

**PO Collaborative
2019 Physician Experience**

Date Scheduled	Wednesday, August 28, 2019		
Meeting Time	5:00 p.m. – 7:00 p.m.		
Location	HMSA Center (Koa)		
Facilitator	Cary Koike Heather Miyasato	Recorder	PT Staff PS Staff

1. Agenda

The PO Collab was called to order at 5:00PM at the HMSA Center.

The purpose of the Collab was to provide the POs with the opportunity to present on their Physician Burnout survey findings and brainstorm ideas for their action plan due in Q4 2019. Cary Koike thanked the PO Leaders for working diligently with the providers to complete the survey.

Heather Miyasato, Director of Health Finance, informed the POs about the deadlines for the remainder of the year and asked the POs to think about how they want the topic of Physician Burnout to carry forward in 2020. Heather asked the POs for their input on providing quarterly progress reports on their action plan as part of the 2020 Engagement Measures.

2. PO Physician Experience Survey Sharing

Each PO provided a 5-minute presentation on their survey results. Please refer to the attached slides for additional information.

The order of the presentations was as follows:

- EHI (Well-Being Index) – Survey results showed physicians showed a slightly higher level of stress than the national average. Female providers showed higher levels of stress than male counterparts. Pediatricians showed significantly lower levels of stress compared to Adult Medicine physicians. Some major contributors to burn-out are cumbersome EHR, excessive administrative burden, “silo-ization” of health care, and loss of autonomy.
- PMAG (modified Mini-Z Survey) - Modified survey included Specialists as well as FFS providers. Some contributors to physician burnout included Coreo issues, respect, quality metrics, and charting. Professional satisfaction levels were lower among Pediatricians (PMAG has the highest number of pediatricians than any other PO.)
- Castle (Physician Fulfillment Index) – Survey results showed that generally the physicians were fulfilled with their work and showed little to no burnout. Some of the contributors to physician burnout are administrative burden, specifically reporting multiple codes for some metrics, attribution in Coreo, and PRU methodology.

- Hawaii IPA (Mini Z Survey): Survey results showed that providers feel their values are not aligned with payer expectations and have loss of control and autonomy with their roles. The physicians that feel burnt out treat 51% of the PO's patient population.
- MSMP (Physician Wellness Professional Fulfillment Survey) – 26/28 providers responded to the survey. Scores were positive around work being meaningful and around patient engagement.
- Queen's (Well-Being Index) – Survey results showed that 51% of physicians felt burnt out. Providers with paper charts and scribes showed lower levels of stress. To reduce stress, POs will optimize EMR to streamline referrals and network with peer providers.
- HFH (Physician Wellness Professional Fulfillment Survey) - Some major contributors to burnout are due to administrative burden, attribution, and quality metrics.

3. Discussion

POs discussed the following:

- Utilizing one standard survey to determine the sources of physician burnout at a network level.
- POs to categorize the survey comments into the 7 drivers from the Mini-Z Survey and send to the HMSA team for consolidation.
- Short term priorities included attribution and Coreo.
- Reporting on quality metrics with various payers. Quality measures align with HEDIS, STARS, and State measures.
- EMR Integration
- Physician Wellness Intervention

Please refer to the attached themes matrix for additional information.

4. Closing

The meeting was adjourned at 7:00PM.