

The Kentuckiana Health Collaborative hosts community health forums in Greater Louisville to educate healthcare stakeholders on emerging trends in healthcare transformation happening across the nation.

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**Part 1 Title:** Patient-Centered Medical Home & an Accountable Care Organization Journey

**Timing:** September 2014

**Speaker:** Pamela Coyle-Toerner, MHHA, Chief Executive Officer, Tri-Health, Queen City Physicians

**Attendance:** 107

**Part 1 Forum & Dinner Sponsor:** 

**Description:** Pam Coyle-Toerner, MHHA, CEO, Queen City Physicians discussed the Queen City Physician's journey and experiences along the way to successfully transforming into a Patient Centered Medical Home. She discussed what works and what barriers there are to overcome in making the transformation. Pam discussed bending the cost curve and its importance to everyone whether we are a provider, employer or consumer.

**Speaker Bio:** Pamela Coyle-Toerner, MHHA is CEO of QCP Management Services, LLC and Administrator of TriHealth Queen City Physicians. Under Coyle-Toerner's leadership, QCP achieved Level III Recognition as a Patient Centered Medical Home by the National Committee on Quality Assurance for all four adult medicine practices in 2010 and re-certification in 2013. QCP also received a Quality Profiles Diabetic Recognition from the National Committee on Quality Assurance in 2004. She successfully led the effort to move QCP's physicians onto an electronic medical record (EMR) system in 2001. QCP was the first private physician group to successfully pass Ohio Board of Pharmacy criteria to electronically fax prescriptions direct to pharmacy with out third party intermediary. Coyle-Toerner has a Masters Degree in Hospital and Health Administration from Xavier University and Bachelor of Science Degree from The Ohio State University. She resides in Wyoming, Ohio with her husband and two sons.

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**Part 2 Title:** Patient-Centered Medical Homes Impact on Quality & Cost and the Greater Louisville Transformation Plan

**Timing:** September 2014

**Speakers:** Marci Nielsen, PhD, MPH, Chief Executive Officer, Patient-Centered Primary Care Collaborative  
Marjie Harbrecht, MD, Chief Executive Officer, HealthTeamWorks

**Attendance:** 107

**Description:** Marci Nielsen, PhD, MPH -- the CEO of the Patient-Centered Primary Care Collaborative -- spoke on Innovations in Health Care Delivery: Patient Centered Medical Homes (PCMH) & Accountable Care Organizations (ACOs). Marci gave an overview of health system transformation trends as they pertain to medical homes and ACOs as a means to advance the Triple Aim of lower per capita health care costs, better patient experience of care, and improved population health. This session highlighted the evidence of PCMHs impact on cost and quality, highlighting specific case studies. Marci described proposed payment frameworks for medical homes and ACOs and discuss strengths and

weaknesses of proposed payment models. Finally, Marci addressed the medical home transformation including new workflow redesign for care teams.

**Speaker Bio:** Marci Nielsen, PhD, MPH, joined the PCPCC as Chief Executive Officer in 2012. Prior to the PCPCC, Dr. Nielsen served as Vice Chancellor for Public Affairs and Associate Professor at the University of Kansas School of Medicine's Department of Health Policy and Management. Dr. Nielsen was appointed by then-Governor Kathleen Sebelius as first Executive Director and Board Chair of the Kansas Health Policy Authority (KHPA). She worked as a legislative assistant to U.S Senator Bob Kerrey (D-Nebraska), and later served as the health lobbyist and assistant director of legislation for the AFL-CIO. She is on the Board of Directors for the American Board of Family Medicine and the Center for Health Policy Development/National Academy for State Health Policy, and former Board member of the Health Care Foundation of Greater Kansas City, TransforMED LLC and the Mid-America Coalition on Health Care. She was also a committee member for the Institute of Medicine's Leading Health Indicators for Healthy People 2020 and Living Well with Chronic Illness: A Call for Public Health Action. Early in her career she served as a Peace Corps volunteer working for Thailand's Ministry of Public Health and served for six years in the US Army Reserves. Dr. Nielsen holds an MPH from the George Washington University and a PhD from the Johns Hopkins School of Public Health.

**Description:** As the Kentuckiana Health Collaborative strives to develop a plan that can drive the triple aim goals of better health, better care, and better value in Greater Louisville, the tenets of Patient Centered Medical Homes have been identified as key to transformation. Dr. Marjie Harbrecht lead a discussion on the development of a Greater Louisville Healthcare Transformation Plan.

**Speaker Bio:** Marjie Grazi Harbrecht, MD, is a board-certified family physician and chief executive officer of HealthTeamWorks (formerly the Colorado Clinical Guidelines Collaborative [CCGC]), which she has led since 1999. Initially focusing on developing and gaining consensus from multiple stakeholders on evidence-based guidelines, the organization has evolved to implementing and evaluating evidence-based care through redesign and culture change at the practice, community and healthcare system levels. Under Dr. Harbrecht's leadership, HealthTeamWorks serves as the lead agency for two major national initiatives: Improving Performance in Practice (IPIP) and the Colorado Multi-Payer, Multi-State Patient Centered Medical Home (PCMH) Pilot. In addition, it's a partner in the Colorado Regional Extension Center to help practices achieve "meaningful use" of electronic records. Dr. Harbrecht serves on multiple boards and committees. At the local level, she is a director of the Colorado Regional Health Information Organization (CORHIO) and the Center for Improving Value in Healthcare (CIVHC), working on the All-Payer Claims Database Committee. At the national level, Dr. Harbrecht's affiliations include the Patient-Centered Primary Care Collaborative (PCPCC) Payment Reform Taskforce and the NCQA PPC-PCMH Advisory Committee, which helped develop the 2011 PCMH standards. In 2007, Dr. Harbrecht received an award from the Colorado Patient Safety Coalition for her work and serves on its task force to help develop a patient safety agenda for the state. She lectures nationally about health system change, quality improvement and patient safety and serves as an assistant clinical professor in family medicine at the Univ. of Colorado Health Sciences Center

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**Title: Benefit Design Evolution in the Post Accountable Care Act Environment**

**Timing:** June 2014

**Speaker:** Cheryl Larson, Vice President, Midwest Business Group on Health

**Attendance:** 70



**Event & Dinner Sponsor:**



**Breakfast Sponsor:**

**Description:** Cheryl Larson, Vice President of Midwest Business Group on Health (MBGH), leads one of the nation's leading non-profit business coalitions of large, self-insured, multi-state public and private employers. She provided an overview of the current health benefits design landscape, including:

- Impacts of current and emerging benefit design models in the evolving health care system
- Key considerations and challenges in developing and implementing these benefit design offerings
- Research on key employer priorities in 2014/2015 for health benefits management and health improvement

**Speaker Bio:** Cheryl Larson is the Vice President of the Midwest Business Group on Health. Founded in 1980, MBGH serves as one of the nation's leading non-profit business coalitions of large, self-insured, multi-state public and private employers. She leads the coalitions' educational and networking activities as well as two major research projects – the National Employer Initiative on Specialty Pharmacy and the Employer Communication Toolkit on Benefits Literacy and Consumerism. She is a national speaker on MBGH research, including employer best practices in value-based benefits, incentives, wellness, consumerism, engagement, communications and specialty pharmacy benefits. Cheryl chairs the Worksite Wellness Steering Committee for Building a Healthier Chicago, a community-based initiative of MBGH, Institute of Medicine-Chicago and Chicago Medical Society, founded and supported by the U.S. Dept. of HHS-Region V and Chicago Department of Public Health. She serves on the advisory council for The Center for Employee Health Studies at the University of Illinois/Chicago School of Public Health and on the board of directors for the Center for Health Value Innovation, being named a CHVI Fellow in 2010. Cheryl joined the coalition in 1983 and spent almost 14 years serving as the Director of Membership Development. Previous to rejoining MBGH in 2006, she spent 10 years as the Director of Employer Services for a population health management company.

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**Title: Building Better Healthcare Value in Cincinnati: How employers are collaborating with other healthcare stakeholders to improve health and reduce costs in the Queen City**

**Timing:** March 2014

**Speaker:** Craig Osterhues, Manager, Health Services at GE Aviation

**Attendance:** 90

**Dinner Sponsor:** 

**Breakfast & Host Sponsor:**  BAPTIST HEALTH

**Description:** This forum focused on how Cincinnati is transforming healthcare in their community, GE's role, and the results they are seeing. Below is an excerpt from GE's White Paper on this work. "Since 2010, GE and other large local employers, hospitals, insurers, government, physicians and patients in Cincinnati came together to improve healthcare quality and access to care, and cut costs. If done well, this approach could transform healthcare from an on-going economic risk to a competitive advantage."

*GE HealthyMagination, Building Better Healthcare Value in Cincinnati: How Employers are collaborating with Other Healthcare 2013 Stakeholders to Improve Health and Reduce Costs in the Queen City*

**Speaker Bio:** Craig was born in Cincinnati, Ohio. He attended Miami University in Ohio and graduated with a B.S. degree in finance in 1988. While working in the family business, he received his master in education degree in population health from the University of Cincinnati in 1991. He then joined Dow Chemical's health promotion program in Midland, Michigan, and while being assigned roles of increasing responsibility, he received his master's in health service administration from the University of Michigan in 1998. He joined Towers Watson in Charlotte, North Carolina in 1998 to work with their employer clients as a Health & Welfare consultant specializing in health and productivity strategies. In 2001, he moved to Cincinnati, Ohio to manage the Kroger Company's health care benefits and negotiate union contracts. Craig joined GE Aviation in 2005 as health care manager. In 2010, Aviation loaned Craig to be the executive on loan for healthymagination's health care transformation pilot project in Cincinnati. In 2013, he was chosen to lead Aviation's Global Health Services function, comprising of clinical programs, the HealthAhead wellness initiative, as well as US health care. Craig likes golf, baseball and enjoys being active with his family. On the weekends, he can be found acting as belayer (rock climbing anchor) for his son Jon (13), coaching his son Zack (10), and walking with Denise, his wife of 19 years, and their dog Toby.

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**Title: Why the time has come for....Patient-Centered Medical Homes**

**Timing:** March 2013

**Speaker:** Bruce Sherman, MD, FCCP, FACOEM

**Attendance:** 90

**Event & Dinner Sponsor:**  **MERCK**  
*Be well*

**Breakfast Sponsor:**  **BAPTIST HEALTH**

**Event Host:** 

**Description:** The first KHC Community Health Forum was to educate on why business and healthcare alike are buzzing about the need for Patient-Centered Medical Homes (PCMH). At its core, PCMH is a physician-directed team committed to coordinating care based on patients' needs and priorities, communicating directly with patients and their families, and integrating care across settings and practitioners. The community was able to learn and ask questions from one of the nation's leading PCMH experts.

**Speaker Bio:** Dr. Bruce Sherman serves as Medical Director with the Employers Health Coalition of Ohio, where he brings health management strategies to member employer members, and leads the analytics strategy for the Coalition's member health data warehouse. Dr. Sherman also serves as the consulting Corporate Medical Director, for Wal-Mart Stores, Inc. In this role, he supports the development of integrated, value-based health and productivity management strategies for the organization's associates and family members. A frequent speaker, he has presented workforce health management strategies to diverse audiences, and has published numerous related articles. Dr. Sherman received his MD from New York University School of Medicine, his MA from Harvard University and his bachelor's degree from Brown University. He is board-certified in internal medicine, pulmonary medicine and critical care medicine. Dr. Sherman continues as a member of the clinical faculty in the Department of Medicine at the Case Western Reserve University School of Medicine.

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**Title: Building the Foundation for a New HealthCare System**

**Timing:** June 2013

**Speaker:** Marjie Grazi Harbrecht, MD, CEO

**Attendance:** 65

**Event, Dinner, & Breakfast Sponsor:**  **Event Host:** 

**Description:** The second KHC Community Health Forum was to learn from Colorado's efforts to transform their healthcare system. With realization that the US healthcare system is unsustainable in its current form, there is a tremendous movement across the country to redesign how healthcare is delivered and paid for. One of the preeminent models being implemented and shown to be effective is the Patient Centered Medical Home (PCMH). This presentation concentrated on what a PCMH is; what it includes such as team based care, EMRs/data reports, patient engagement, care coordination/care management, etc. It also touched briefly on the importance of the Medical Neighborhood.

**Target Audience:** Primarily for Primary Care physicians, non-physician providers, staff, their leadership/administration, employers, health plans

**Speaker Bio:** Marjie Grazi Harbrecht, MD, is a board-certified family physician and chief executive officer of HealthTeamWorks (formerly the Colorado Clinical Guidelines Collaborative [CCGC]), which she has led since 1999. Her organization has evolved from developing consensus for evidenced-based guidelines to implementing and evaluating evidence-based care through redesign and culture change at the practice, community and healthcare system levels. Under Dr. Harbrecht's leadership, HealthTeamWorks serves as the lead agency for two major national initiatives: Improving Performance in Practice (IPIP) and the Colorado Multi-Payer, Multi-State Patient Centered Medical Home (PCMH) Pilot. Locally, Dr. Harbrecht is a director of the Colorado Regional Health Information Organization (CORHIO) and the Center for Improving Value in Healthcare (CIVHC), working on the All-Payer Claims Database Committee. Nationally, Dr. Harbrecht's affiliations include the Patient-Centered Primary Care Collaborative (PCPCC) Payment Reform Taskforce and the NCQA PPC-PCMH Advisory Committee.

Dr. Harbrecht received an award from the Colorado Patient Safety Coalition for her work. She lectures nationally about health system change, quality improvement and patient safety and serves as an assistant clinical professor in family medicine at the University of Colorado Health Sciences Center.

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**Forum Title: The Business Value of a Healthy Workforce: Should employers pay or play?**

**Timing:** September 2013

**Speaker:** Thomas Parry, Ph.D

**Attendance:** 110

**Kentucky Department  
of Public Health**

**Dinner & Speaker Sponsor:** *Unbridled Health*

**Breakfast & Host Sponsort:**

 **KentuckyOne Health Partners**  
KentuckyOne Health™

**Dinner Host:**



**Forum Description:** The KHC’s third Community Health Forum with Dr. Tom Parry to discussed the business value of a healthy workforce. As employers seek to understand how the Affordable Care Act will impact their healthcare design and costs, some are weighing whether they should walk away from healthcare. Community members learned from Dr. Tom Parry, CEO of the Integrated Benefits Institute why healthcare should be considered an investment. Are healthier workers more productive? Are businesses focusing on the right strategies for controlling healthcare costs? Businesses learned how to focus on keeping their employees healthy and use data to determine the value proposition of health within their own organization. Dr. Parry will also touch on participation in public versus private exchanges.

**Speaker Bio:** Thomas Parry is President of the Integrated Benefits Institute, a San Francisco-based independent, not-for-profit, national organization incorporated in 1995. The Institute provides research, employer–focused measurement/modeling and benchmarking tools, and educational programs to improve health, lost-time and productivity management through the integration of employee benefits. IBI is supported by more than 790 employers, insurers, health care providers, brokers, third-party administrators, consultants and others interested in health and productivity issues. Employers represent 90% of IBI’s membership. Dr. Parry serves as IBI’s CEO. He is strategically involved in IBI’s research, measurement/modeling and benchmarking programs. He has directed many studies at IBI since its inception— including research analyzing the impact of medical care on disability outcomes, as well as two studies on Chief Financial Officers: the first, examining CFOs’ view of health and healthcare in their companies; the second, assessing how CFOs would link workforce health to business outcomes. He also is the chief architect of IBI’s disability/absence benchmarking and health and productivity measurement programs. Dr. Parry speaks on integrated benefits and health and productivity issues. Before co-founding the Integrated Benefits Institute, Dr. Parry served 11 years as Research Director at the California Workers’ Compensation Institute. His research at CWCI encompassed a wide variety of topics in workers’ compensation. While at CWCI, Dr. Parry was engaged in some of the earliest research and analysis on 24-hour coverage and integrated benefit issues. Dr. Parry received his Bachelor’s, Master’s and Ph.D. degrees from the University of California, Berkeley.

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**Title:** Win-Win-Win Approaches to Improving Healthcare – How Louisville Can Be a Leader in Creating Higher Quality, More Affordable Care

**Timing:** December 2013

**Speaker:** Harold Miller

**Attendance:** 65

**Speaker Sponsors:**  FOUNDATION FOR A HEALTHY KENTUCKY

 KHC Kentuckiana Health Collaborative  
Building a Bridge to Better Health, Better Care and Better Value

**Breakfast & Host Sponsor:**  Anthem  BlueCross BlueShield

**Dinner Sponsor:**  abbvie

**Forum Description:** It's clear that dramatic changes need to be made in the way we deliver healthcare in the U.S. But can we reduce utilization of services without denying patients care they need? Can we reduce costs for employers without creating financial problems for physicians and hospitals? This session focused on how better payment systems for physicians and hospitals and better insurance benefit designs for patients can support higher-quality, lower-cost approaches to care delivery that also enable healthcare providers to remain financially viable. Harold Miller described ways that employers, unions, physicians, hospitals, health plans, and government officials can all work collaboratively to make a successful transition to a more value-driven health care system.

**Speaker Bio:** Harold D. Miller is the President and CEO of the Center for Healthcare Quality and Payment Reform. Miller is a recognized national expert on healthcare payment and delivery reform. His overview of healthcare payment systems, *Better Ways to Pay for Health Care: A Primer on Healthcare Payment Reform*, was published in January 2009 as part of the NRHI Payment Reform Series in conjunction with the Robert Wood Johnson Foundation, and his paper "From Volume To Value: Better Ways To Pay For Health Care" was published in *Health Affairs* in September 2009. He also authored the Center for Healthcare Quality and Payment Reform's report *How to Create Accountable Care Organizations*, the Massachusetts Hospital Association's report *Creating Accountable Care Organizations in Massachusetts*, the American Medical Association's report *Pathways for Physician Success Under Healthcare Payment and Delivery Reforms*, and the chapter on Health Care Payment Systems in the National Governors Association report *Rx for Health Reform: State Roles in Delivery Reform*. In addition to his work with CHQPR, Miller served as President and CEO of the Network for Regional Healthcare Improvement from 2008 through early 2013, and he continues to serve as the Strategic Initiatives Consultant to NRHI. He organized NRHI's national summits on health care payment reform in 2007 and 2008. His report *Creating Payment Systems to Accelerate Value-Driven Health Care: Issues and Options for Policy Reform* was published by the Commonwealth Fund in September, 2007, and his summary of the recommendations of the 2007 NRHI Payment Reform Summit was published by the Jewish Healthcare Foundation as *Incentives for Excellence: Rebuilding the Healthcare Payment System from the Ground Up* in September, 2007. His summary of the 2008 Payment Reform Summit *From Volume to Value: Transforming Healthcare Payment and Delivery Systems to Improve Quality and Reduce Costs* was published in cooperation with the Robert Wood Johnson Foundation in November, 2008. Miller also served as the Strategic Initiatives Consultant for the Pittsburgh Regional Health Initiative from 2006 to 2010; his work with PRHI on how healthcare payment systems impede quality improvement was featured in *Modern Healthcare* magazine in December, 2007. He designed and is currently leading a multi-year PRHI initiative to reduce preventable hospital admissions and readmissions through improved care for chronic disease patients. Miller also served as the Facilitator for the Minnesota Health Care Transformation Task Force, which prepared the recommendations that led to passage of Minnesota's path-breaking healthcare reform legislation in May, 2008. In addition to his leadership of CHQPR, Miller is an Adjunct Professor of Public Policy and Management at Carnegie Mellon University, where he served as Associate Dean from 1987 until 1992.