Many health systems across the country are not getting all the value they expected from their employed physician practices. One of the main reasons why: these systems allow their medical groups to operate under traditional practice management models, allowing individual practices to remain fairly autonomous rather than aligning the practices around system-wide quality, efficiency, or loyalty goals. Our research identified a different approach, what we’re calling the “high-performance medical group”—and we’ve distilled the 16 steps to become one.

**16 Steps to the High-Performance Medical Group**

1. Define and codify common culture
2. Create communication protocols
3. Build physician governance
4. Invest in leadership training
5. Begin to invest in common EMR
6. Establish peer hiring, service standards
7. Develop group dashboard
8. Design onboarding program
9. Share individual performance data
10. Centralize referral scheduling
11. Reward quality
12. Establish access protocols
13. Define clinical pathways
14. Redesign primary care
15. Deploy care management resources
16. Reward coordination

Reap the Rewards

**GET OUT OF THE BLOCKS**

- **Shared Identity**
  - Physicians view themselves as part of a single organization with a common purpose
  - Administrators and physicians agree on a vision of shared values and goals
  - Clinicians more easily accept new processes and standards
  - Group able to achieve economies of scale through shared resources
  - Open information exchange facilitates administrative and clinical coordination

**GAIN YOUR STRIDE**

- **Early Returns from Integration**
  - Culture-based candidate screening minimizes later physician turnover
  - New hires more rapidly internalize group processes, cultural norms
  - Administrators able to easily spot best improvement opportunities
  - Enhanced in-network referral capture boosts revenue performance
  - Group begins to move dial on quality, efficiency, patient satisfaction

**FINISH STRONG**

- **Care Redesign**
  - Improved access, convenience, and service attracts patients
  - Unnecessary—and expensive—variation in clinical care reduced
  - Care management efforts improve outcomes for complex patients
  - Clinicians streamline patient handoffs, eliminate care redundancies
  - Health system prepared to meet emerging value-based imperatives