Practice Management
Pearls for Academic Allergy Practice

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Department of Allergy & Clinical Immunology
Respiratory Institute, Cleveland Clinic

Practice Management

Academic Allergy Practice:
Preparing for the Future

Perspectives and Philosophical Observations
Personal Development Plan

• Imagine...

• Meyers-Briggs:
  • 16 distinctive personality types
    • Preferences in 4 dichotomies
      • Extravert/Introvert
      • Sensing/Intuition
      • Thinking/Feeling
      • Judging/Perceiving
    • http://www.personalitypage.com/high-level

• Goal Setting

• Action Steps

• An obligation or willingness to accept responsibility for performance.
• In the near future... payments for health care will be linked with performance on quality measures.
Healthcare Value = \frac{\text{Quality of Care}}{\text{Cost of Care}}
Buying a 1954 Buick

• Buyers at the mercy of car dealers.
• Price
  • Dealer not required to disclose MSRP.
  • Vast price disparities existed from dealer to dealer
• Quality
  • No information (e.g., fuel economy, crash test ratings) disclosures required.
  • 1958: Automobile Information Disclosure Act passed by US Congress.

https://en.wikipedia.org/wiki/American_automobile_industry_in_the_1950s
Consumer Reports

Buick Regal (turbo)
Premium I-4-cyl
Price as tested: $34,485
See Dealer Pricing
Overall score

This well-honed and satisfying sports sedan has a European feel, and is the antithesis of the whitewall-tired Buick of old. With its agile handling, quick steering, and a taut, steady ride, the Regal is one of Buick's best offerings. The 259-hp, 2.0-liter turbo four-cylinder delivers good performance and fuel economy. Our tested Regal was quick and quiet, and delivered 24-mpg overall. Rich-feeling materials are used in the cabin, which has excellent fit and finish. The front seats are firm and supportive, though the rear seat is quite snug. Infotainment system controls are mostly simple, and all-wheel drive is available on all trim lines. Overall this is a highly capable, yet understated car.

http://www.consumerreports.org/cro/cars/new-cars/luxury-cars/recommended/recommended-overall.htm?loginMethod=auto; accessed 2/14/16
What Does a Hip Replacement Cost?

• Randomly selected 2 hospitals in each state (plus Wash DC) performing THA, as well as top 20 hospitals in USNWR rankings.
• Each hospital contacted by phone, requesting lowest complete “bundled” price for elective THA for 62 year-old grandmother.
• Each hospital contacted up to 5 times.


What Does a Hip Replacement Cost?

• Obtaining information difficult
  • 9 top ranked (45%) and 10 (10%) non-top ranked hospitals provided “bundled” price.
  • Required multiple conversations with numerous individuals at each institution
• Price estimates varied nearly 10-fold across hospitals: $11,100 - $125,798.

• Conclusions
  • Not easy for consumers to obtain price information
  • Comparison shopping may yield substantial savings for savvy consumers.

How Much For an EKG in Philadelphia?

- Phoned 20 hospitals in Philadelphia requesting information on price of an EKG and cost of parking. No health insurance, will pay cash.

<table>
<thead>
<tr>
<th>Hospital No.</th>
<th>ECG</th>
<th>Parking</th>
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<tbody>
<tr>
<td>1</td>
<td>NP</td>
<td>-6 for 2 h, discounted</td>
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<tr>
<td>2</td>
<td>NP</td>
<td>N/A</td>
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<tr>
<td>3</td>
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<td>5</td>
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<td>6</td>
<td>NP</td>
<td>0</td>
</tr>
<tr>
<td>7</td>
<td>1200</td>
<td>-15 for 2-3 h, discounted</td>
</tr>
<tr>
<td>8</td>
<td>NP</td>
<td>-15 for 2-3 h, discounted</td>
</tr>
<tr>
<td>9</td>
<td>NP</td>
<td>0</td>
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<td>10</td>
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<td>11</td>
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<td>12</td>
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<td>14</td>
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<td>15</td>
<td>600</td>
<td>0</td>
</tr>
<tr>
<td>16</td>
<td>NP</td>
<td>0</td>
</tr>
<tr>
<td>17</td>
<td>NP</td>
<td>0 for 30 min; 3 for 2-3 h, discounted</td>
</tr>
<tr>
<td>18</td>
<td>NP</td>
<td>2 for visitors with validation</td>
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<tr>
<td>19</td>
<td>NP</td>
<td>0</td>
</tr>
<tr>
<td>20</td>
<td>NP</td>
<td>3 for 1 h; 5 for 2-5 h</td>
</tr>
</tbody>
</table>

Abbreviation: NP, not provided.

Hospital Compare - A quality tool for adults, including people with Medicare

This tool provides you with information on how well the hospitals in your area care for all their adult patients with certain Medicare compare quality of care hospitals provide. Hospital Compare was created through the efforts of the Centers for Medicare and represent hospitals, doctors, employers, accrediting organizations, other Federal agencies and the public.

Talk to your doctor about this information to help you, your family and your friends make your best hospital care decisions.

Physician Compare

Physician Compare has information about Medicare-enrolled Physicians and Healthcare Professionals.

Please use assistive technology may not be able to fully access information on these pages. For assistance, please contact OIG Web Team.
Physician Compare results

There are 0 health care professionals related to "DAVID MICHAEL LANG" within 200 miles of CLEVELAND, OH 44195. Please check your spelling or try another search.

You may want to consider primary care physicians in your area:

- Family practice, general practice, geriatric medicine, internal medicine, & primary care physicians (988)

Modify your results

https://www.medicare.gov/physiciancompare/results.html?view=map&keyword=DAVID%20MICHAEL%20LANG&ID=&loc=CLEVELAND%2C%20OH%2044195&lat=41.5034433&lng=-81.6205953&type=All&xpnd=1&vflg=1&lngid=0

Accessed 2/14/16

Physician Compare

CLEVELAND CLINIC FOUNDATION

Specialties: Multiple

Clinical quality of care

These clinical quality of care measures are reported by group practices. Group practices report these measures to Medicare. A selection of these quality measures are publicly reported on this website to help consumers make informed decisions and to encourage health care professionals to improve the quality of care provided to Medicare beneficiaries. Visit Medicare.gov for more information on measures and the measures available to report are different depending on the type of services a group practice provides to patients. Reporting more or less measures is not a reflection of the quality of care given to patients. (Get more information.)

More stars are better. Select a measure to read more information.

Preventive care: General health

Some group practices do a better job than others providing care that keeps patients healthy. Medicare gave this group practice a performance score based on how well the group did on each measure. The scores are presented as stars and as a percent.

- Getting a flu shot during flu season: ★★★★★ 67%
- Making sure older adults have gotten a pneumonia vaccine: ★★★★ 66%
- Screen for depression and developing a follow-up plan: ★★★★★ 15%
- Screen for tobacco use and providing help quitting when needed: ★★★★★ 19%
- Screen for an unhealthy body weight and developing a follow-up plan: ★★★★★ 16%
- Screen for high blood pressure and developing a follow-up plan: ★★★★★ 69%

https://www.medicare.gov/physiciancompare/group-profile.html?tab=3&selectedId=1850203555&strlat=41.5034433&strlng=-81.6205953

Accessed 2/14/16
**Preventive care: General health**

Some group practices do a better job than others providing care that keeps patients healthy. Medicare gave this group practice a performance score based on how well the group did on each measure. The scores are presented as stars and as a percent.

- **Getting a flu shot during flu season.** 67%
- **Making sure older adults have gotten a pneumonia vaccine.** 86%
- **Screening for depression and developing a follow-up plan.** 15%
- **Screening for tobacco use and providing help quitting when needed.** 89%
- **Screening for an unhealthy body weight and developing a follow-up plan.** 60%
- **Screening for high blood pressure and developing a follow-up plan.** 50%

[https://www.medicare.gov/physiciancompare/group-profile.html#tab=3&selectedID=1850203555&strlat=41.5034433&strlng=-81.6205953](https://www.medicare.gov/physiciancompare/group-profile.html#tab=3&selectedID=1850203555&strlat=41.5034433&strlng=-81.6205953)

Accessed 2/14/16

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**Hospital Ratings Heart Surgery**

The data come from the Society of Thoracic Surgeons for hospitals that have agreed to share their data with us.

**BYPASS SURGERY RATING** reflects a hospital’s performance in isolated coronary artery bypass graft surgery, including the open-heart approach and less invasive versions. Overall score is a composite of four measures: survival (percentage of patients who leave the hospital and survive at least 30 days after surgery), complications (percentage of patients who avoid the most serious complications, including needing a second operation, developing a deep vein infection, suffering a stroke or kidney failure, and requiring prolonged ventilation), least surgical technique (percentage of patients who receive at least one graft from an internal mammary artery, located under the breastbone, which improves survival), and right-angle surgery (percentage of patients who receive two or more bypasses before and after surgery to control blood pressure and heart rhythm, avoid aortic valve replacement, and a drug after surgery to lower LDL, last measured).

**VALUE REPLACEMENT RATINGS** reflects a hospital’s performance in surgical aortic valve replacement. Does not include data for transcatheter aortic valve replacement. The STS has started to collect this. Overall score is a composite of two measures: survival (percentage of patients who leave the hospital and survive at least 30 days after surgery) and complications (percentage of patients who avoid the most serious complications, which are the same as for bypasses).

All data were adjusted based on the health of patients. Still, limitations of such adjustments can make direct comparisons difficult.

For complete hospital ratings, visit [www.ConsumerReports.org/hospitalsratings](http://www.ConsumerReports.org/hospitalsratings).

<table>
<thead>
<tr>
<th>HOSPITAL</th>
<th>CITY</th>
<th>CORONARY ARTERY BYPASS SURGERY RATING</th>
<th>AORTIC VALVE REPLACEMENT SURGERY RATING</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ALABAMA</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>East Alabama Medical Center</td>
<td>Opelika</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Prichard Hospital</td>
<td>Mobile</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td><strong>ARIZONA</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Banner Boswell Medical Center</td>
<td>Sun City</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Chandler Regional Medical Center</td>
<td>Chandler</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Flagstaff Medical Center</td>
<td>Flagstaff</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Phoenix Regional Medical Center</td>
<td>Lake Havasu City</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Scottsdale Healthcare Shea Medical Center</td>
<td>Scottsdale</td>
<td>-</td>
<td>-</td>
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<tr>
<td>Scottsdale Healthcare - Osborn Medical Center</td>
<td>Scottsdale</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>University of Arizona Medical Center - University Campus</td>
<td>Tucson</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>
Heart Surgery

These Ratings were derived from data submitted by hospitals to The Society of Thoracic Surgeons. The Ratings are based on data from the medical records of patients, considered the "gold standard" for quality measurement. The methods used to derive these Ratings have been endorsed by the National Quality Forum, a nonprofit organization that endorses consensus standards for measuring and publically reporting.

Bypass Surgery Ratings

• **Survival**
  • Percentage who leave the hospital and survive 30 days

• **Complications**
  • Needing 2\textsuperscript{nd} operation
  • Sternal wound infection
  • Suffering CVA or renal failure
  • Requiring prolonged ventilation

• **Surgical technique**
  • Graft from internal mammary artery

• **Appropriate pharmacotherapy**
  • Beta blocker
  • Statin
  • Aspirin
Cleveland Clinic

Address: 9500 Euclid Avenue, Cleveland, OH, 44195
Phone: (216) 444-2200 (tel:(216) 444-2200)
Website: www.clevelandclinic.org

Heart Surgery

These Ratings were derived from data submitted by hospitals to The Society of Thoracic Surgeons. The Ratings are based on data from the medical records of patients, considered the “gold standard” for quality measurement. The methods used to derive these Ratings have been endorsed by the National Quality Forum, a nonprofit organization that endorses consensus standards for measuring and publically reporting.

Overall Heart Bypass Surgery Performance

These ratings are based on 519 heart bypass operations performed between 07/01/2016 and 06/30/2017. Surgeons at this hospital may have performed additional heart bypass operations that are not included here, either at other hospitals or combined with other surgical procedures.

Mercy Cardiovascular Institute

Location: Canton, OH
Phone: (330) 317-3736 (tel:(330) 317-3736)
Affiliated Hospital(s):
Mercy Medical Center
https://www.consumerreports.org/health/hospitals/mercy-medical-center/6410290

Heart Bypass Surgery

These ratings are based on 216 heart bypass operations performed between 07/01/2016 and 06/30/2017. Surgeons in the group may have performed additional heart bypass operations that are not included here, either at other hospitals or combined with other surgical procedures.

Overall Rating

Patient Survival
Patients have a 98% chance of surviving at least 30 days after the procedure and of being discharged from the hospital.

Absence of Complications
Patients have a 81% chance of avoiding all five of the major complications.

Recommended Medications


What is Evidence-Based Medicine?

“Evidence-based medicine is the integration of best research evidence with clinical expertise and patient values”

- Sackett & Straus

The EBM Triad
How Patient Centered are Medical Decisions?
A National Survey

• N = 2718 adults (58.3% response rate)
  • 40 years and older
  • Experienced ≥ 1 of 10 health care decisions in previous 2 years with health care provider.
  • Perceptions of the extent to which pros and cons were discussed.

• Major finding: discussions concerning common tests, medications, or procedures do not reflect a high level of shared decision making.


<table>
<thead>
<tr>
<th>Procedure</th>
<th>% of Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Blood pressure medication (n=1027)</td>
<td>![Bar chart showing blood pressure medication discussion]</td>
</tr>
<tr>
<td>Cholesterol medication (n=822)</td>
<td>![Bar chart showing cholesterol medication discussion]</td>
</tr>
<tr>
<td>Depression medication (n=380)</td>
<td>![Bar chart showing depression medication discussion]</td>
</tr>
<tr>
<td>Colon cancer screening (n=796)</td>
<td>![Bar chart showing colon cancer screening discussion]</td>
</tr>
<tr>
<td>Breast cancer screening (n=683)</td>
<td>![Bar chart showing breast cancer screening discussion]</td>
</tr>
<tr>
<td>Prostate cancer screening (n=291)</td>
<td>![Bar chart showing prostate cancer screening discussion]</td>
</tr>
<tr>
<td>Knee surgery (n=166)</td>
<td>![Bar chart showing knee surgery discussion]</td>
</tr>
<tr>
<td>Hip surgery (n=58)</td>
<td>![Bar chart showing hip surgery discussion]</td>
</tr>
<tr>
<td>Low back surgery (n=157)</td>
<td>![Bar chart showing low back surgery discussion]</td>
</tr>
<tr>
<td>Cataract surgery (n=319)</td>
<td>![Bar chart showing cataract surgery discussion]</td>
</tr>
</tbody>
</table>

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**How to Use the AAAAAI Registry to Satisfy PQRS Requirements**

1. Collect data on at least 9 measures covering at least 3 NQS Domains**.
2. Report on at least 70% of all of your applicable patients for the 9 measures.
3. Of those measures, at least 2 Outcome Measures must be selected.
4. Mark your report as complete in the AAAAAI Registry and ready for CMS submission.

** NQS Domains (6): Communication and Care Coordination; Community Population Health; Effective Clinical Care; Efficiency and Cost Reduction; Patient Safety; Teamwork and Coordinated Care Experience and Outcomes.
Asthma Control Test™ (ACT)

1. In the past 4 weeks, how much of the time did your asthma keep you from getting as much done at work, school or at home?
   - All of the time: 1
   - Most of the time: 2
   - Some of the time: 3
   - A little of the time: 4
   - None of the time: 5

2. During the past 4 weeks, how often have you had shortness of breath?
   - More than once a day: 1
   - Once a day: 2
   - 3 to 6 times a week: 3
   - Once or twice a week: 4
   - Not at all: 5

3. During the past 4 weeks, how often did your asthma symptoms (wheezing, coughing, shortness of breath, chest tightness or pain) wake you up at night, or earlier than usual in the morning?
   - 4 or more nights a week: 1
   - 2 or 3 nights a week: 2
   - Once a week: 3
   - Once or twice: 4
   - Not at all: 5

4. During the past 4 weeks, how often have you used your rescue inhaler or nebulizer medication (such as albuterol)?
   - 3 or more times per day: 1
   - 1 or 2 times per day: 2
   - 2 or 3 times per week: 3
   - Once a week or less: 4
   - Not at all: 5

5. How would you rate your asthma control during the past 4 weeks?
   - Not controlled at all: 1
   - Poorly controlled: 2
   - Somewhat controlled: 3
   - Well controlled: 4
   - Completely controlled: 5

Score

Asthma Control Test Is a Trademark of QualityMetric Incorporated.
Copyright 2002, QualityMetric Incorporated.
Asthma Control: Minimal Important Difference Improvement – National Quality Strategy
Domain: Person and Caregiver-Centered Experience and Outcomes

DESCRIPTION:
Percentage of patients aged 12 years and older whose asthma is not well-controlled as indicated by the Asthma Control Test, Asthma Control Questionnaire, or Asthma Therapy Assessment Questionnaire and who demonstrated a minimal important difference improvement upon a subsequent office visit during the 12-month reporting period.

INSTRUCTIONS:
This outcomes measure is to be reported a minimum of once per reporting period for all patients with a diagnosis of asthma who demonstrate a score ≤ 19 on the Asthma Control Test (ACT), ≥ 1.5 on the Asthma Control Questionnaire (ACQ) or ≥ 1 on the Asthma Therapy Assessment Questionnaire (ATAQ) and who had at least one follow-up ACT, ACQ, or ATAQ within the 12-month reporting period. In order to meet this measure, the patient must demonstrate a minimal importance difference (MID) improvement between their asthma control score from the initial visit and a subsequent score taken during the 12-month reporting period using the same patient-completed questionnaire. An increase in score by greater than or equal to 3 points on the ACT, decrease in score by greater than or equal to 5 points on the ACQ, or greater than or equal to 3 points on the ATAQ shall be considered as MID improvement.

Improvement in ACT Scores for Patients with Poorly or Not Well Controlled Asthma Exceeding the Minimal Important Difference

- EMR-based
- Outcomes measure
- Patient-centered

Cleveland Clinic Asthma Center - 2017
Telemedicine: NQF, 2017- 2018

• Big paradigm shift
• David Shulkin (VA): Telemedicine is a major initiative; 750,000 veterans receiving care via virtual visits.
• Henry DePhillips (CMO, Teladoc)
  • Disruptive
  • Consumer-centric
  • Oriented towards what the public wants

“Walmart made shopping more efficient, but Amazon changed how people shop.”

Expansion of Telemedicine

• Desired Outcomes of Expansion of Telemedicine
  - Reduction in overall health care costs
  - Improved access to coordinated care
  - Applications of technology that assure quality of care
  - Improve efficiencies and potentially grow revenue for providers

Powerful market pressures will continue to press the conversation with physicians, carriers, employers and health systems to consider broadening telehealth benefits and services. Meanwhile consumer expectations will likely drive at least the consumer initiated telemedicine consultation requests, opening the opportunity for innovative physicians to lead the way to expanding the value of these technologies.

Slide content courtesy of S. George Kipa, Ara Rafaelian and Theresa Tew, BCBSM
Healthcare Value = \[
\frac{\text{Quality of Care}}{\text{Cost of Care}}
\]

[Outcomes important to patients]
Cost Transparency

- Most consumers in USA currently are shielded from the cost of their health care consumption by 3rd party payers.
- Removing this shield will create concern about price and foster market pressures to keep prices down.
- Patients will be incentivized to play a more active role in selecting hospitals and physicians on the basis of cost.

Quality Transparency

- Will facilitate meaningful comparisons and provide a “feedback loop” for guidelines and measures developers, encouraging ongoing improvements in quality of care.
- Informing and involving patients in medical decision making will increasingly become a standard for good medical care.
- Much work lies ahead in implementation, revision, and validation.