



News

Michael Dowell Authors Article, "Co-Management Re-emerges as a Hospital-Physician Integration Option," in HASC Briefs Focus

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Health care reform promotes performance-based pricing, value-based bundled payments, shared savings, and other payment models that are designed to focus on improving the value of care by improving quality and reducing costs. Clinical integration is a way for hospitals and physicians to bridge the gap between fee-for-service reimbursement and new value-based payment methodologies. The core feature of successful clinical integration requires the strategic alignment, collaboration and integration of hospital and physician goals. In order to recruit and retain physicians whose interest and efforts support service line growth, the hospital's goals for the service line must be aligned with those of the physicians. Engaging physicians in hospital service lines is critical to success, as physicians are the main driver of hospital volumes, profitability, quality and patient satisfaction. Hospitals that fail to achieve clinical integration with their medical staffs will be unable to effectively compete in a "value" driven health care economy.

One way physicians and hospitals are trying to achieve the goal of clinical integration is through co-management arrangements, which have re-emerged in recent years as a hospital-physician integration alternative to joint ventures or exclusive contract arrangements between hospitals and physicians who share mutual interests to lower costs, increase efficiency and improve quality through evidence-based medicine, coordination of care, and outcomes measurement and reporting.

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