is located in the Plaza Ramp on the west side of the Convention Center at 1st Avenue South.

Colloquium registration — Includes access to all sessions, continental breakfasts, lunches, and refreshment breaks. For more on registration, go to www.icsi.org or call (763) 765-2301. Space is limited and pre-registration is strongly advised.

Colloquium Notes:

ICSI will not provide a USB drive or paper handouts of the presentations at the Colloquium. This is to address attendees' concerns that presenters often update their slides and therefore don't match what is provided ahead of time. ICSI will be putting all presentations made during each day of the Colloquium on its Web site at www.icsi.org at the conclusion of the Colloquium.

Payment — Registration must be paid in U.S. dollars drawn on a U.S. bank. American Express, MasterCard, and VISA credit cards may be used for payment on mail, telephone, facsimile, or electronic registrations and will also be accepted at the on-site Attendee Services Desk. Registration payment by check may be used for mail or on-site registrations only. Payment must accompany registration. Payment vouchers or purchase orders will not be considered as payment. Registrations received without payment will not be processed. Written confirmation will be sent upon receipt of registration and payment.

Cancellations — Please submit Colloquium cancellations in writing by e-mail, mail or fax to the ICSI Meeting Management Office on or before April 9, 2012. All Colloquium cancellations will be assessed a \$75 cancellation fee. Refunds will be processed after June 15, 2012. Cancellations received after April 9, 2012 will not be honored. There is no charge for transferring registration to another person at any time. Written notification of all registration transfers must be received by the Meeting Management Office.

Travel — Travel arrangements, including air and ground, can be made through the Colloquium's Travel partner at (952) 854-2551 or (800) 245-1111. Please ask for Leann Krenz.

Airport transfer — Transportation from the Minneapolis/St. Paul Airport is available via Super Shuttle for approximately \$20 a person each way with reservations. For reservations, call (800) BLUE VAN.

ADA — For equal and full enjoyment of the Colloquium, please specify special requirements in the "Special Requests" areas of the Colloquium registration and hotel reservation forms.

Dietary — Please specify special dietary requirements in the "Special Requests" area of the Colloquium registration form. Every effort will be made to meet dietary requirements. Requests, however, are subject to availability.

Recommended attire — Business casual.

Program changes — All information is subject to change without notice.

For more information — Visit the ICSI Web site at www.icsi.org or contact the ICSI Meeting Management Office at (763) 765-2301 or by e-mail, registration@icsi.org

Reservations & Registration

Hotel Reservations

15th ANNUAL ICSI COLLOQUIUM ON HEALTH CARE TRANSFORMATION

May 7-9, 2012

The ICSI Colloquium will be held at the Minneapolis Convention Center in Minneapolis, MN. The Millennium Hotel Minneapolis is conveniently located one block west and attached via a skyway to the Minneapolis Convention Center. The location of the hotel affords convenience to shopping, dining, vibrant nightlife, cultural activities and numerous trade, commercial and mercantile enterprises. ICSI guest hotel rooms will include complimentary Internet service.

Hotel reservations may be submitted by the following methods:

- Online at www.millenniumhotels.com (<https://gc.synxis.com/rez.aspx?Hotel=11541&Chain=5303&group=1205CLICYS>)
- Mail or fax reservations — fill out the following form and return to the hotel. (612) 359-2164 — reservations fax
- Call (612) 332-6000 or (800) 522-8856 — Refer to Institute for Clinical Systems Improvement.

Reservations received after April 9, 2012, will be accepted on a space and rate available basis.

Cancellations must be received 72 hours prior to arrival in order to avoid a charge for the first night's room and tax.

Please print or type (one reservation per room)

First Name _____ Last Name _____

Affiliation _____

Address _____ City _____

State _____ ZIP Code _____ Country _____

Daytime telephone _____ Fax _____

E-mail address _____

Preference: King Double — Number of occupants: 1 2 3 or 4

Special Requests (ADA, sharing room with, etc.) _____

Arrival date _____ Departure date _____

Single/Double \$119 plus tax, single or double occupancy; \$134.00 triple or quad occupancy • All rates subject to 13.4% tax

Check-in is 3 p.m. Check-out is 12 p.m.

**Credit card required for guarantee for all reservations*

Check Enclosed (*One night's deposit U.S. dollars drawn on a U.S. bank*)

American Express Carte Blanche Diners Club VISA Discover MasterCard

Name (*as it appears on the card*) _____ Card # _____

Expiration Date _____ Security Digits* _____ Cardholder Signature _____

** For your protection, we ask for these digits to prevent unauthorized use of your credit card number. A security digit is three numbers for VISA or MasterCard and four numbers for American Express and may be found on the front or back of the card.*

The hotel will send a confirmation.

Reservations Manager, Millennium Hotel Minneapolis

1313 Nicollet Mall • Minneapolis, MN 55403

Phone: (612) 332-6000 • Fax: (612) 359-2164 • www.millenniumhotels.com

Colloquium Registration

15th ANNUAL ICSI COLLOQUIUM ON HEALTH CARE TRANSFORMATION

May 7-9, 2012

Register for the 2012 ICSI Colloquium on Health Care Transformation online at www.icsi.org (click registration), via phone, or complete the following form and return it by mail or fax to the ICSI Meeting Management Office.

Please print or type

First Name _____ Last Name _____

Profession (MD, RN, NP, etc.) _____ Title _____

Affiliation _____

Address _____ City _____

State _____ ZIP Code _____ Country _____

Daytime telephone _____ E-mail address _____

(For international numbers, please include country and city codes)

Special Requests (ADA, dietary, etc.) _____

Do you plan on attending any of the sessions within the new, 4th track, Integrating Behavioral Health and Primary Care? Yes No

(Please circle one)

On or before April 9 After April 9

Sponsor* Colloquium \$510 \$590

Sponsor* Pre-Colloquium \$165 \$250

Workshop *(select workshop at right)*

Sponsor* Colloquium and \$670 \$750

Pre-Colloq. Workshop *(select workshop at right)*

General Colloquium \$820 \$900

General Pre-Conference \$270 \$350

Workshop *(select workshop at right)*

General Colloquium and \$1,080 \$1,165

Pre-Colloq. Workshop *(select workshop at right)*

Student** General Colloquium \$300 \$375

Student** General Pre-Conference \$75 \$150

Workshop *(select workshop at right)*

Student** General Colloquium \$375 \$450

and Pre-Colloq. Workshop *(select workshop at right)*

**NOTE: ICSI members or sponsors sending 10 or more employees are eligible for a 10% discount on registration. To obtain this discount, the organization must assemble information on all their registrants, and submit them as a group along with payment. For questions, contact Lisa LeMay at lisa.lemay@icsi.org, (952) 814-7072.*

Name *(as it appears on the card)* _____ Card # _____

Expiration Date _____ Security Digits* _____ Cardholder Signature _____

** For your protection, we ask for these digits to prevent unauthorized use of your credit card number. A security digit is three numbers for VISA or MasterCard and four numbers for American Express and may be found on the front or back of the card.*

Billing Address

Address _____ City _____

State _____ ZIP Code _____ Country _____

Return Colloquium registration form to:

ICSI Meeting Management Office

P.O. Box 723 • Chanhassen, MN 55317

Phone: (763) 765-2301 • Fax: (952) 303-4060 • www.icsi.org

MAY 7 PRE-CONFERENCE WORKSHOPS

(Select ONE – workshops run concurrently)

- Session 1 – Use of Social Media to Address the Triple Aim
- Session 2 – Crucial Conversations®
- Session 3 – Co-creating a Medication Management System for the Triple Aim

** Sponsor rate applies to staff of ICSI sponsors and participating member organizations.*

*** Student rate is honored to full-time students at an accredited college/university or a physician in a residency program. To verify status, a copy of a current academic schedule or current invoice for tuition is mandatory and must be turned in at the Colloquium Registration Desk. If verification is not turned in upon arrival at the 2012 Colloquium, full-price registration must be paid.*

Check Enclosed *(Remit to ICSI, payable in U.S. dollars drawn on a U.S. bank)*

VISA MasterCard American Express

Co-creating a Healthy Tomorrow

ICSI is a non-profit, quality improvement organization comprised of 55 medical group and hospital members that represent 9,000 providers in Minnesota and surrounding states. It is sponsored by five health plans – Blue Cross and Blue Shield of Minnesota, HealthPartners, Medica, Security Health Plan of Wisconsin and UCare. ICSI brings providers, health plans, state agencies, employers, patients and other stakeholders together to tackle complex health issues and co-create sustainable solutions that achieve the Triple Aim.



8009 34th Avenue South
Suite 1200
Bloomington, MN 55425
Phone: (952) 814-7060
Fax: (952) 858-9675
Email: icsi.info@icsi.org
www.icsi.org

What Past Attendees Say:

“This is an amazing conference. It links clinicians across our community with the latest and best ideas on how to improve Triple Aim outcomes for our patients. It is a celebration of effective collaboration for improvement. I strongly encourage attendance and participation by members of our medical group.”

*Brian Rank, MD, Medical Director,
HealthPartners Medical Group*

“This is an outstanding conference for practicing clinicians, medical educators, and administrative leaders who want to learn from those who are innovating to improve practices that result in better outcomes and lower costs, and in ways that are more satisfying for patients and clinical teams.”

*Macaran A. Baird, MD, MS, Professor and Head,
University of Minnesota Medical School,
Department of Family Medicine and Community Health*

“This conference serves as a great meeting ground for a wide variety of organizations from across the care continuum. Pre-acute to acute to post-acute providers can learn from one another, as well as from consumers, employers, and payers. This conference creates a multidimensional learning pot that I always find very instructional.”

*Rahul Koranne, MD, MBA, FACP, Medical Director,
Bethesda Hospital, HealthEast Care System*

“Groups of all sizes have difficulty generating the enthusiasm or justification for change. That’s why, even though we’re a smaller organization, we usually send around 20 people to the Colloquium. At a minimum, it educates our leadership on many of the issues that will impact us in the future, and helps us formulate strategies to be prepared. By having many of our leaders attend, we have a broader base of understanding and/or support for ideas presented, and attendees can carry that positive energy back into the organization. The knowledge gained at the Colloquium, leveraged by the number of attendees, provides us with the credible reasoning and/or direction for change.”

*Paul Berrisford, COO,
Family HealthServices of Minnesota*