



# **UST Executive Conference on the Future of Health Care**

**Fairview Health Services**

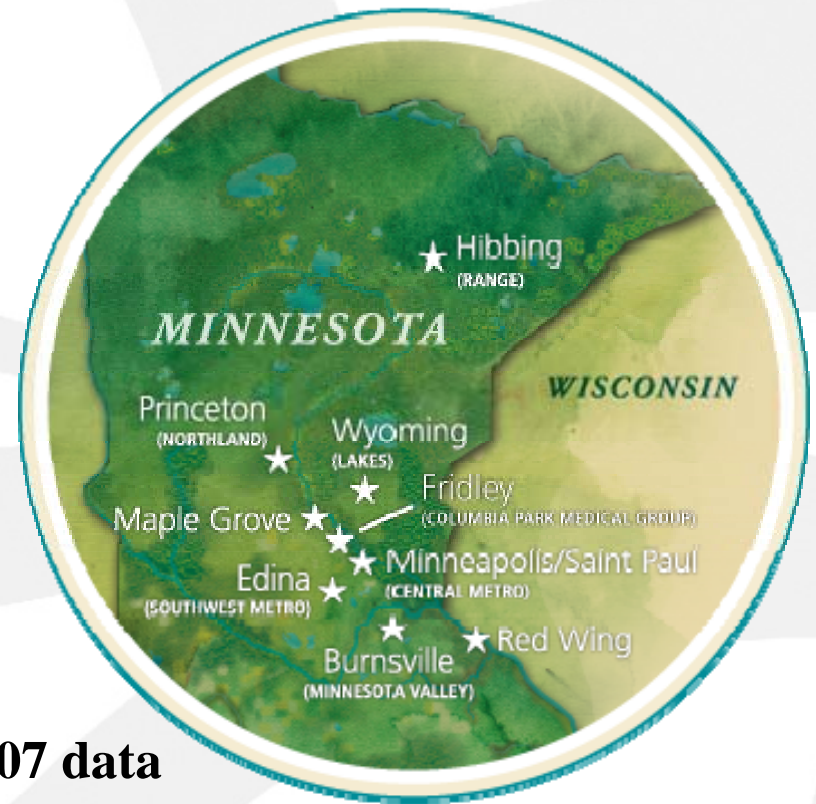
**Mark Eustis, M.H.A.**

**President and CEO**

November 7, 2008

# Who is Fairview?

- Not-for-profit organization established in 1906
- Partner with the University of Minnesota since 1997
- 20,000+ employees
- 2,500 aligned physicians
  - 536 employed
  - 750 UMPPhysicians
  - 220 Behavioral Health Providers
  - 1,000 Fairview Physician Associate members)
- 8 hospitals/medical centers (1,485 staffed beds)
- 45 physician clinics
- 132 other clinics and programs
- 30 senior housing locations
- 30 retail pharmacies and much more



## 2007 data

- 2.7 million outpatients served
- 82,691 inpatients served
- \$340.4 million community contributions
- Total assets of \$2.0 billion
- \$2.3 billion total revenue

# Who is Fairview?

 FAIRVIEW  
RIDGES HOSPITAL

 UNIVERSITY OF MINNESOTA  
CHILDREN'S HOSPITAL  
 FAIRVIEW

 FAIRVIEW  
RED WING MEDICAL CENTER

UNIVERSITY OF MINNESOTA  
MEDICAL CENTER  
 FAIRVIEW

 FAIRVIEW  
SOUTHDALE HOSPITAL

 FAIRVIEW  
NORTHLAND MEDICAL CENTER

 EBENEZER PreferredOne


 FAIRVIEW  
LAKES MEDICAL CENTER

 FAIRVIEW PHARMACY

 FAIRVIEW  
RANGE HEALTH SERVICES

  
MAPLE GROVE  
HOSPITAL  
*A partnership of North Memorial and Fairview*

Columbia Park  
Medical Group  
*Part of Fairview*

INSTITUTE  
OF ATHLETIC  
MEDICINE  
  
*A service of Fairview and North Memorial*

Minnesota  
SPORTS MEDICINE 

# Who is Fairview?

*Our Beliefs*

## Values

Dignity  
Integrity  
Service  
Compassion

*Our Purpose*

## Mission

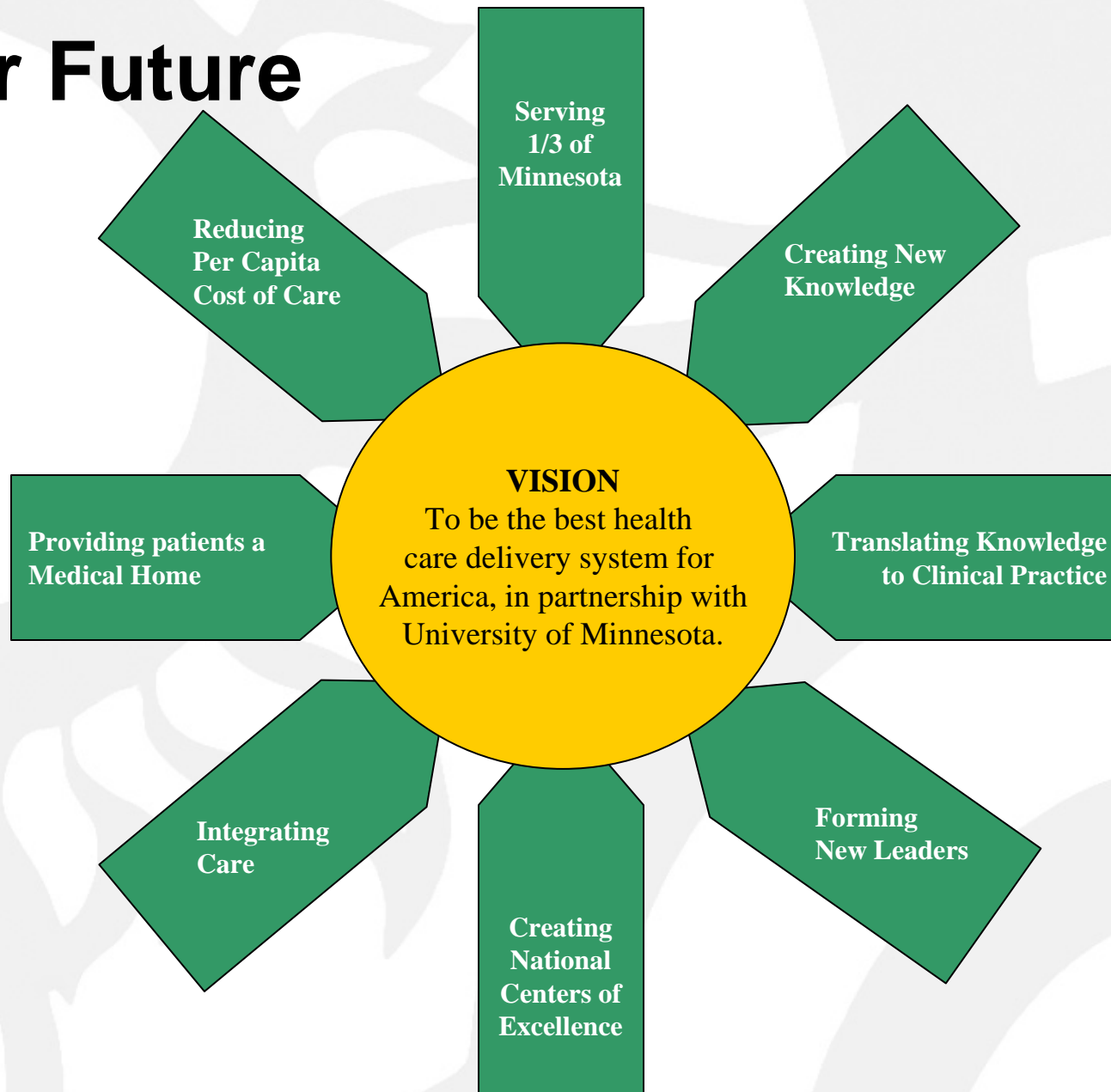
To improve the health of the communities we serve.  
We commit our skills and resources to the benefit of the whole person by providing the finest in health care, while addressing the physical, emotional and spiritual needs of individuals and their families. We further pledge to support the research and education efforts of our partners, the University of Minnesota, and its tradition of excellence.

## Vision

To be the best health care delivery system for America, in partnership with University of Minnesota.

*Our Future*

# Our Future



# What Do We Know?

- Change will come...
- We are being asked to deliver greater “value”
  - Improved clinical outcomes
  - Lower cost
  - Improved “experience”
- We will be asked to care for the health of a “population”
- Payment systems and methodologies will change, rewarding those who deliver “value”

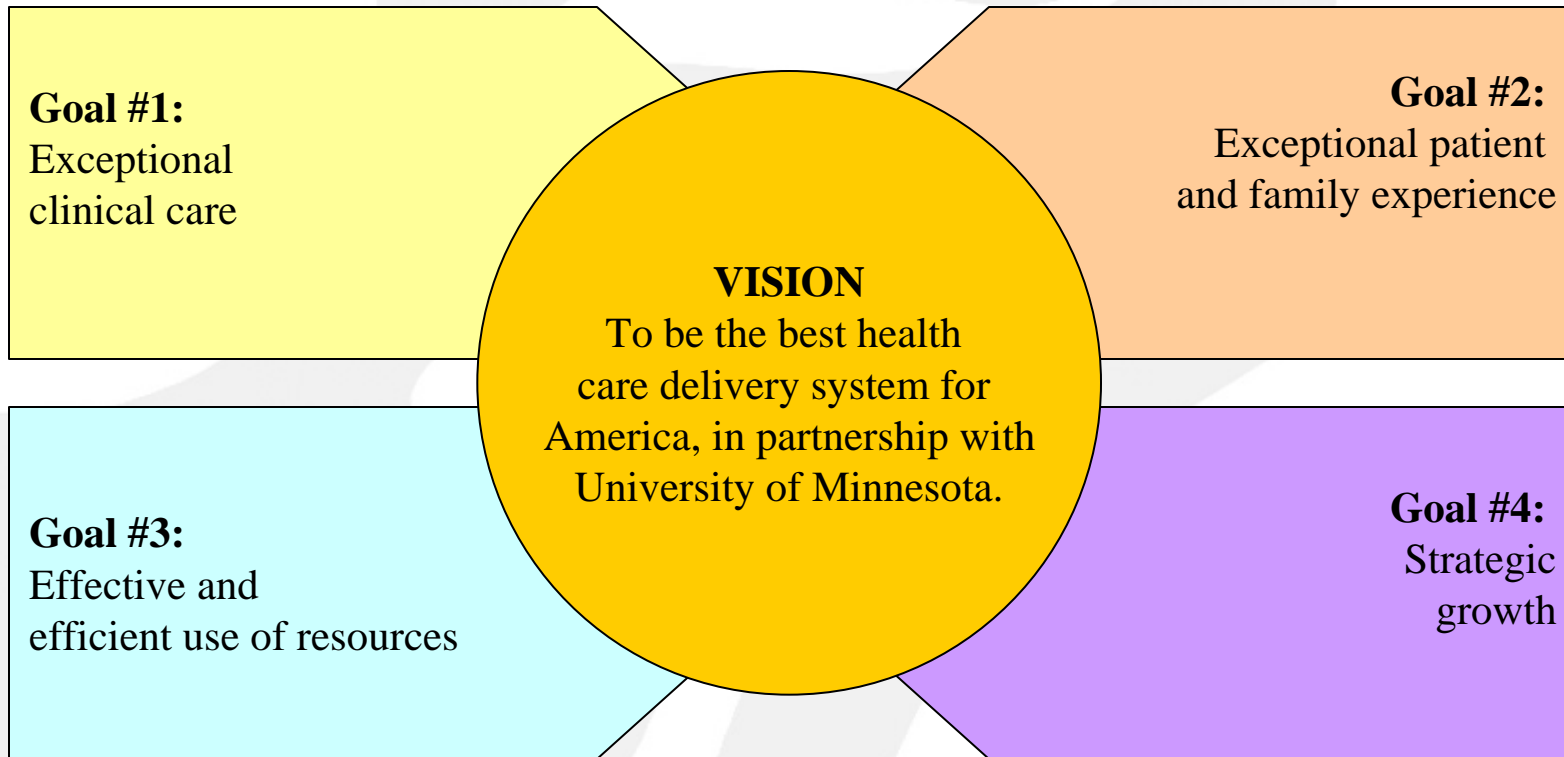
# What's the Work We Must Do?

- Creating the capacity and capabilities to manage the health of a population (geographic populations, employee populations, patients with chronic disease, patients seeking care in a care setting, age cohorts)
  - Integrating care across the continuum of care (aligning the interests and commitments of providers)
  - Redefining the care model to improve health and reduce utilization
  - Broadening access to care (NetClinic, retail clinics, primary and specialty care) and providing a “medical home”
  - Redefining the “care team” and developing the “pipeline” for talent
  - Creating collaborative models for financing care (“enlightened” employers and payers)

# What's the Work We Must Do?

- Providing exceptional clinical care
  - Processes → outcomes → quality of life
- Redefining the patient/family experience
  - “Best experience is no experience”
- Reducing per capita costs
  - Volume and unit cost

# System Goals



# 2009 Strategies

Strategies	Goal #1 <i>Exceptional Clinical Care</i>	Goal #2 <i>Exceptional Experience</i>	Goal #3 <i>Effective/Efficient use of Resources</i>	Goal #4 <i>Strategic Growth</i>
Develop an integrated multi-specialty provider group.	●	●	●	●
Create a strategically and geographically distributed ambulatory care network.	◐	●	○	●
Develop integrated/branded clinical service lines across the system.	●	●	●	●
Establish specialty referral relationships across Minnesota.	◐	○	◐	◐
Create new models of care delivery to improve the health of defined populations.	●	●	●	◐
Invest in research and education that enhances both the academic and clinical enterprise.	●	◐	◐	◐
Create financial capacity to fund quality, innovation and growth.	●	●	●	●

● High impact    ◐ Moderate impact    ○ Low impact

# Capacity and Capabilities – Securing our “Planks”

