

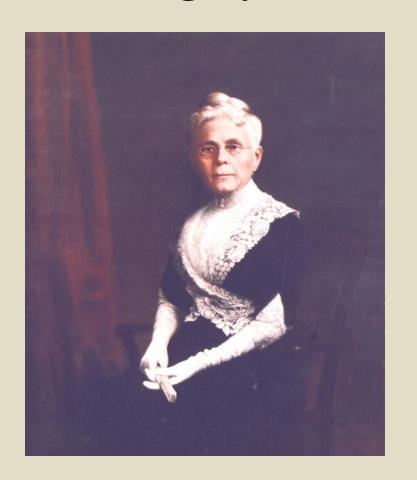
The Vision for the Second Century

Were Serve The Next Five Years

Glenn Steele Jr., MD, PhD President and CEO Geisinger Health System

Geisinger Quality - Striving for Perfection

### The Legacy



"Make my hospital right, make it the best."

Abigail Geisinger 1827-1921

"Geisinger Quality – Striving for Perfection"...2006 - 2011

## Geisinger Health System

#### **Mission**

Enhance the quality of life through an integrated health service organization based on a balanced program of patient care, education, research, and community service.

#### **Geisinger Brand**

- Quality
- Value
- Partnerships
- Advocacy

# Geisinger Health System

An Integrated Health Service Organization

Provider Facilities \$1,036M

- Geisinger Med. Ctr. (+ Janet
- Weis Children's Hospital)
- Geisinger Wyoming Valley Med Ctr
   w/ Heart Hosp. & Henry Cancer Ctr
- Geisinger South Wilkes-Barre
- Marworth Drug & Alcohol Treatment Center
- 2 ambulatory surgery centers
- > 40K admissions
- •~700 licensed in-pt beds

Physician
Practice Group
\$482M

- Multispecialty group
- ~ 800 physicians
- 50 primary & specialty ~
   clinic sites (38 CPSL sites)
- > 1.6 million clinic outpatient visits
- 281 residents and fellows

Managed Care Companies \$954M

- ~235,000 members
- Diversified products
- ~18,000 contracted physicians
- ~ 90 contracted hospitals

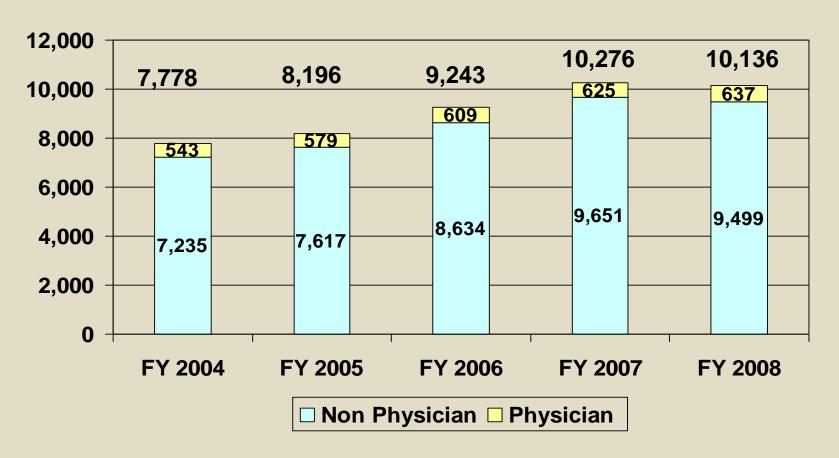
## Electronic Health Record (EHR)

- Decision to implement Epic®: 1995
- > \$120M invested (hardware, software, manpower, training)
- Running costs: ~ 4.4% of annual revenue of >\$2.0B
- Fully-integrated EHR, including clinical results, CPOE, clinical documentation, and all medications, allergies and problems
  - Ambulatory for 38 community practice sites
  - In-patient records at GMC, GWV, and GSWB
  - Specialty modules for ED and OR

## Electronic Health Record (cont'd)

- > 3 million patient records
  - >124,000 active users of MyGeisinger
    - New goal = 200,000
  - >2,300 non-Geisinger users; confidential access (referring physicians)
  - Real-time registries track clinical metrics by dept/physician
  - PACS and web-based image distribution

#### **Total FTEs\***



# Revenue and Expenses – System Patient Services & Supporting Operations

	FY04	FY05	FY06	FY07	FY08
Revenue	\$1,285,789	\$1,431,354	\$1,591,708	\$1,732,888	\$1,907,280
Expense	<u>1,272,603</u>	<u>1,382,263</u>	<u>1,503,180</u>	<u>1,647,168</u>	<u>1,824,880</u>
NET	\$ 13,186	\$ 49,091	\$ 88,528	\$ 85,720	\$ 82,400

- Geisinger bond rating affirmed AA+ by Standard & Poor's
- Moody's affirmed Aa2 rating Feb. 2008

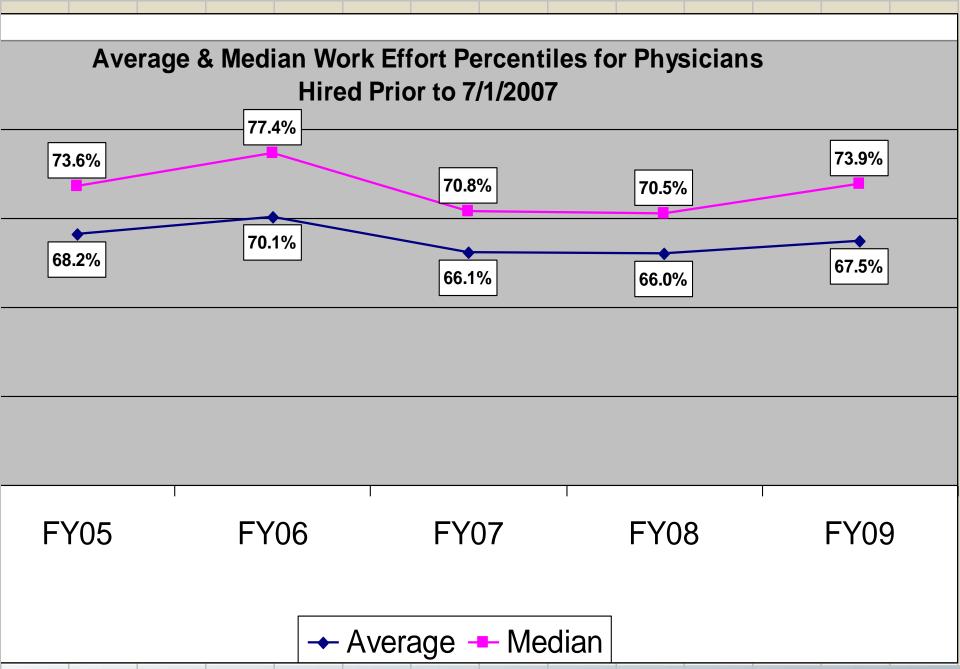
# Volume Statistics Discharges<sup>1,2</sup>

	FY04	FY05	FY06	FY07	FY08
GMC	20,558	21,957	22,704	23,147	22,618
GWV	7,807	8,265	8,975	9,161	9,328
GSWB			4,048 <sup>3</sup>	6,582	5,549
Marworth	<u>1,222</u>	<u>1,207</u>	<u>1,230</u>	<u>1,304</u>	<u>1,318</u>
TOTAL	29,587	31,429	36,957	40,194	38,723

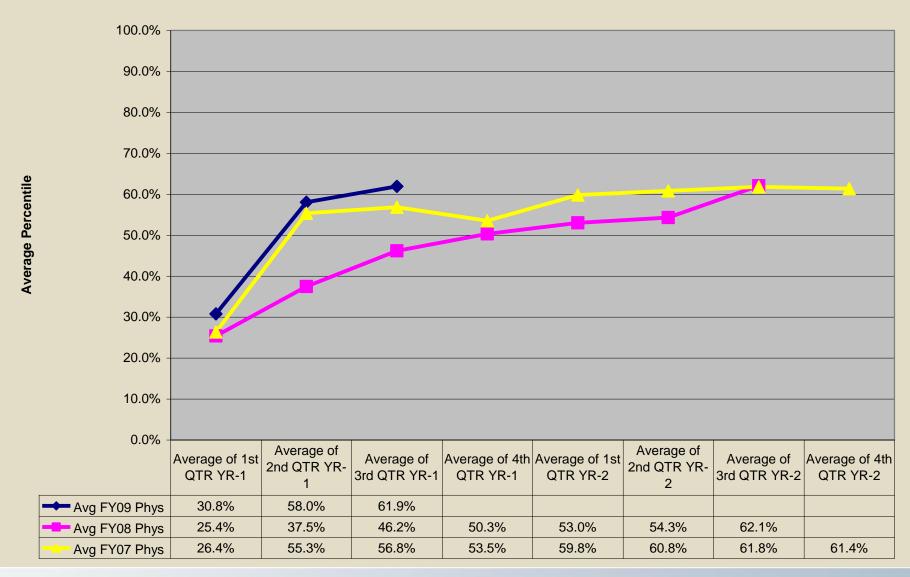
<sup>&</sup>lt;sup>1-</sup> Excludes nursery

<sup>&</sup>lt;sup>2-</sup> Includes dramatic shift to 23-hour stays, not recorded as discharges

<sup>3-</sup> Seven-month period



#### Avg McGladrey %tile for Non-CPSL Physicians Hired FY07, FY08, FY09



# **FY08 Community Benefit**

(in millions)

Uncompensated Care	\$ 21.7
Governmental Underpayments	167.3
General Program Services	32.2
Community Outreach	5.2
Community Assistance Payment	0.4
Volunteer Hours	2.9
Total Geisinger Community Benefit	\$229.7

## **Capital Investments**

- "Best Practice" capital allocation system
- Strong central controls exerted

- FY02 \$69.8M

- FY03 \$50.5M

- FY04 \$50.3M

– FY05 \$72.5M

– FY06 \$91.0M

– FY07 \$157.0M

– FY08 \$220.0M

- FY09 \$235.2M\*

Philanthropic capital campaign of \$75M; 80% completed

<sup>\*</sup>Spending to this amount will be driven somewhat by economy

# The Vision for the Second Century The Next Five Years\*

- Geisinger Quality
- Innovation
- Market Expansion
- Securing the Legacy

\*Predicated on maintaining healthy operations

# Targets for the Geisinger Transformation

- Unjustified variation
- Fragmentation of care-giving
- Perverse payment incentives
  - †Units of work
  - Outcome irrelevant
- Patient as passive recipient of care, not active participant

#### **Transformation Initiatives\***

- ProvenHealth Navigator (Advanced Medical Home)
- Chronic Disease Care Optimization
- ProvenCare® for acute episodic care (the "warranty")
- Transitions of Care

\*Achievable only through innovation

# Challenges

- Quality and Value
- Operational success
- Revenue and Losts
- Capital appetite
- In- and out-patient shifts
- Facility limits
- Maturing staff Bench strength (Securing the Legacy)
- National commitments vs. regional business success

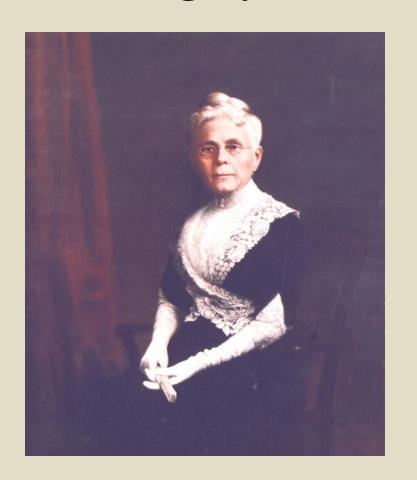
#### **Economic Down-Turn Effects**

#### On:

- Patients
- Providers
- Hospital platforms
- IT vendors
- Us (Geisinger)

### **GAPP**

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