

## Quality of Care Breakfast Briefing Series

### Quality of Care and the Medical Staff

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Jan Anderson, Partner  
Foley & Lardner LLP  
janderson@foley.com  
312.832.453041

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## Challenges to the Current Medical Staff

### Industry Trends are Changing the Relationship Between Hospitals and Physicians

- Increased national focus on issues of **Patient Safety and Quality** in the health care system
- Proliferation of **Pay for Performance**
- Physicians and hospitals are plagued by **Declining Reimbursement** plus **Increasing Costs** (malpractice expenses, regulatory compliance, technology costs)



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## Challenges to the Current Medical Staff

- More **price transparency** may be required due to patients paying more of their own health care expenses (can only be achieved if physician practices at the hospital are consistent)
- More **quality transparency** may be required (can only be achieved with better infrastructure and aligned incentives to address national patient safety and quality mandates)



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## Challenges to the Current Medical Staff

- Increased **consolidation of hospital systems and proliferation of large medical group practices**
- Increased focus on national goals for **Information Technology** (access to records by all providers, avoid duplication, establishing best practices, streamline reporting)
- **Blurring of specialty lines/turf wars** (ex. Interventional neurology/cardiology/radiology)



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## Challenges to the Current Medical Staff

- **Increasing number of hospital-based specialties**
  - Hospitalists
  - Intensivists
  - OB hospitalists
  - Peds hospitalists
- Growing number of **primarily outpatient-based specialties**, reducing opportunities to build relationships with specialists and hospital-based colleagues

## Challenges to the Current Medical Staff

- **Increased hospital dollars** flowing out to physicians
  - Pay for ED call coverage (viewed as a hospital, not a physician problem)
  - Medical Directors
  - Employment on the rise (again)
- Status Quo is fraught with **Legal Risk** (liability for failure to comply with evidence based medicine, corporate liability, false claims liability for practicing substandard care)