Providers Look to Creatively Revolutionize Care

Labs, Investments Target Nontraditional Approaches

By SHERRY HSIEH

Innovation in healthcare, when it comes to medical devices and pharmaceuticals, isn’t new. But technology relating to patients, such as health records and how patients interact with healthcare providers, can be lacking. The new territory means looking for ways to engage and care for patients outside of traditional hospital settings or office visits.

The territory is familiar for the Orange County providers the Business Journal spoke with, though it’s an ongoing conversation, and each provider tackles technology and innovation differently.

The Centers for Medicare & Medicaid Services, meanwhile, has developed financial incentive programs for healthcare providers to adopt technology into their systems, including initiatives that reimburse care providers that use electronic health records to achieve better health outcomes. Reimbursement also extends to remote chronic care management, and increasingly to telemedicine.

Lab

Kaiser Permanente Southern California houses an Innovation Studio at its new Tustin Ranch medical office.

“We purposely put this innovation studio at the back of an operational clinic because we want to be as close as possible [to], but not in, the operation space so we can get interactions with doctors and patients,” Chief Innovation and Transformation Officer Tadashi Funahashi said.

The lab opened five years ago with the goal of creating solutions to deliver better, more cost-effective care.

“Our model is fundamentally a prepaid model,” Funahashi said. “A hospital [setting] is a very expensive way to deliver care, but what if we can compress the number of face-to-face visits and still deliver [quality] care?”

The innovation studio focuses on three areas: virtualized care; data analytics for personalized care; and incorporating patients’ social networks into their care. Funahashi said, “We are more aggressively pursuing the third component.”

That aspect takes into account socioeconomic status, education, employment and social support networks that affect how people live and age.

“When you buy a car, you want advice from your mom, friends … so why don’t we bring your social circle into your critical care?” Funahashi said. “Say a [patient] is sick with diabetes or high blood pressure, but he has a loving daughter who helps him with his diet … Maybe when we interact with a patient, we should have his family or friends come in for consultation hearings, or even [have the family or friend join using] video, with the patient’s permission … get everybody involved who would be responsible for his exercise, diet.”

Rendering: Kaiser Permanente’s planned La Habra campus will debut patient-centered innovations
CARE AND COVERAGE. HAND IN HAND.

Nothing should come between you and a long, healthy life. So we’ve removed the barrier between health care and coverage, giving you the care you need and the coverage you deserve. It’s simply health care made simple. Visit kp.org/orangecounty today because together we thrive.
Information below shows ownership of OC hospitals on this week’s list (see page 24). The No. 1 local hospital by net patient revenue—UC Irvine Medical Center in Orange—is a stand-alone site affiliated with the University of California-Irvine. See pages 18, 22 and 26 for more coverage of OC hospitals.

**OC Hospitals**

**LARGEST LOCAL SYSTEMS**

- Kaiser Permanente
  - Kaiser Permanente Orange County (Irvine)
  - Kaiser Permanente Orange County (Anaheim)
- Kindred Healthcare
  - Kindred Hospital (Westminster)
  - Kindred Hospital (Brea)
  - Kindred Hospital (Santa Ana)
- MemorialCare Health System
  - Orange Coast Memorial (Fountain Valley)
  - Saddleback Memorial (Laguna Hills)
- Prime Healthcare Foundation/Prime Healthcare Services
  - AHMC Anaheim Regional Medical Center (Anaheim)
  - College Hospital (Costa Mesa)
  - Health South Tustin Rehabilitation Hospital (Tustin)
- St. Joseph Memorial Presbyterian Hospital (Newport Beach)

**Individual Hospitals**

- AHMC Anaheim Regional Medical Center (Anaheim)
- College Hospital (Costa Mesa)
- Health South Tustin Rehabilitation Hospital (Tustin)
- Newport Bay Hospital (Newport Beach)
- HealthBridge Children’s Hospital (Orange)
- CHOC Children’s Hospital of Orange County (Orange)
- Children’s Hospital of Orange County (Orange)
- CHOC Children’s at Mission Hospital (Mission Viejo)
- Orange County Global Medical Center (Santa Ana)
- Anaheim Global Medical Center (Anaheim)
- South Coast Global Medical Center (Santa Ana)
- Chapman Global Medical Center (Orange)
- Fountain Valley Regional Hospital & Medical Center (Fountain Valley)
- Los Alamitos Medical Center (Los Alamitos)
- Placentia-Linda Hospital (Placentia)
- KPC Healthcare
- South Coast Global Medical Center (Santa Ana)
- Chapman Global Medical Center (Orange)

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At MemorialCare, our personalized employer health care plan solutions include:

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- Direct-to-employer options that fit your business

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Value-based care delivery, since former President Barack Obama signed the Affordable Care Act into law in 2010, is the standard in the healthcare industry. Reimbursements continue to drive medical technology advancements and a greater emphasis on outpatient care delivery, including preventive care. The move to reduce the duration of hospital stays isn’t new, but increasingly healthcare providers are looking for ways—leveraging technology as well as non-healthcare community entities—to tailor patient wellness outside of hospital settings.

The Business Journal’s Sherry Hsieh asked some Orange County hospital executives to address how the care providers navigate the paradigm. Here are edited excerpts of their responses:

**BARRY ARBUCKLE**
Chief Executive
MemorialCare Health System
Fountain Valley

At MemorialCare, we are committed to reenvisioning what value means in healthcare. We are profoundly different than what we were decades ago. This is most evident in our transformation into a community hospital that is based, outpatient care and fee-for-value model. We have five hospitals and we have expanded our ability to serve physician-based consumers in Orange County with over 200 sites of care—outpatient physician locations and urgent care, imaging, kidney dialysis and surgery centers. We are uniquely positioned to provide consumers with high-value health, wellness, prevention, chronic disease management and treatment in the right location, with the right services and at the right price. Unlike most health care systems across the county, our ambulatory centers are not operating under the hospital license as a hospital-based outpatient department, but instead are operating as ambulatory care centers. While hospital-based programs result in higher reimbursement rates, our approach offers considerably more value with high quality and lower prices for employers, health plans and consumers.

Thanks to technological advances, for example, many surgical patients who spent days in a hospital now receive care easily accessible in outpatient centers without an overnight stay. The biggest change with physicians is not how much but how they are being paid. An increasing amount of reimbursement is tied to patient satisfaction and quality outcomes. You want to measure, but you also want to improve overall wellness so you can reduce costs.

The core of the business is changing. For the last five to seven years, we have seen the shift from the inpatient to the outpatient model, and the shift continues, driven by lower reimbursement as well as advances in technology—it’s sometimes more about providers training physicians to learn more skills.

The [Hoag] Orthopedic Institute, which performs more total hip and knee replacements in California, can do joint replacement surgery in a day. This is less expensive compared to the prior five- to eight-day recovery time. You can come to a clinic in the morning and be done with surgery in the afternoon. We also do a lot of gynecologic surgeries, and the da Vinci robot is very precise in making small incisions. The surgery used to take three to four days, but now you can go home on the same day the surgery was performed, which is the most expensive.

Sometimes you need hospitalization, but we are also seeing technology helping to reduce recovery time. Every day you are not staying in the hospital, that is a lot of cost saved.

But our goal is to provide good care that produces good outcomes with maximum efficiency, not reduce costs.

We are one of the most advanced in terms of technology. We have the Surgical Navigation Platform from Advanced Platform from Surgical Theater LLC that uses virtual reality to allow neurosurgeons to fly through a patient’s brain to get a better look at tumors, nerves, blood vessels and tissue prior to surgery. We are one of only 10 nonacademic hospitals to have this technology in house. That’s pretty impressive for a community hospital like ours.

In terms of the technology we are investing in within the hospital’s four walls, we are doing telehealth and digging deeper into technology to do with understanding human genomics.

How you think about healthcare should come from communities that you serve, how [this community] thinks about healthcare and what they need from it. When we first opened Hoag Hospital Irvine last year, we needed to hire about 900 employees. About 400 of them were transferred from Newport Beach, but the new hires, we were looking for people who can understand health of patients and kids about proper nutrition, obesity, as well as mental and physical health. Clearly a huge part is technology, and also a huge social media piece as to how you can educate people within your community and how you define community, really should be broader. In reality, kids touch a lot of community entities, religious, education. We are the top regional center for innovations in pediatric care. Our emergency room will come close to seeing 150,000 visits last year. Add another 30,000 at Mission Hospital. If you care of a kid, say with cancer or open-heart surgery, that type of thing takes a large interdisciplinary team ranging from surgery, radiology to child and family counseling.

Something I am really excited about is mental health. We are building the first inpatient psychiatric beds in California.

The reason we have so few psychiatric beds is that insurance doesn’t pay for them. You don’t want to pay at risk 20% of such a money loser, it’s not a good business plan—but we are doing it because that’s what you need to do to support this community (see related story, page 26).

**LEE PENROSE**
Chief Operating Officer
Acute Care Services
St. Joseph Hoag Health
Irvine

The last 10 to 15 years led to the creation of partnerships that are different from the prior relationships. A lot of concepts have changed, including the concept of wellness, emergency room care, and the development of healthcare providers providing a network of care.

Reimbursement, if left alone, can be divisive for providers. If a hospital is succeeding financially, that means insurance is losing money. There’s a misalignment, and that might not be best for patients.

An important challenge would be in getting more efficient in finding better patient outcomes while cutting down costs.

In my role, I am very close to the issue. There are many places you can go for healthcare, ambulatory care, urgent care, emergency room ... and depending on where you go, the cost spectrum increases or decreases.

Going to see your primary physician [in his or her office] is the most affordable [option], and more importantly there’s continuity of care. Your primary physician knows your family personal medical history and can therefore provide more comprehensive care. An emergency room visit is extremely expensive.

I would never want to dissuade somebody who absolutely needs to go to an emergency room not to go, because that’s why we are there, fully-staffed 24/7. But if you can get the same comprehensive care at a setting that is less expensive, there’s no reason that you should go to an emergency room.

We know people get frustrated, especially now that it’s cold and flu season, when it’s hard to get a same-day appointment with your physician, and even urgent care can be frustrating because of the long wait time, so people may end up going to an emergency room. One thing we are trying to do in balancing the workload is to open up more urgent care centers and try to make them as accessible as possible.

There’s no perfect science to it. When a patient comes into an emergency room, we assign a code based on the level of acuity, levels one through four. We have noticed a drop in level one visits, pointing to the fact that there’s a good reason to do this. We are really freeing up capacity for the sickest of the sick.

I think every health system is different, different geography and a different demographic. What we have in common is every health system is trying to find ways to better coordinate their services both in ways we offer services to the community and how we run our facilities ... there’s no perfect science to it. When a patient comes into an emergency room, we assign a code based on the level of acuity, levels one through four. We have noticed a drop in level one visits, pointing to the fact that there’s a good reason to do this. We are really freeing up capacity for the sickest of the sick.
TRANSFORMING THE FUTURE OF HEALTH CARE

Peruse any list of the fastest-growing professions and the results are clear: Healthcare jobs are in high demand. With an increased senior population, healthcare reform, and advances in medical technology, the industry is expanding and changing at a rate few can predict.

Chapman University’s Harry and Diane Rinker Health Science Campus in Irvine was created to meet these demands for tomorrow’s advanced healthcare professionals. Equipped with technologically sophisticated classrooms and laboratories, the Rinker campus is a place for education, research and treatment, all within a collaborative and inter-professional environment.

Chapman University’s School of Pharmacy (CUSP) and Crean College of Health and Behavioral Sciences, both located on the Rinker campus, are shaping learners into leaders. Offering personalized, interdisciplinary approaches to understanding health, medication use, therapy research, disease and treatment, CUSP and Crean College are poised to transform the future of health care.

Graduate degrees offered in:
- MS Athletic Training*
- MS Communication Sciences and Disorders*
- MA Marriage and Family Therapy*
- Pharm.D.*
- MS Pharmaceutical Sciences*
- Doctor of Physical Therapy*
- MMS Physician Assistant*
- Ph.D. Pharmaceutical Sciences*

*School of Pharmacy
†Crean College of Health and Behavioral Sciences
‡Classes taught at Chapman’s main campus in Orange

chapman.edu/pharmacy
chapman.edu/crean
HOSPITALS

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<th>Comment</th>
<th>Top-level officials</th>
<th>Parent company</th>
</tr>
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</table>
| 1    | UC Irvine Medical Center | 101 The City Drive, S Orange 92666-2037 | ucinewhealth.org | info@ucnewhealth.org | 714-456-8300 | 714-456-8301 | 5300 | 509.125% | 20% | 413 | 6.80% | University of California, Irvine | Howard J. Fredrickson, vice chancellor, health affairs
| 2    | Hoag Memorial Hospital Presbyterian | 1100 W. Stewart Drive Newport Beach 92666-6100 | hoag.org | info@hoag.org | 714-794-4300 | 714-794-3000 | 441 | 5.45% | 0% | 527 | 5.2% | Hoag Memorial Hospital Presbyterian | Robert T. Breathwell CEO/President
| 3    | St. Joseph Orange-Orange | 1100 W. Stewart Drive Orange 92666-6600 | sj.org | sjoinfo@stjoe.org | 714-335-5000 | 714-335-5001 | 379 | 4.1% | 0% | 201 | 2.0% | St. Joseph Health | Steven C. Moser CEO/President
| 4    | Mission Hospital | 2700 Medical Center Road Mission Viejo 92699-6426 | missionhospital.org | missioninfo@missionhospital.org | 714-366-3100 | 714-366-3101 | 323 | 0% | 0% | 323 | 2.6% | Mission Health | Yasmeen Shoxs
| 5    | CHOC Children's Hospital | 1201 E. Valencia Mesa Drive Fullerton 92835-3873 | choc.org | missioninfo@choc.org | 714-501-5500 | 714-501-5501 | 279 | 3.1% | 10% | 279 | 3.5% | Children's HealthCare of California | Kimberly C. Corbo CEO/President
| 6    | St. Jude Medical Center | 101 E. Valencia Mesa Drive Fullerton 92835-3873 | sjmedicalcenter.org | sjmedicalcenterinfo@stjude.org | 714-566-3000 | 714-566-3001 | 220 | 1.9% | 11% | 220 | 2.5% | St. Jude Medical Center | Baya Holland CEO
| 7    | Kaiser Permanente Anaheim Medical Center | 111 W. La Palma Ave. Anaheim 92806-2020 | kaiserpermanente.com | missioninfo@kaiserpermanente.com | 714-995-3000 | 714-995-3001 | 320 | 0% | 0% | 320 | 1.1% | Kaiser Permanente | Mark Cosio senior VP/Planner
| 8    | Fountain Valley Regional Hospital & Medical Center | 17100 S. Brookhurst St. Fountain Valley 90270-4049 | fountainvalleyhospital.com | info@fountainvalleyhospital.com | 714-960-3000 | 714-960-3001 | 340 | 1.1% | 16% | 340 | 2.5% | Fountain Valley Regional Hospital & Medical Center | Rev. Sabrina F. Benavidez CEO/President
| 9    | Saddleback Memorial Medical Center | 24401 Health Center Drive Laguna Hills 92656-3899 | memORIZED.org | missioninfo@saddlebackmedical.com | 949-853-3000 | 949-853-3001 | 278 | 1.0% | 1% | 278 | 1.3% | MemorialCare Health System | Mark Marano CEO
| 10   | Orange Coast Memorial Medical Center | 1201 W. 175th St. Fountain Valley 92708-6728 | memORIZED.org | missioninfo@ocmemorial.org | 714-566-3000 | 714-566-3001 | 218 | 1.1% | 11% | 218 | 1.4% | MemorialCare Health System | Mark Marano CEO
| 11   | Los Alamitos Medical Center | 5371 La Palma Ave. Los Alamitos 90720-3164 | losalamitosmemorial.org | missioninfo@losalamitosmemorial.org | 562-431-2000 | 562-431-2001 | 187 | 0% | 0% | 187 | 1.1% | Los Alamitos Memorial Health Care | Kurt Ogilvie CEO
| 12   | Orange County Global Medical Center | 1001 N. Tustin Ave. Santa Ana 92705-3500 | orangeglobal.com | missioninfo@orangeglobal.com | 714-563-2000 | 714-563-2001 | 228 | 1.1% | 0% | 228 | 1.4% | Orange County Global Medical Center | Susan Nicholas CEO, KP Healthcare
| 13   | AHMC Anaheim Regional Medical Center | 1351 E. Alton Ave. Anaheim 92801-2804 | ahmcamericamed.org | missioninfo@ahmcamericamed.org | 714-997-2000 | 714-997-2001 | 203 | 1.1% | 0% | 203 | 1.3% | AHMC Healthcare Inc. | Rita Gabro CEO
| 14   | Hoag Orthopedic Institute | 16300 Sand Canyon Ave. Irvine 92691-5174 | hoagorthopedics.com | info@hoagorthopedics.com | 949-881-5600 | 949-881-5601 | 70 | 0% | 0% | 70 | 1.2% | Hoag Memorial Hospital Presbyterian | Earl A. Phillips CEO/President
| 15   | West Anaheim Medical Center | 1333 S. Central Ave. Anaheim 92804-3156 | westanaheimmedicalcenter.com | missioninfo@westanaheimmedicalcenter.com | 714-566-3000 | 714-566-3001 | 210 | 1.0% | 1% | 210 | 2.5% | Hoag Memorial Hospital Presbyterian | West Anaheim Medical Center

Sources: Office of Statewide Health Planning and Development and the hospitals
Abbreviations: NA, not applicable; NA, not available
1 Includes Kaiser Permanente Inland Empire Medical Center
2 Includes Hoag Hospital Irvine
3 Includes St. Jude Medical Center
4 Includes Hoag Orthopedic Institute and Hoag Hospital Irvine
5 Includes Mission Hospital-Laguna Beach

Continued on page 26
Top-Ranked Hospitals Combine for 2% Revenue Jump

30 Centers Take in $7.2B; UCI Hospital Still at Top

By SHERRY HSIEH

Last year Renton, Wash.-based Providence Health & Services and Irvine-based St. Joseph Health merged to form a seven-state healthcare system, a transaction that further consolidated its Orange County-based hospitals under the umbrella of St. Joseph Hoag Health.

The new entity accounts for five of the 30 OC hospitals we’ve ranked this year with at least $10 million in net patient revenue. The facilities took in $7.2 billion, up 2%. The list also includes pretax net income; and the number of patient days, outpatient visits, licensed beds and OC-based employees, though those numbers don’t affect the rankings.

The list includes new entrants Hoag Orthopedic Institute in Irvine and HealthBridge Children’s Hospital in Orange. Some other hospitals shuffled positions, but the ranking is otherwise unchanged from last year.

Wellness
UC Irvine Medical Center held onto first place with net patient revenue of approximately $997.1 million for the 12 months ended Sept. 30, up 9.24% year-over-year. “UC Irvine Health has a long-standing commitment to promoting wellness in our community,” said Vice Chancellor of Health Affairs and Chief Executive Howard Federoff. “We opened Orange County’s first Federally Qualified Health Center in Santa Ana, and we continue to expand clinical services and wellness education across the region.”

UCI Health, as the only university-based care provider in Orange County, comprises clinical, medical education, and research. Its 417-bed acute care hospital is in Orange. Federoff said a focus for UCI Health is to provide comprehensive care to older adults, a group he referred to as the “Silver Tsunami.”

Efforts include preventive care and chronic care, with the goal to empower patients to manage their own health.

The hospitals in the St. Joseph Hoag network include: No. 2 ranked Hoag Memorial Hospital Presbyterian, third-ranked St. Joseph Hospital-Orange, fourth-ranked Mission Hospital and sixth-ranked St. Jude Medical Center.

Children’s Hospital of Orange County broke up the St. Joseph Hoag Health streak on the list, placing fifth with $584.1 million in net patient revenue, by more than 55%. St. Joseph-Orange also had a steeper increase in operating loss.

Richard Afable, executive vice president of St. Joseph Health’s Southern California region and chief executive of St. Joseph Health, said the numbers don’t paint a holistic picture of the health system. “Thinking of hospitals as a ‘retail’ model, where the more beds, more patients, and more revenue the better, doesn’t tell the whole story,” Afable said. “Hospitals are increasingly focused on serving the community more holistically, striving for better community health. If that means fewer hospital stays, less surgery and reduced use of hospital beds, we are OK with that.”

New entrants Hoag Orthopedic and HealthBridge Children’s had $122.2 million in revenue and $12.2 million in revenue, respectively.

Outpatient visits increased by 3%. “Our commitment to the transition to outpatient care delivery is evidenced in the opening of Hoag Health Center Irvine at Sand Canyon and the groundbreaking of Hoag Health Center Tustin, as well as our urgent care strategy and the continued growth of our physician network,” Braithwaite said.

Hoag topped St. Joseph-Orange, which reported roughly $584.1 million in net patient revenue, by more than 55%. St. Joseph-Orange also had a steeper increase in operating loss.

Federoff: UCI system continues to expand services, education

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Federoff: UCI system continues to expand services, education
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<th>Rank</th>
<th>Hospital Name</th>
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<td>$14.9 million</td>
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<td>$8.9 million</td>
<td>5%</td>
<td>$5.0 million</td>
<td>-3%</td>
<td>27,318</td>
<td>5%</td>
<td>178</td>
<td>0%</td>
<td>510</td>
<td>KP Care Inc.</td>
<td>lite.lite.com</td>
</tr>
<tr>
<td>23</td>
<td>La Palma Intercommunity Hospital</td>
<td>La Palma, CA</td>
<td>17220 Palma Ave</td>
<td>lapalmahealthcare.com</td>
<td><a href="mailto:info@lapalmahealthcare.com">info@lapalmahealthcare.com</a></td>
<td>$41.2 million</td>
<td>-12%</td>
<td>$21.6 million</td>
<td>5%</td>
<td>$50.4 million</td>
<td>3%</td>
<td>21,463</td>
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<td>24</td>
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<td>Huntington Beach, CA</td>
<td>7251 Peachtree Ln</td>
<td><a href="mailto:info@huntingtonbeachhospital.org">info@huntingtonbeachhospital.org</a></td>
<td><a href="mailto:info@huntingtonbeachhospital.org">info@huntingtonbeachhospital.org</a></td>
<td>$48.3 million</td>
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<td>20,568</td>
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<td>131</td>
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<td>Orange, CA</td>
<td>2915 S. Chapman Ave</td>
<td>chapman-gmc.com</td>
<td><a href="mailto:info@chapmanhospital.org">info@chapmanhospital.org</a></td>
<td>$39.2 million</td>
<td>0%</td>
<td>$6 million</td>
<td>0%</td>
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<td>0%</td>
<td>35,976</td>
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<td>brea.com</td>
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<td>$38.8 million</td>
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<td>300 E. 18th St</td>
<td>kindredhospital.com</td>
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<td>0%</td>
<td>$1.5 million</td>
<td>0%</td>
<td>$1 million</td>
<td>0%</td>
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<td>healthsouthtustin.com</td>
<td><a href="mailto:feedback_tustin@healthsouth.com">feedback_tustin@healthsouth.com</a></td>
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<td>14905 S. Main St</td>
<td>healthbridgeorange.com</td>
<td><a href="mailto:info@healthbridgeorange.com">info@healthbridgeorange.com</a></td>
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<td>-2%</td>
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<td><a href="mailto:info@newportbayhospital.com">info@newportbayhospital.com</a></td>
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</table>
Myth:
Children can’t get depressed.

Truth:
Signs of depression can appear as early as five.

Approximately 150,000 children living in Orange County suffer from a diagnosable mental health condition – yet there are no psychiatric inpatient beds for patients under age 12 in local hospitals, insufficient beds for adolescents and very few outpatient programs. Along with our community partners, our goal is to create an integrated and coordinated mental health system of care for children, teens and young adults.

Join us in making a difference in the lives of our children by reducing the stigma around mental health. Visit CHOC.org/mentalhealth to donate and download our tips on how to start the conversation. Let’s talk about it.
Center Aims To Involve Nonmedical Participants

CHOC Wants Community In On Child Mental Health

Healthcare providers continue to transform delivery of care, changes driven largely by reimbursement policy. Mental health, in particular, is high on the agenda of healthcare providers’ priority list, and Children’s Hospital of Orange County is spearheading one effort as part of a larger mission to improve children’s health and well-being.

Orange County has about one bed for every 22,000 children and none for children younger than 12, said CHOC Chief Executive Kim Cripe.

CHOC is addressing the gap with the addition of an 18-bed mental health center it announced in 2015 and scheduled to open in 2018. Now it also plans to collaborate with a network of other hospital systems, including Kaiser Permanente and St. Joseph Hoag Health, as well as community organizations, such as schools, religious institutions and county agencies, to build a stronger community system ensuring better access to mental health resources and care for children.

“It is hard to believe how a mental health problem can manifest itself at a very young age,” Cripe said. “We have seen a startling number of visits [from children with psychiatric crisis].”

One out of five children suffers from a mental health condition, according to the National Institute of Mental Health, and Cripe said that translates to more than 150,000 children in Orange County.

The healthcare community [ought to be] thinking about mental health relating to preschools, to faith-based communities, to technology companies, and the role they can play in the next three years,” said Funahashi, CHOC Chief Psychologist Heather Huszti.

She stressed the importance of bringing non-mental health entities into the conversation about health care because children interact in settings beyond the home or hospital. CHOC is working with data on children with behavioral problems who are at risk of or who’ve been expelled from preschools in order to develop a pilot program to help care care workers manage the children’s behaviors and identify treatment resources.

The hospital also is working with faith-based groups, such as Saddleback Church and Jewish Family Services, and with the department of psychiatry at the University of California-Irvine to develop and training.

“Our initiative is really a good learning lab of what we are thinking about the health of the community, and not just healthcare for the sick.”

Mental disorders can be difficult to diagnose in children. Huszti attributed the lack of treatment for children with mental health disorders to children’s limited range of expression in speaking about their health and to medical professionals who don’t recognize that children can have mental disorders.

She has observed a range of psychiatric disorders in her role, including attention deficit disorders because children interact in settings beyond the home or hospital. CHOC is working with data on children with behavioral problems who are at risk of or who’ve been expelled from preschools in order to develop a pilot program to help care care workers manage the children’s behaviors and identify treatment resources.

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Cripe: center part of effort to improve children’s overall health

Huszti: outside entities should consider their roles in care

“Innovation

from page 18

The program is in the early research stage as the team explores the likelihood of healthcare providers leveraging patients’ social circles, such as family members and friends, to achieve better outcomes.

The innovation currently has more than 20 active projects roughly divided into 50% of projects in technology, 25% of projects in financial services, and 25% of projects in healthcare delivery infrastructure design.

Kaiser self-funds its innovation studio but funds are internal, Heise said he’s stopped making new investments in “catch-all.” The funds are active, but Heise said the innovation lab is part of an overall effort to improve patient care and technology, and its Southern California programs.

Heise: MemorialCare Invests in Innovation

MemorialCare also is involved in two strategic investment funds: the MemorialCare Innovation Fund and the Southern California Health Ventures. The funds focus on information technology, healthcare delivery infrastructure design, and medical devices.

We set up a formal fund in 2005 and partnered with [Cedars-Sinai Medical Center] for the second fund [Summation Health] in 2014,” said Brant Heise, senior manager of both funds. He said the funds are “evergreen,” open-ended and legally separate entities from the hospital.

Los Angeles-based Cedars-Sinai is one of the largest nonprofit academic medical centers in the country. Summation Health is equally owned by it and MemorialCare.

Heise said the funds share the same structure and investment strategy, with each portfolio consisting of approximately 60% healthcare funds, 20% medical devices, and 20% a “catch-all.” The funds are active, but Heise said he’s stopped making new investments in the first fund and is focusing on Summation Health.

Cedars-Sinai is a very large, prestigious academic center, and MemorialCare is in a medium to large community health system, offering [a different perspective].

He said he believes that if the technologies MemorialCare and Cedars-Sinai invest in work for the two systems they would be useful to 80% of healthcare providers.

Heise said that MemorialCare Health has 10 different companies, including two new additions: San Francisco-based Hypr3 Inc., which provides real-time, location-based customer engagement for businesses, and Well Health Inc., which develops federally compliant provider-patient text messaging.

Inside

Reton, Wash.-based Providence St. Joseph Health’s California Health arm, St. Joseph Health, has its own in-house technology, and its Southern California division, St. Joseph Hoag Health collaborates with outside companies that incorporate the technologies that St. Joseph Health implements.

“If you look at St. Joseph Health within the acute or ambulatory space, we are actively providing care to patients, but if you look at technology in general, [electronic health records] has only been out since the mid-1990s,” said Michael Marino, who heads information services operations and clinical systems at St. Joseph Health.

Three areas of focus are sensor technology, electronic health records integration, and big data, and St. Joseph Health collaborates with three companies that it owns minority stakes in: San Antonio, Texas-based Airtrip Technologies, which manages the company’s electronic medical records systems labs, outpatient centers and insurance companies.

Data comes from multiple settings, hospitals, ambulatory, emergency room,” Marino said. “Data is huge, and not being able to see all those data in real time, in a clear, organized [way], can cause inefficiency in care, repetitive care.

St. Joseph Health is affiliated with healthcare incubator the Innovation Institute, which Marino described as a venture that takes ideas from inside and outside of the industry to develop for commercialization. The institute is a for-profit, limited liability company owned by five nonprofit health systems, including CHOC.

Forward

Technology is now an integral part of industries conversation as world leaders and measuring outcomes. Funahashi said that when it comes to innovation, though, providers should look for “bigger picture problems.” “The problem in innovation is that people see something shiny and bright, they try to use it somewhere, and it won’t work. But if you know the problem you are trying to solve, and you continue to look for a solution to that problem, then it will work.”
WALK WITH ME

KPC Health is proud to support the American Heart Association’s annual Heart and Stroke Walk, on March 4th. We are honored to partner with an organization that does so much for our patients, and their families. For more information, and to donate, visit ocheartwalk.org. #DoIt4YourHeart

Suzanne Richards, MBA, FACHE
CEO of Healthcare Operations, KPC Health
2017 Chair of OC Heart and Stroke Walk

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