For ACHE Face-to-Face Education Credits

Physician-Hospital Integration in the 21st Century

Length: 1.5 hours

Target Audience: Mid-Careerists to Senior Executives, C-Suite Executives, Physician Executives

Description: The relationship between hospitals and their medical staffs has changed throughout the years from independence to interdependence. The current economic environment and healthcare reform have caused a reassessment of physician-hospital integration models. Healthcare reform promotes an expectation that better coordination of care will improve patient outcomes and community health status. With the movement away from fee-for-service payment and toward provider integration there is the belief that better coordination of care will slow healthcare costs by reducing duplication of services, hospital readmissions, and inappropriate use of the emergency department. Strategies to integrate physician and hospital interests are a necessary component to providing quality care and the achieving economic goals for both parties. The degree of integration varies from minimal to full integration or full employment. This program explores physician-hospital integration models and has panelists address their successes and challenges in the process.

Faculty: Moderator plus two to three panelists

The moderator should be a healthcare executive with experience in physician-hospital integration models (i.e. minimally integrated, partially integrated, fully integrated).

Panelists should include other senior-level healthcare executives and a physician involved in the strategy, set-up and operation of a physician-hospital model. The panelists should represent organizations using different models (i.e. minimally integrated, partially integrated, fully integrated) and discuss their experiences. A consultant, legal counsel or group practice leader with experience in physician-hospital integration may also be considered.

Topics for Discussion:

- Key factors and forces driving physician-hospital integration
Questions for Discussion:

1. What is the value of a physician-hospital partnership? What are the incentives for each party? What are the risks?
2. What are the biggest “lessons learned” from past attempts at physician-hospital integration?
3. Discuss strategies for finding common ground between hospitals and medical staffs and ways to build and maintain mutual trust.
4. What benefits does the patient receive as a result of physician-hospital integration?
5. How can clinical and financial data be used to foster effective discussions between physicians and hospitals?
6. Discuss obstacles and barriers to physician-hospital integration in terms of cultural, operational and/or financial issues.
7. What regulatory and legal issues arise with physician-hospital integration?
8. What can healthcare executives do to promote effective communication and alignment between physicians and the hospital?
9. What models of physician-hospital integration seem to be showing promise and what are their outcomes?
10. Are physician-hospital integration models sustainable?

Materials for Distribution:


Additional Resources


