

**Leadership Team  
Meeting Summary  
March 13, 2015**

**Present:** Nic Apostoleris, Bob Baldor, Katharine Barnard (phone), Alan Chuman, Joe DiFranza, Dennis Dimitri, Jim Ledwith, Melissa McLaughlin, Val Pietry, David Polakoff, Stacy Potts, Herb Stevenson, Linda Weinreb

**Excused:** Sandy Blount, Frank Domino, Steve Earls, Warren Ferguson, Dave Gilchrist, Beth Koester, Dan Lasser

**Brief Items:**

Bob Baldor chaired the meeting on behalf of Dr. Lasser. He started the meeting off with a brief review of the Department's event calendar which included the following:

<b>March 20</b>	Match Day
<b>March 20-21</b>	MAFP Spring Refresher, Boston
<b>March 20-21</b>	Academic Health Policy Conference on Correctional Health, Boston
<b>April 7-8</b>	Primary Care Days, Doubletree Hotel, Westboro
<b>April 25-29</b>	STFM Annual Spring Conference, Orlando
<b>May 1</b>	Mass Medical Society Dinner: Inauguration of Dennis Dimitri as President
<b>May 15-16</b>	Leadership Team Retreat, 9am-12pm * Wachusett Country Club, West Boylston Spring Faculty Retreat
<b>May 29</b>	New Faculty Breakfast #3
<b>May 31</b>	UMMS Graduation
<b>June 12</b>	Worcester Family Medicine Residency Graduation * Tower Hill Botanical Gardens
<b>June 19</b>	Fitchburg Family Medicine Residency Graduation * Chocksett Inn

**Mass Medical Society Dinner** – The Department will be reserving a table for the MMS dinner in honor of Dennis' inauguration as President on May 1. If you are interested in attending, contact Jean Roy so you will be included in the Dept's table.

**Putterman** – Bob made a brief reminder about completing the online Putterman ballot. Those in attendance were also invited to complete a paper ballot if they preferred. Based on the feedback, Warren will begin to contact individuals and extend invitations to join us in the Fall.

**EPC awards** – Melissa reminded the team about the upcoming EPC Star awards; nominations are due March 28. These awards recognize faculty who have been innovative in medical student education.

**Sandy Blount** – As of June 30 Sandy will be reducing his time in the Department to 30% and leaving his role as Director of Behavioral Science. Sandy has accepted a Professor position at Antioch College in Keene, NH. He will continue to devote a day and a half a week to the leadership of the Center for Integrated Primary Care. He has been filling the BS role in Fitchburg on a short term basis, leaving a hole that will need to be filled.

**Budget** – Alan briefly recapped the financial issues facing the Department in FY16: loss of HRSA funding (\$200-450k), loss of funding from the medical school (\$300k), challenge of finding a way to provide raises to faculty.

**Main Discussions:**

1. Raises or resources? – Bob engaged the team in a discussion about providing raises to the faculty. We are currently within the AAMC benchmark (50<sup>th</sup>- 75%tile) for salaries and over the past two years have focused raises on junior faculty. He questioned whether salaries or starting salaries are hindering recruitment and retention efforts and whether current faculty would support raises or be more supportive of designating dollars to specific practice improvement initiatives. Overall:
  - Retention: raises will not make a difference. The faculty are most focused on making the practices more efficient to provide a more satisfying work environment.
    - Exception: Sports Medicine program hears frequently that the salaries are lower than market; their practices are very efficient.
  - Recruitment: Finding that young applicants are in an “I want it now” mindset. The signing bonuses have worked well in recruiting our own residents to accept faculty positions. Additionally we are able to do signing bonuses with our external candidates, typically a \$10k signing bonus and in some cases a retention bonus. We discussed bumping these amounts slightly and Alan explained that it is in our ability to do that when needed.
  - The team supported the idea of forgoing raises with the understanding that the Department would make a commitment to providing specific support to the practices to improve efficiency (i.e. hire care manager/social worker, MA or secretary) that are locally tailored to the site. The practices are being held more accountable than ever but need resources to get the work done.
2. Comp Plan (strawman proposal)
  - Dennis gave an overview of the design of the comp plan to date and its emphasis on RVUs. The strawman he presented includes a small component related to panel size. We currently receive only about 5% in global payments but the change is coming and this modification in the comp plan helps move us in the right direction.
  - Dennis’ draft proposes carving out some percentage of the total annual incentive payment (10%, ~\$50k) that would be distributed based on panel size. Practices would then distribute that amount within the practice based on the preference of the Medical Director/faculty. The Team agreed that this seemed reasonable to do at this time with the exception of sports medicine.

#### Challenges:

- OCI is still working on calculating the right panel size and practices are continuing to clean up the registries to properly allocate patients to PCPs.
- OCI also continuing to work on risk adjusting within panels as well as HCC coding requirements. Katharine Barnard noted that while HCC coding assists in the risk adjustment work, it doesn't allow entering other levels of complexity in the EMR seen frequently in underserved populations like socioeconomic status, not speaking English and low health literacy.
- Bob suggested using the "dual eligible" designation as one way to identify these patients. Dennis agreed to look into this.
- Linda Weinreb suggested having a conversation with Arlene Ash in QHS re: panel size research she has been involved in. Dennis agreed to have a conversation with her and include possibly Linda and Ron Adler.

The meeting concluded with a brief review of the recent Leadership Team survey responses and a brief discussion about possible LT retreat topics.