CEOs and leaders from nearly 40 medical specialty and healthcare associations attending Association Forum’s Healthcare Collaborative July 11, 2017 believe engaging in ongoing dialogue and collaboration to address an increasingly challenging healthcare environment and facilitate innovation across different specialties and verticals will help improve healthcare for everyone.

The collaborative featured:

- A keynote presentation by Steven Collens, CEO of MATTER, a non-profit Chicago Healthcare Startup Incubator whose mission is to turn brilliant healthcare ideas into industry-changing solutions
- Highlights of research on innovation and disruption in healthcare
- Two panels of association and healthcare organization leaders reviewing the current state of healthcare
- An open discussion of all collaborative attendees on how to best create an improved state of the healthcare environment

As the association and organization leaders shared viewpoints and insights, potential partnerships also started to emerge with groups identifying opportunities to work collectively to address common challenges. These included improving patient care and safety, specialty relevancy, data collection and registries, outcomes and value-based reimbursement. One of the most important insights from the meeting was the need for healthcare associations to learn how to become innovative organizations in order to maintain relevance and value for their members.

Going forward, the collaborative agreed there is real value in coming together to address some of the top trends and issues facing the industry. The collaborative also is considering engaging other healthcare stakeholders such as patients, providers, payors and policymakers to strengthen future discussions.

What is the Association Forum Healthcare Collaborative?

An interdisciplinary community of healthcare associations and stakeholders convened to identify pressing issues to address in common, opposed to individually.

Why Association Forum?

Association Forum is a membership organization for associations located in Chicago, IL. Chicago represents the largest concentration of healthcare and medical association in the world. We believe that a clear majority of all healthcare professionals and companies will be a powerful vehicle to affect change and influence over a dynamic and transformative future ahead for the industry. By working together, we are more likely to succeed.

Comments from collaborative participants:

“Coming together to incubate new and innovative ideas, especially across specialties and organizations is a great idea. We get to put ideas on the table, synergize our thoughts….It could lead to significant results for healthcare.” - Kenneth Slaw, Ph.D., Executive Director, Society for Vascular Surgery

“Good use of time for networking and partnership especially within the medical association community where we all have so many overlapping issues.” - Mary Eiken, MS, RN, Chief Executive Officer, International Gynecological Cancer Society

“We always appreciate opportunities to share industry opportunities and challenges with other association leaders, and the discussions of this collaborative can be instrumental in elevating our collective success in addressing current trends in healthcare.” - Larry Smith, CAE, Esq., CCIO, American Association of Nurse Anesthetists

Peer to peer learning is best. This was like a support group…Good to hear the challenges other CEOs of healthcare associations are facing and how they are dealing with them. Made me a little more hopeful.” - Sal Martino, Chief Executive Officer, American Society of Radiologic Technologists
The following provides a summary of the presentations and panel discussions.

**MATTER**

Collens provided an overview of the three trends in healthcare that are driving change from supply and demand and creating opportunity. The trends include the number of connected devices, the penetration of EMR and transition to value-based care.

He noted that while Chicago has the most healthcare experts, the area is the most under-achieving as healthcare innovators with pharma and device manufacturers, insurance companies, academic institutions, health systems and medical associations operating in silos or as islands. MATTER is working to equip, embolden and empower these players from across the healthcare ecosystem to work collectively to solve complex healthcare challenges and improve health and care for every patient.

The future of healthcare will go from episodic engagement to continuous contact, acute care to chronic care management and generic protocols to personalized data driven behavior modifications. Collens reviewed three healthcare innovations: SonarMD, Triggr Health and PhysIQ.

- SonarMD is a platform for Crohn's Disease Management that pings a patient's smartphone and brings data on patient-reported outcomes to the practice so that they can target those most at risk reducing hospitalization by 50 percent and costs by 10 percent.

- Triggr Health reduces recidivism rates for those in early substance abuse recovery by analyzing how people use their cell phone to predict the state of recovery and reaching out with intervention when they need it most with over 90 percent accuracy.

- PhysIQ employs the use of a FDA-approved physiological monitoring system that serves as a check engine light for patients with congestive heart failure and predicts if you are going to have a heart attack about one week in advance.

Working with 70 partners, MATTER is forcing the creation of a community that didn't exist before with 2017 focusing on three key themes including healthy aging, health data and precision healthcare to help entrepreneurs build solutions that address the healthcare industry’s challenges and opportunities. Current association partners include the American Medical Association, American Osteopathic Association and American Dental Association.

**Research on Innovation and Disruption in Healthcare**

Terrance Barkan CAE, Founder and Chief Strategist, GLOBALSTRAT and Bret Schroeder, US Healthcare Provider Lead, PA Consulting, reviewed research on innovation and disruption in healthcare. They noted that this is a particular challenge for many associations which are by nature very risk adverse.
HEALTHCARE INNOVATORS BEAT THE AVERAGE...

The research highlighted that despite the power of new technologies, and the ability of innovation to unlock new growth opportunities, too many organizations are missing out. While the majority, about two-thirds, believe their organizations will not survive without innovation, less than one-quarter are fully confident they have defined the skills and activities they need to be innovative. A little more than one-third say their organization has made no, or only minimal, changes to its innovation approach. Half do not believe their leaders fully display the vision and passion needed to make innovation happen.

The largest gaps between healthcare organizations and leading, successful innovators was that 1) innovation has been successful in driving revenue growth, 2) in-sourcing innovation practices from outside examples helps to achieve success and 3) leading innovators are good at generating ideas internally.

Despite these challenges, organizations can learn to innovate and break through barriers by focusing on the future, designing innovation into your organization, creating an innovation culture and building a network for innovation.

Results of a survey of healthcare associations on healthcare trends that are the most critical/urgent issues to address included:

- improving patient care and safety / moving towards “zero risk,”
- keeping the medical specialty or profession relevant,
- aggregating health / patient information (“Big Data”) and
- tracking outcomes and value-based reimbursement.

Other major or long-term issues included: increasingly complex regulatory compliance, the digitization of medicine / medical records, patient / provider / practitioner data protection, medical education and information (anytime / anywhere) and connected devices and the Internet of Things IOT / sensing.

How associations are addressing these trends and issues were discussed along with the acknowledgement that innovation is a skill set that is not necessarily native to associations. It became clear that association leaders can do more together collectively than they can do on their own.

**Constructed State – Part I and II**

Barkan facilitated the panel and open discussions during the day. The first panel on the constructed state of healthcare featured: Lynne Thomas Gordon, President and CEO, AHIMA, Cynthia Barginere, Chief Operating Officer, Rush University Hospital, Dale Hall, Managing Director, Research, Society of Actuaries, John Kajander, Partner, Medical World Americas Conference and Expo and Kathleen O’Loughlin, Executive Director and Chief Operating Officer, American Dental Association.

The panel discussed the healthcare trends and reviewed how they are affecting their organizations. Kathleen O’Loughlin of the ADA noted that some additional trends of a generational divide between boomers and millenials in membership, the feminization of several professions,
entry of males into traditional female professions, increasing consumerism and digital transformation also may have impact.

Other key highlights from the discussion:

- O’Loughlin noted that the ADA’s biggest challenge is not just losing relevance for newer professionals but the difficulty encountered with implementing change necessary to maintain relevance and financial sustainability. The ADA has had to change their structure and organization to enable innovation through agile project management, and that means giving people permission to try new things and occasionally fail. To manage change, the ADA incorporated the John Kotter change management philosophy that includes showing the sense of urgency using data, building a coalition of volunteers and staff as change agents, creating a clear vision of the future, over communicating, getting some small early wins, and not letting up. The bottom line is it takes “time, perseverance and hope.”

- Dale Hall of the Society of Actuaries referred to the importance of outcomes and value-based reimbursement and the 2018 Department of Health and Human Services (HHS) goals for 50 percent of all transactions to be outcomes based. He noted that objective information and data needs to be in the hands of policymakers to help them make good decisions.

- Lynne Thomas Gordon of AHIMA provided an overview on how EHRs are being used and the importance of Information Governance to trust healthcare information. Thomas Gordon also reviewed the availability of resources for patients to access their information and announced AHIMA’s upcoming introduction of a first-of-its kind standardized model Patient Request for Health Information form to help healthcare providers streamline patient health information request processes.

- John Kajander, Medical World Americas Conference and Expo, noted the value of having a forum to review the challenges in healthcare is helpful because it gives people a chance to talk to each other and breakdown silos.”

John Kajander

The second panel of the constructed state of healthcare featured: Mary Eiken, CEO, International Gynecological Cancer Society, Charles Macfarlane, CEO, American Association of Diabetes Educators (AADE), Nancy D’Honrdt, Clinical Pharmacist and Diabetes Educator, St. John Providence Hospital and Medical Center and Paul Pomerantz, CEO, American Society of Anesthesiologists. Key highlights of the discussion include:

- Charles Macfarlane of AADE noted that their biggest challenge for relevance of the profession is that only seven percent of those diagnosed with diabetes get access to a diabetes educator and they need other specialties to recognize their value. The biggest obstacle to this is many don’t want to share “a piece of pie” or it’s an admittance they can’t manage the condition which is a disservice to patients. These providers need to realize that they will make money from value-based payment.

- Mary Eiken of the International Gynecological Cancer Society reported that innovation and international are difficult sometimes to merge because there are areas that are very low resource where innovation is challenging, and other places where resources are high and it’s not as difficult, it’s a balancing act. She noted that associations need to keep relevant and need data to accomplish this.

- Nancy D’Honrdt, AADE president and diabetes educator, commented on how education is scaring practitioners and they need to stay relevant and navigate technology and yet insurance decides...
what to do and what technology to use. She also notes that technology-based education is important but there still is a need for a hands-on approach and face-to-face education.

- Paul Pomerantz of ASA reviewed how there are two challenges when it comes to innovation – how do we make societies relevant and how do we make profession relevant? He noted that they are two separate challenges and as a society how do we make work more enjoyable and meaningful for providers and for the profession what is our role in a value-based healthcare system? Pomerantz reported that he recently attended meeting of chronic disease organizations and learned that these patients often don’t attribute to medical professions the value we do. Patients view their condition much more deeply, as part of a long-term journey and they are working with technology, pharma and device companies to develop innovative treatments and resources. He also highlighted initiatives ASA is undertaking including a learning collaborative for the perioperative surgical home, a partnership with ePreop for quality data capture and another with CAE Healthcare to develop an education simulation within a gaming environment. Each of these initiatives have had physicians champion through the process and have benefitted by unique partnerships with innovators (both start up and established).

The panel comments were followed by a discussion of the importance of data collection and how “big data” has not yet met its potential and has been largely fragmented by specialty or purpose (i.e. not looking at the full patient or population). The collaborative discussed the challenges of creating an industry wide registry that would provide real value and the barriers that inhibit groups from working together.

The discussion concluded with the collaborative participants highlighting what value they received from participating in the meeting. The group stated their interest in continuing the dialogue and that it would be extremely beneficial focusing on how developing innovation as a skill set would help their organizations to address top healthcare trends and issues. It was noted that the small size of the group allowed for more meaningful interaction and participation.

“... Innovation is a skill set that is not necessarily native to associations. It became clear that association leaders can do more collectively than they can do on their own.”

Source: PA Consulting Group http://www.paconsulting.com
Collaborative Participants

Co-Chairs:
Lynne Thomas Gordon, RHIA, CAE, FACHE, FAHIMA, CEO, American Health Information Management Association
Paul Pomerantz, FASAE, CAE, Chief Executive Officer, American Society of Anesthesiologists

Participants:
Tom Arend, CAE, President & CEO, American Academy of Orthopaedic Surgeons
Cynthia Barginere, RN, DNP, FACHE, Chief Operating Officer, Rush University Hospital
Deborah Bowen, CAE, FACHE, President/CEO, American College of Healthcare Executives
Steven Collins, CEO, MATTER
Dean Comber, CSM, MBA, PMP, Chief Finance and Information Officer, American Association of Nurse Anesthetists
Nancy D’Hondt, RPh, CDE, FAFADE, Clinical Pharmacist and Diabetes Educator, St. John Providence Hospital and Medical Center
Mary Eiken, MS, RN, Chief Executive Officer, International Gynecological Cancer Society
Dale Hall, FSA, CERA, CFA, MAAA, Managing Director of Research, Society of Actuaries
Mary Beth Hepp, Executive Director, American Society of Neuroradiology
Nancy Honeycutt, CAE, Executive Director, American Student Dental Association
Matthew Homberger, CAE, MBA, Executive Director, American Society for Healthcare Risk Management of the AHA
Christina Jack, Director, American Hospital Association
John Kajander, Partner, Medical World Americas Conference and Exposition, Visit Houston/Medical World Americas Conference and Exposition
Matthew Kremke, Vice President Business Development, American Osteopathic Information Association
Fawn Lopez, VP/Publisher, Modern Healthcare
Charles Macfarlane, CAE, FACHE, CEO, American Association of Diabetes Educators
Sal Martino, Chief Executive Officer, American Society of Radiologic Technologists
Michelle Mason, FASAE, CAE, President & CEO, Association Forum
Kathleen O’Loughlin, DMD, Executive Director and Chief Operating Officer, American Dental Association
Allison Romer, VP & Chief of Strategic Alliances, American College of Healthcare Executives
Kenneth Slaw, PhD, Executive Director, Society for Vascular Surgery
Larry Smith, CAE, Esq., COO, American Association of Nurse Anesthetists
Steve Smith, CAE, CEO, American Academy of Hospice & Palliative Medicine
Thomas Stautzenbach, CAE, Executive Director, American Academy of Physical Medicine & Rehabilitation
Sheryl Traficano, CAE, CEO, National Certification Board for Diabetes Educators
Dale West, CAE, Executive Director, Neurocritical Care Society
Kay Whalen, CAE, Executive Director, American Academy of Allergy, Asthma and Immunology
Wanda Wilson, PhD, CRNA, Executive Director, American Association of Nurse Anesthetists
Dale Woodin, CHFM, FASHE, Vice President, Personal Membership Groups, American Hospital Association
Executive Summary

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Jennifer Lynch, Regional Director of Sales – Midwest, Visit Dallas
Healthcare Innovation Research: Bret Schroeder, Partner, PA Consulting
PR and Communication Services: Leigh Wagner, Senior Vice President, Public Communications Inc.

The collaborative was facilitated by Terrance Barkan, CAE, Founder and Chief Strategist, GLOBALSTRAT.

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October 19, 2017
Healthcare Summit
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January 25, 2018
Healthcare Collaborative Session 2
American Dental Association

Innovation and Ideas. Relevant Resources. Dynamic Networking.

About Association Forum

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To learn more about the Healthcare Collaborative, contact Michelle Mason at mason@associationforum.org or 312-924-7070.