



# Emerging Trends in 2020 Healthcare

Sept. 23, 2020

**Presented by:**

**Distinguished Guest Speakers**

Dr. Jacqueline Nemer  
Barbara Pelletreau  
Brittany Komansky  
Dane Harris  
Cedwyn Bachman

**Crowe LLP**

Tracey Coyne  
Melissa Dill  
Colleen Hall  
Andrew Holloway  
Jay Sutton



# Housekeeping

## **Download the Crowe Events App**

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## **What's next?**

Wrap up with the Closing Keynote featuring John O'Leary this afternoon, *3:15 p.m. CST*

## **CPE certificates**

**NEW** this year – download CPE at the conclusion of each session.

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# Agenda

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- Insights from the frontline
- Virtual care
- Opioid crisis
- Tech Trends
- Intelligent Automation
- Consolidation
- Outsourcing
- Closing

## Distinguished guest speakers



**DR. JACQUELINE  
NEMER**



**BARBARA  
PELLETREAU**



**BRITTANY  
KOMANSKY**



**DANE  
HARRIS**



**CEDWYN  
BACHMAN**

## Presenters from Crowe LLP



**TRACEY  
COYNE**



**MELISSA  
DILL**



**COLLEEN  
HALL**



**ANDREW  
HOLLOWAY**



**JAY  
SUTTON**

# Covid-19 Impact on & 2020 Healthcare Trends

**Andrew Holloway**

Managing Director  
Crowe LLP

# Insights from the frontline

**Dr. Jacqueline Nemer** University of California, San Francisco Medical Center

**Brittany Komansky** – WakeMed Health & Hospitals

# Insights from the frontline

Dr Nemer Video

- Emergency Medicine Professor at the University of California, San Francisco Medical Center
- Senior Faculty physician, emergency department UCSF Medical Center
- Director of UCSF telemedicine program for value and for clinical documentation integrity.



# Insights from the frontline

Brittany Komansky - Video

- Director of Emergency Services at WakeMed Health & Hospitals, Raleigh Campus
- Currently oversees the Adult Emergency Department, Children's Emergency Departments, and Clinical Evaluation Areas
- Brittany holds her Certification in Emergency Nursing, is a member of her local ENA Chapter, and sits on the Fatality Review Committee for Wake County, NC.

# Tech Trends & Virtual Care

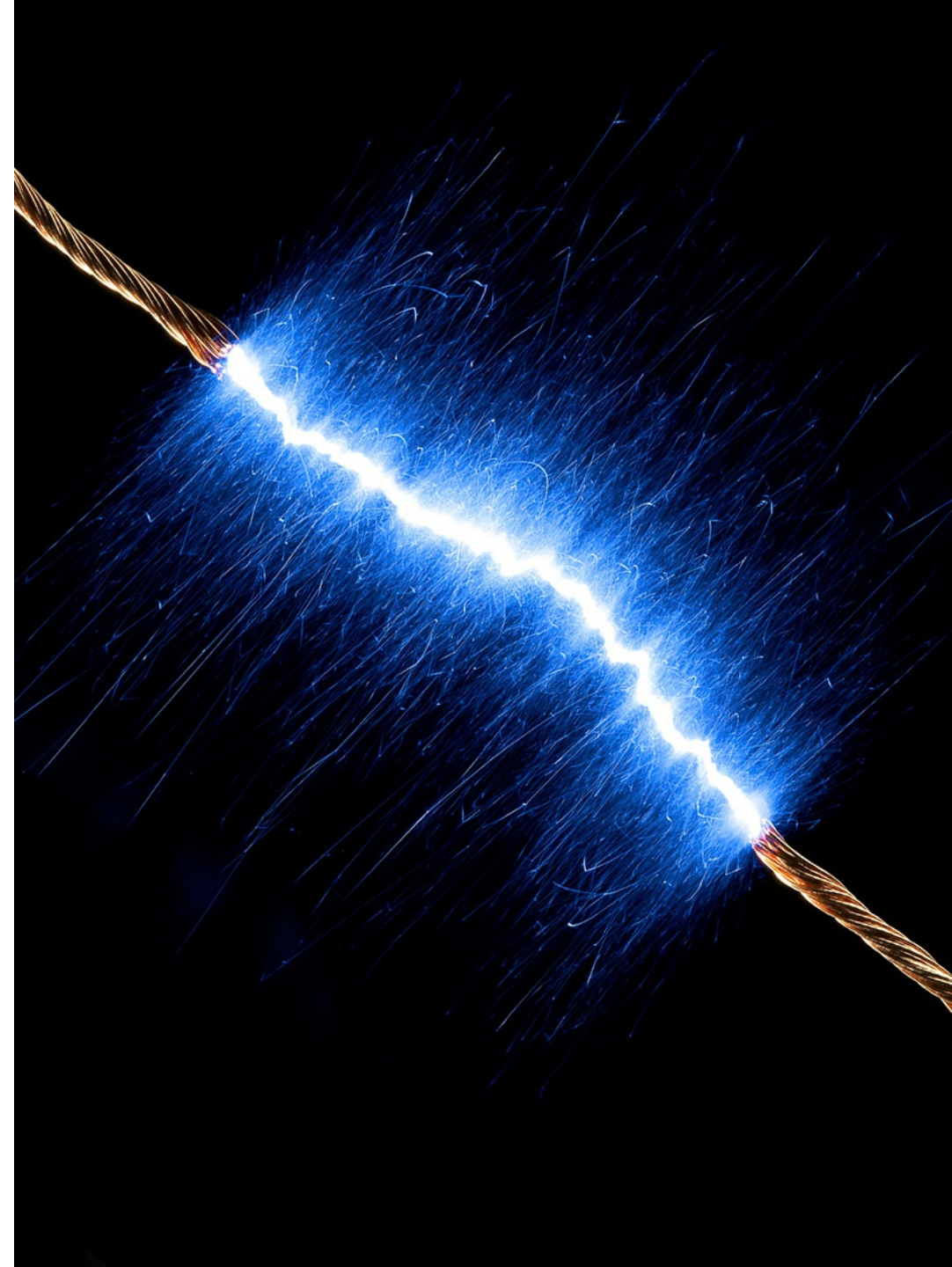
**Melissa Dill**

Crowe LLP

So the big deal is...Telehealth,  
Virtual Care, Telemedicine,  
Remote Visits

# TECHNOLOGY IS NOT REALLY THE DIFFICULT PART\*

(\* but patient and physician connectivity is)



## What are your tech needs in 3-6 months per healthcare CIOs?

- Enhanced features for virtual visits
- Improved remote patient monitoring
- Infrastructure for remote work & team collaboration
- Increased robotics & virtual communications from within facilities
- Improved pop health analytics to support identifying needs and providing resources to meet those needs
- Advanced clinical data & analytics



# Insights from the frontline

Dr Nemer Video

- Emergency Medicine Professor at the University of California, San Francisco Medical Center
- Senior Faculty physician, emergency department at the main campus
- Director for our telemedicine program for value and for clinical documentation integrity.

# The Opioid Crisis

## **Barbara Pelletreau**

SVP Patient Safety  
CommonSpirit Health

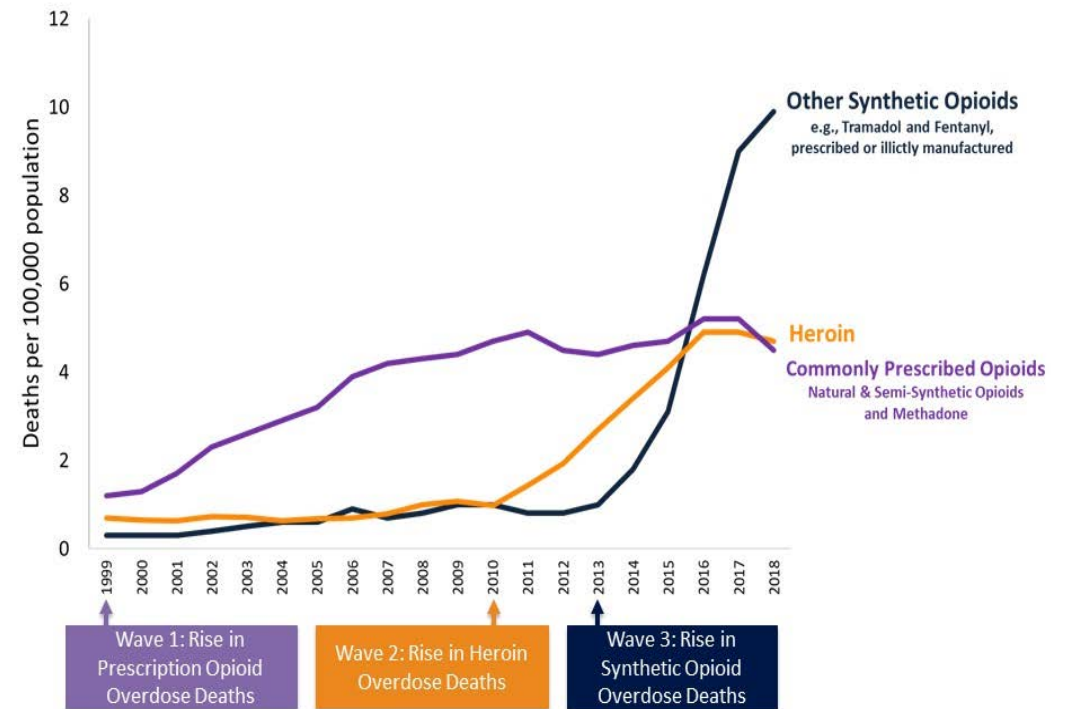
## **Eric Jolly**

Internal Audit Practice Leader  
Crowe LLP

# The opioid crisis, pre-COVID

- *Through 2017, synthetic opioids (including prescribed tramadol and fentanyl) along with commonly prescribed opioids were the leading causes of opioid deaths.*
- *Late in 2017, President Trump declared a State of Emergency related to the opioid epidemic.*
- *The CDC began monitoring opioid trends, advancing research, supporting providers and increasing awareness.*
- *In 2018, the number of overdose deaths from commonly prescribed opioids turned downward and the synthetic opioid curve “bent”.*

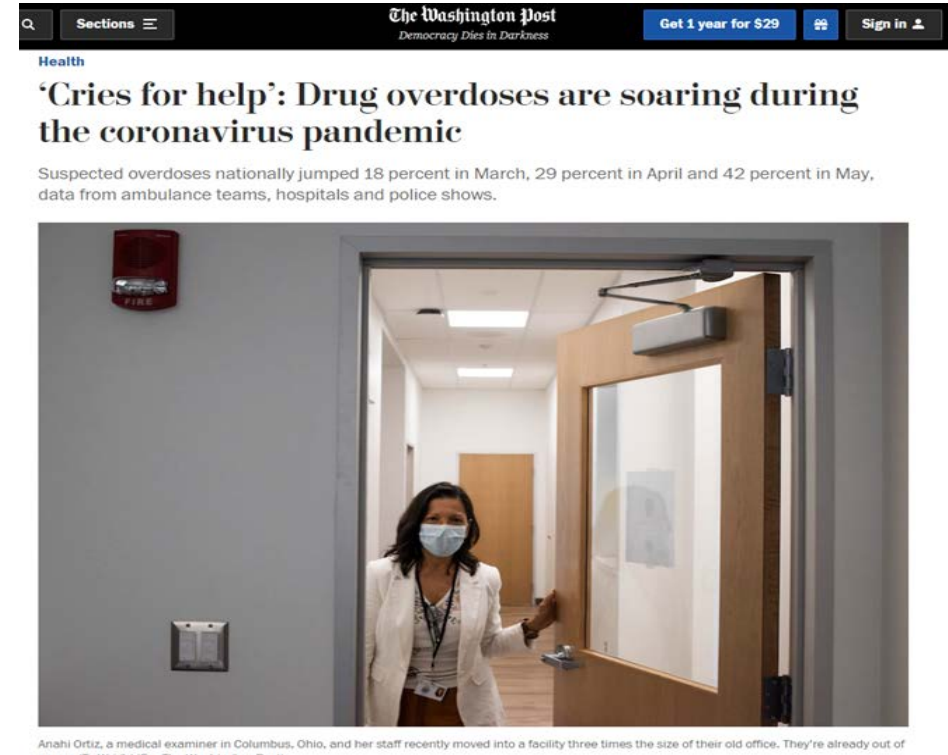
## 3 Waves of the Rise in Opioid Overdose Deaths



SOURCE: National Vital Statistics System Mortality File.

# Drug use growing amidst COVID pandemic

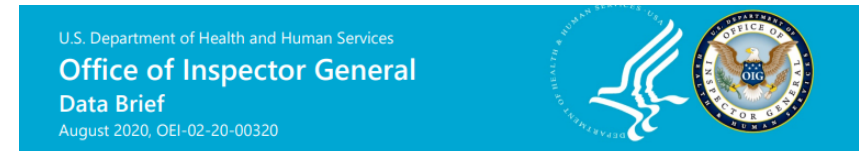
- *Washington Post* (7/1/2020) reports that the opioid epidemic is quietly growing during the coronavirus pandemic.
  - Solitude/loneliness
  - Lack of available treatments
- Drug overdoses increasing 18% in March, 29% in April and 42% in May over same month last year.
- Many of the drugs that are abused are prescriptions – and first provided by physicians.
- Top action area when COVID-19 abates.





# Drug use growing amidst COVID pandemic

- OIG very recently issued a report on opioid abuse with an optimistic tone on positive trends, however, it sounded the alarm related to the vigilance needed as COVID-19 created new concerns:
  - Relaxed rules on prescribing of opioids by telehealth to improve access to care
  - Evidence of increased doctor shopping by patients
  - Those with opioid use disorders are much more likely to have severe symptoms



## Opioid Use in Medicare Part D Continued To Decline in 2019, but Vigilance Is Needed as COVID-19 Raises New Concerns

### Key Takeaways

- o Medicare Part D has seen a steady decline in opioid use over the past several years along with an increased use of drugs for medication-assisted treatment of opioid use disorder.

### Why OIG Did This Review

The United States has been grappling with the opioid crisis for several years. In 2018, nearly 47,000 opioid-related overdose deaths occurred in the United States.<sup>1</sup> The Office of Inspector General (OIG)



The Jolly Healthcare Advisor - Eric Jolly, CPA

## OIG Announces Results of 2019 Medicare Part D Opioid Use Study

Published on August 17, 2020 [Edit article](#) | [View stats](#)



**Eric Jolly**

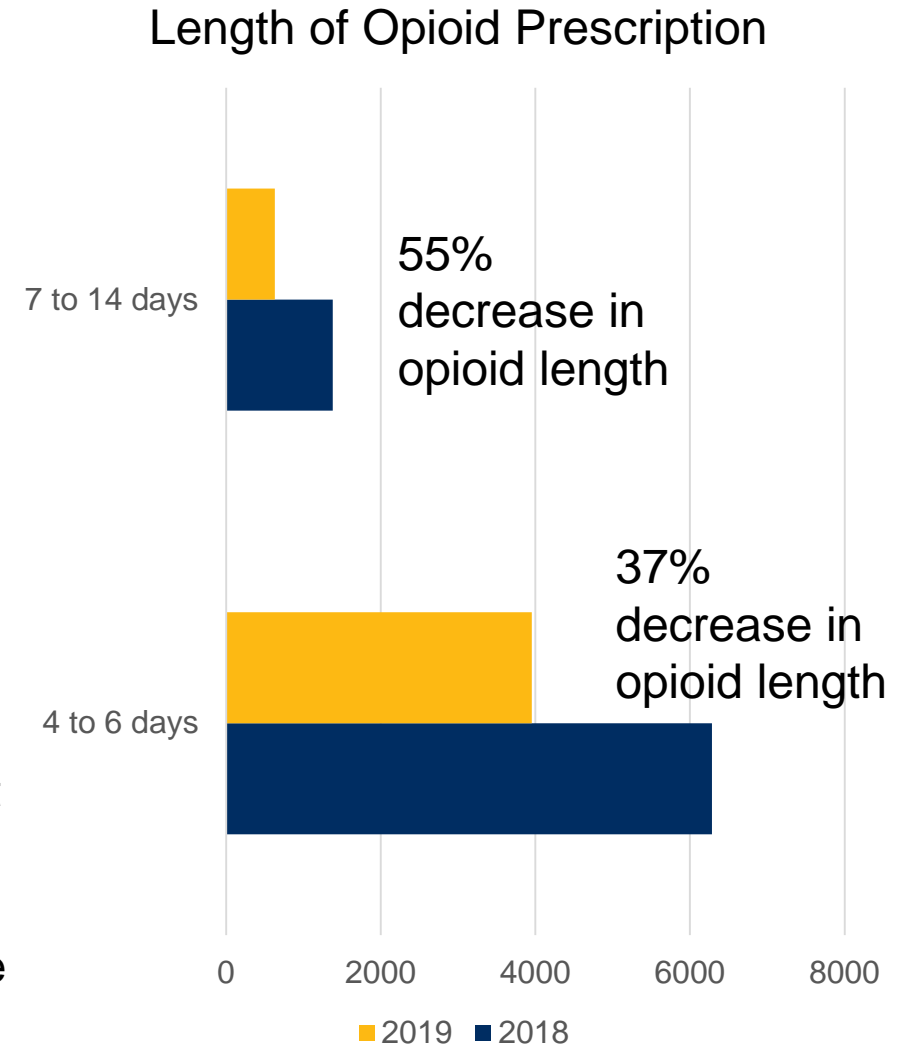
Vice President Internal Audit at Crowe Healthcare | Healthcare Consulting Expert  
| Writer | Speaker

3 articles

The Department of Health and Human Services Office of Inspector General (OIG) recently released results of its 2019 study of opioid use based on Medicare Part D Prescription Drug data. The OIG took an optimistic tone related to its study related to historic trends demonstrating decreases in opioid use and a corresponding increase in medication assisted treatment (MAT). In addition, access to Naloxone, an opioid overdose reversal drug, has increased, indicating improved access to overdose treatment.

## A big idea: using data to increase opioid prescription stewardship

- Crowe came to CommonSpirit Health (CSH) with an innovative idea: monitoring and trending prescriptions across System based on information in EHR.
- No other company was able to uniquely develop deep programming routines to read physician prescription instructions to patients.
- No other company was able to calculate days of opioid prescriptions, concurrent opioid and benzodiazepines concurrently and clinicians prescribing against their peers by specialty and with great accuracy.
- Provided insights into data that CSH “knew” but couldn’t quantify.
- With data, Crowe and CSH collaborated on programs to designed to decrease addiction and overdose: decrease length of opioid prescriptions, eliminate extended release opioids and dangerous drug combinations.



# More Tech Trends...

**Melissa Dill**

Crowe LLP

## What else is being said about healthcare technology?

- Lots of dollars invested in primary systems – focus on optimizing current vs spending on new
- Regulatory requirements take time and energy
- Healthcare tends to take forever to act on innovation
- Patient portals simply do not meet the need
- Cloud is old news



*“Walmart can see you when you pull up & walk out with your order. Healthcare still has people checking in at the front desk” – Randy Davis, CIO, CGH Medical Center, Sterling, IL*

*“I believe that health systems will be forced to rethink their approach to employee engagement & create virtual programs that support not only their remote but their workforce that remain on site”- John Hendersen, VP & CIO, Children’s Hospital of Orange County, Orange, CA*

# What are more innovative areas of healthcare technology?

## Meet patients where they are

- Virtual care/telemedicine/telehealth
- Mobile, pocket size interactions
- Technology, innovation, regulations and culture has pushed this over the edge
- “Friction free” access & patient self service 24/7

## Automation by any other name

- RPA, Intelligent Automation, Machine Learning, Advanced Analytics
- Revenue Cycle and Finance opportunities with RPA

## Interoperability – Cures Act

- Patients expect access to their records including not only EHR access but also to their “bills”
- FHIR based access to records must be provided by 1/1/2021 (Fast Healthcare Interoperability Resources)
- This is a technology BIG DARN DEAL

## Other cool stuff...

- Virtual experiences
- 5G Networks
- Computing on “The Edge”

## Polling Question

**What technology trends are most greatly impacting your daily work life?**

A

Telehealth

B

Robotic Process  
Automation (RPA)

C

Advanced Analytics

D

Interoperability

E

5G Networks

F

Other

F

None

# The Path to Intelligent Automation for Finance

**Jay Sutton, Tracey Coyne  
Dane Harris, & Cedwyn Bachman**

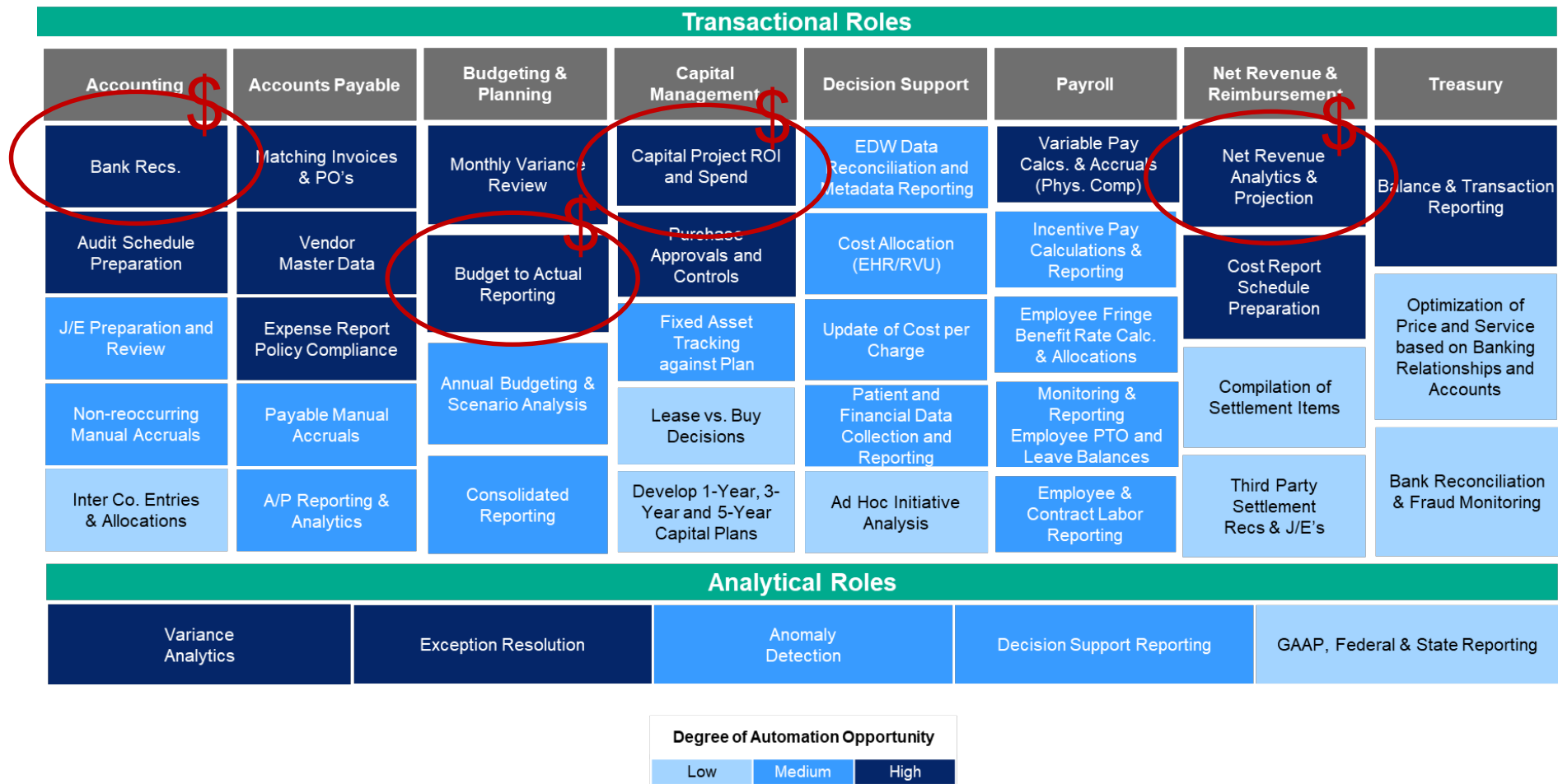
## Trends & Opportunity

- Impact of COVID
- Uninsured care
- Introduce automation to scale
- Optimize resources



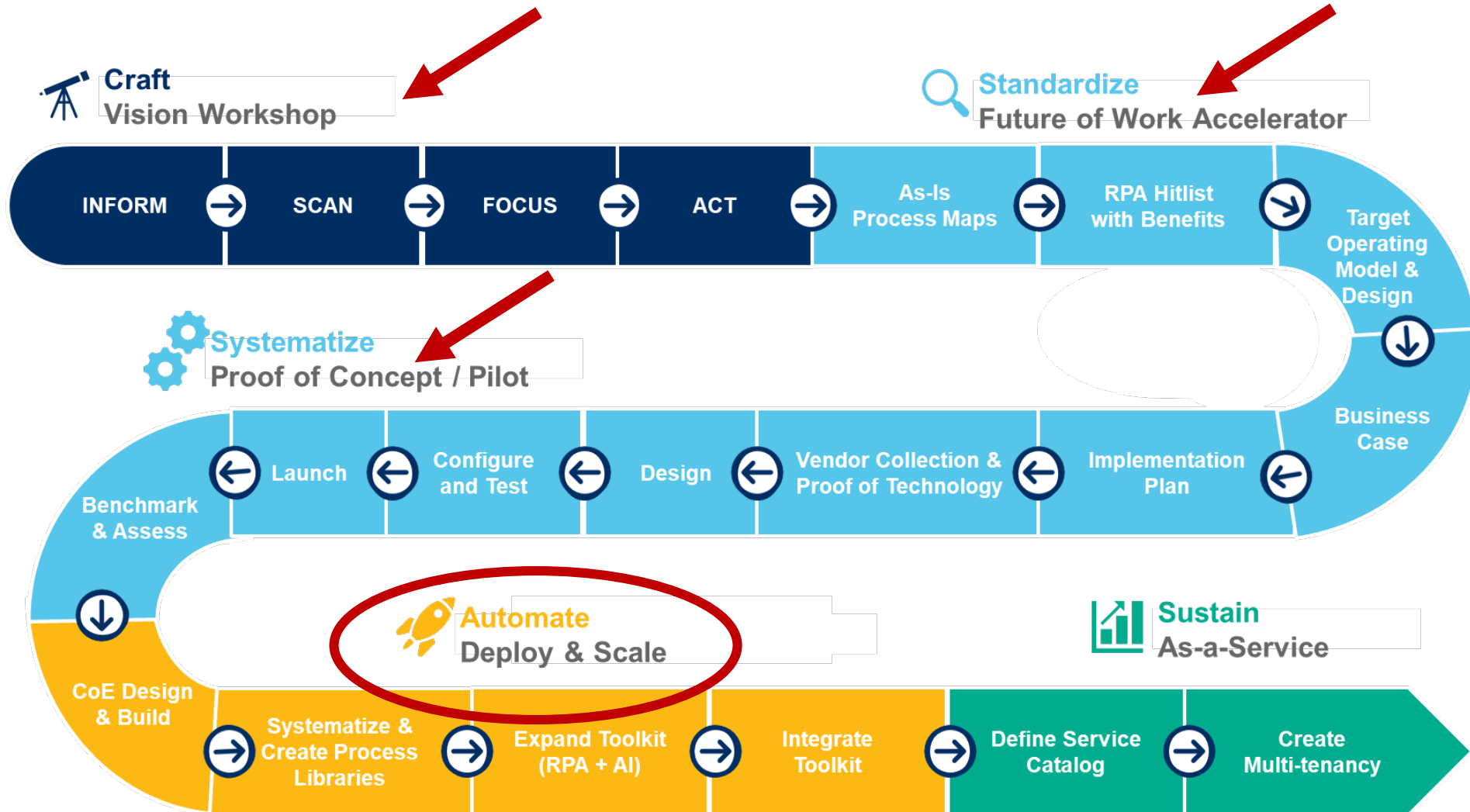


# Dark blue + high costs = "START HERE"



One size and approach doesn't fit all

# Our recommended path to follow



## Polling Question

**Where do you see the greatest opportunities for intelligent automation?**

A

Accounting

B

Accounts Payable

C

Budgeting & Planning

D

Net Revenue &  
Reimbursement

E

Payroll

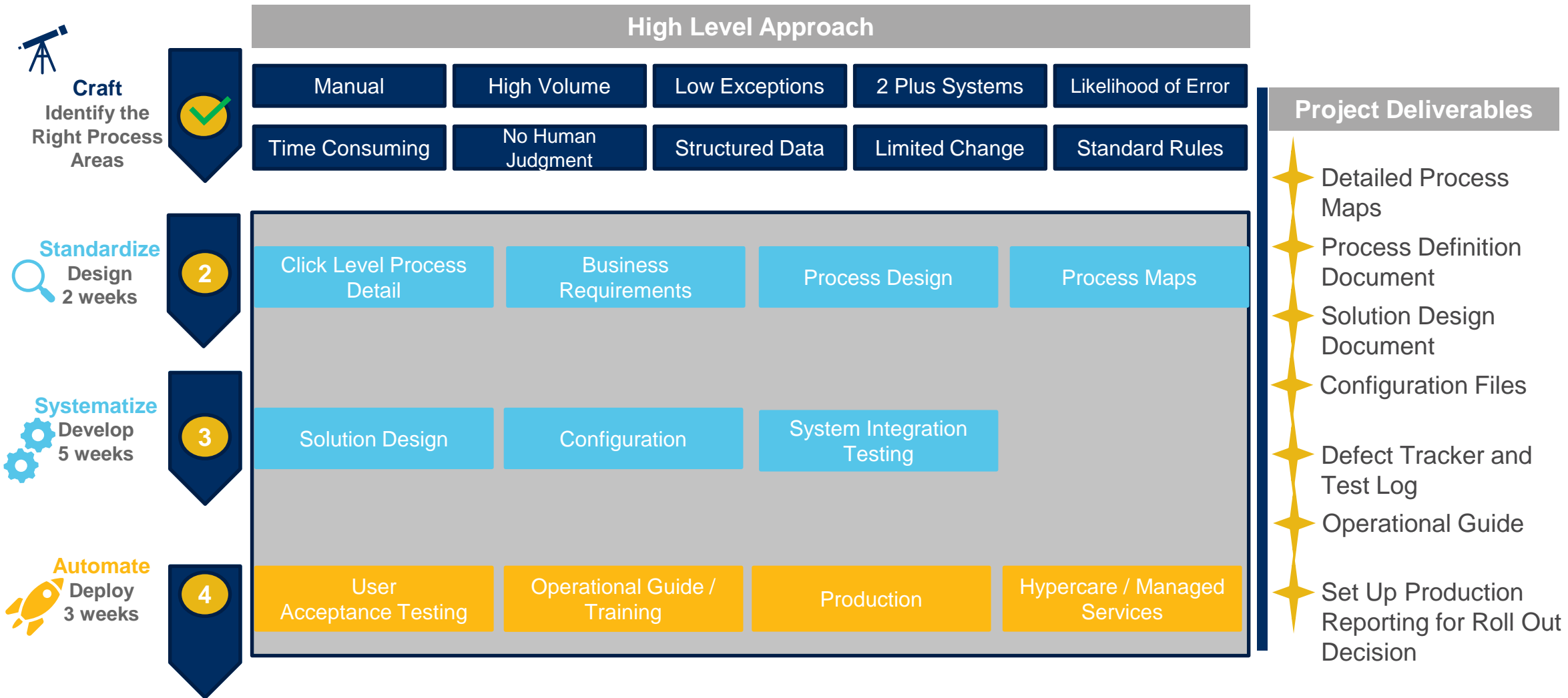
F

Treasury

G

Revenue Cycle

# How this path “feels”



~~Random  
acts of  
automation~~



# Consolidation & Outsourcing

**Colleen Hall**

# Pre-Covid Trends in Outsourcing




**Nearly 98% of healthcare executives are considering outsourcing strategy.**



Source: BlackBook Market Research





**Only 2% of healthcare executives don't think outsourcing is an option.**

Source: BlackBook Market Research




**By 2022, Hospitals must  
reduce costs by 24% in  
order to break even.**

Source: BlackBook Market Research

# Pre-Covid Trends in Consolidation

An abstract graphic consisting of multiple parallel light trails that originate from a single point on the left and fan out towards the right. The trails are primarily blue and white, with a prominent yellow and orange trail at the bottom. The background is dark, making the light trails stand out.



**In 2018, there were 803  
mergers and 858  
additional affiliation and  
partnerships and  
announcements..**

Source: Definitive Healthcare

**More than 1,500 in 2019...**

Source: Definitive Healthcare



**COVID-19 caused healthcare entities to reevaluate their growth and financial strategies.**



## Be on the Look Out For....

**Consolidation nearly always leads to higher prices paid by private payers**

**Better, more creative partnerships that could cut costs and improve the health of Americans**

**The pandemic has created a buyers market related to consolidation. Organizations in a good position to buy will have more inventory to choose from at lower prices**

**Increased scrutiny on the CARES Act dollars to ensure that there was no spend on consolidation activities**

**Outsourcing may increase temporarily as a way to combat costs but long term, if the consolidation in healthcare continues, there may be a trend to return to insourcing**



## Polling Question

**Which of Colleen's five bold predictions are likely to have the most widespread impact on the market?**

**A**

Consolidation will lead to higher prices paid by private payors.

**B**

Stronger partnerships (outsourcing & consolidation) will be formed.

**C**

It's a buyer's market for financially sound healthcare providers.

**D**

Increased scrutiny on CARES dollars to ensure not used as part of consolidation activities

**E**

Consolidation will lead to outsourcing in short term, insourcing overtime.



# Closing Recording

## Polling Question

**According to the Centers for Disease Control & Prevention, why cover your mouth and nose with a mask when around others?**

A

You could spread COVID-19 to others even if you do not feel sick.

B

The mask is meant to protect other people in case you are infected

C

Everyone should wear a mask in public settings and when around people who don't live in your household.

D

Continue to keep about 6 feet between yourself and others. The mask is not a substitute for social distancing.

E

All of the above



Thank you



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