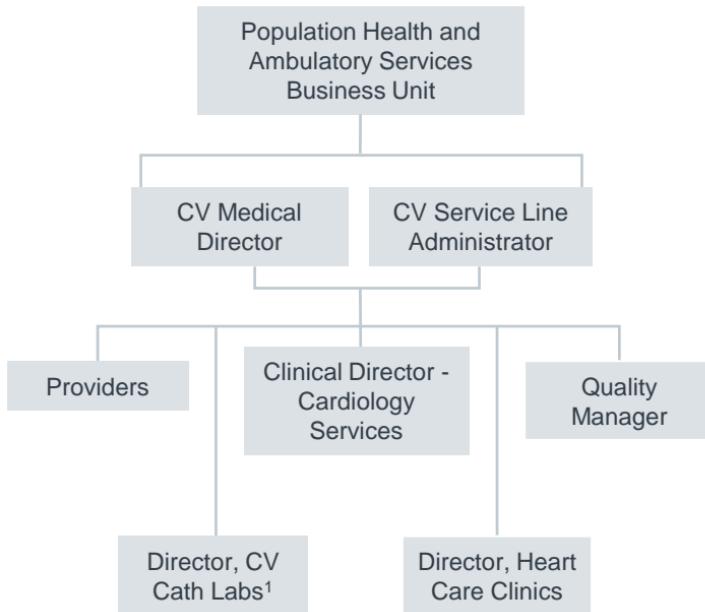


Kander Care System

CV Reports Through Ambulatory in New Org Chart

Kander Heart Care Organizational Chart



Key Innovations

- CV leadership dyad reports through Population Health and Ambulatory Services Business Unit
- Robust inclusion of outpatient services in CV service line, including cardiology clinics, rehab, and physician offices
- Providers (i.e., physicians), directors report to both dyad members, promoting shared responsibility and alignment

Additional Features

- Clinical Director for Cardiology Services oversees hospital-based non-invasive cardiology, CV surgery, cardiac rehab, device clinic; supported by five clinical managers
- Director for Heart Care Clinics oversees physician offices; supported by one clinical, one administrative manager

1) Includes coronary and EP labs.

Program in Brief



Kander Care System¹

- **Hospital Type:** Five-hospital, multi-clinic not-for-profit system based in the Midwest
- **Model Summary:** CV service line organization reporting to ambulatory business unit incentivizes population health management rather than acute care financials
- **Impetus:** Reshape physician incentives to focus on total cost management; CV services shifting outpatient
- **Leadership Model:** Physician-administrator dyad
- **CV Services Reporting through Service Line:** Inpatient and outpatient cardiology, cardiac surgery services, cardiac rehab, scheduling, quality reporting
- **Governance Structure:** CV practice committee informs key aspects of service line strategy, but no standalone executive council; weekly operations meetings of key service line staff and directors provide regular opportunities for strategy development
- **Financial Model:** Consolidated profit and loss statement across inpatient and outpatient care sites
- **Strategic Planning Process:** Physician-administrator dyad develops strategic plan with input from all impacted business units, operational units
- **Participation in Risk-Based Contracts:** Medicare Shared Savings program; local commercial ACO; 25% of system contracting now risk-based
- **Physician Alignment:** All CV specialists employed; specialists reporting to service line include non-invasive cardiologists, interventional cardiologists, CT surgeons
- **Facility Model:** No standalone facility for heart and vascular; services throughout campuses
- **Impact of Structure:** Improved alignment with population health goals, reduction in total cost of care