



WRIGHT STATE UNIVERSITY



November 17, 2017

Incentives are <u>not</u> aligned

Hospitals **Doctors** Nurses **Medical Schools** Businesses Federal Government State Government **Insurance Companies Urgent Care Centers** Medicaid Managed Care Organizations Medical Device Manufacturers Pharmaceutical Companies **Patients**



<u> 2005</u>

- Hospitals are the revenue centers
- Fill available beds
- Majority of physicians independent
- Health IT & data sharing rare
- Fee for Service
- Improve specific hospital quality

2017

- Hospitals are cost centers
- Alternative sources of care
- Significant increase in hospital-affiliated physicians
- Robust data sharing (still improving)
- Bundled Payments
- Community Health

Right Care - Right Time - Right Facility - Right Cost

of hospital beds

2005

2017

4,014

3,961

-1.32%

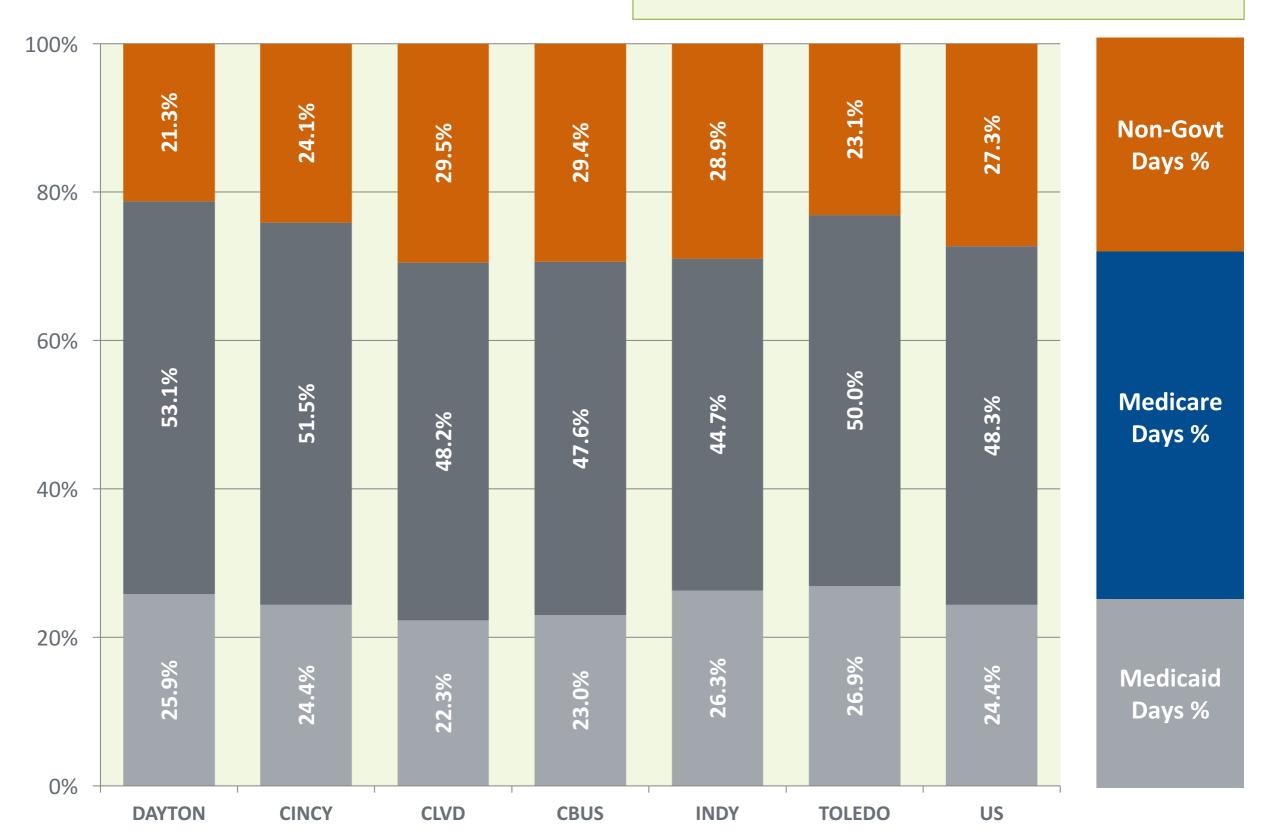
Wright- Patterson Air Force Base Medical Center 88th Medical Group



Payer Mix

Measured by: Patient Day Percentage

Dayton continues to have the highest level of government reimbursed patient days. Higher government payer mix creates upward price pressure to recover payment deficiencies.





Workforce Issues

Continued *growing demand* for medical professions across the healthcare delivery spectrum

Attraction & retention of talent is critical – especially *nurses* and *millennials*

Technology and soft skills are critical

Post-acute care

Primary Care Physicians, Nurse Practitioners & Physician Assistants remain key priorities



Workforce Issues

Flexible and strategic programs need to continue to be developed – rural physician initiative & BSN nursing program at WSU Lake Campus

GDAHA is conducting a *Dayton/Cincinnati vacancy study* in 1st quarter of 2018 – *intensive data analytics*

- Current hospital vacancies
- Future workforce needs

