UW Medicine has a single mission: to improve the health of the public. I am impressed every day by the dedication of our clinicians, faculty and staff to accomplish this mission. As I've taken on the position of Chief Medical Officer, my office has been focused on a strategic transformation of care to support your work. With your support, this new path -- what I like to refer to as the "UW Medicine Way" -- is emerging. The UW Medicine Way taps into your expertise to deliver the most effective, efficient and high-value care -- always. While achieving the Triple Aim -- better patient experience, better health outcomes, and better value of care – motivated this work, we all know that this is the right thing to do and can connect us back to why we entered the healthcare field in the first place. Our transformation projects are based on your observations of where we need to improve. I see this as a grassroots approach to care transformation -- having our best minds lead change. I know the result will be a more standardized way to address the most common diagnoses and procedures of the population we serve and that this will be the best way to achieve our mission. The UW Medicine Way aims to stamp out toxic variability -- doing that will help our patients, help train the next generation of clinicians and allow us to lead as a healthcare delivery system. There is already great work happening to create the UW Medicine Way, in areas such as Telehealth and Population Health Management. These programs are seeing tangible results and raising the bar for all of us. Thank you for joining me in this journey.

Carlos A. Pellegrini, MD, FACS
Chief Medical Officer, UW Medicine and VP for Medical Affairs

Care Transformation Updates

Telehealth

Telehealth is a rapidly growing health care delivery model driven by a need for improved access and cost reduction. It enables UW Medicine to further its mission by expanding reach of our clinical expertise and increasing our strategic outreach and partnerships. While telehealth services have been delivered since the '60s, with the advance of technology, there's a new era of care. Through both provider-to-patient and provider-to-provider services, we are able to conduct real-time virtual visits, remote patient monitoring and e-consultations. A trend in patients demanding access -- 76% prioritize access over human interaction – is driving this, while hospitals and employers want partnerships and payers are developing solutions and refining outcome measures. UW Medicine's focus in deploying telehealth technology is to both improve health outcomes and advance the knowledge and skills of healthcare providers across the WWAMI region. We currently have 11 active programs. In FY17, we launched six new areas (including Video Tele-Stroke, eConsults and Arlington Tele-Maternal Fetal Medicine Clinic). And we're already gaining strides with a 20% increase in patients touched from Q1 to Q3. FY18 brings new goals to grow usage, expand eConsult to nine new specialty areas (including gastroenterology, hepatology, pulmonology) and expansion of Tele-Stroke with video capabilities to current and new partners.

Population Health Management

As we drive toward value-based care, our ability to manage care for all of our patient population, not just those who come in for a visit, takes on increased importance. We have made tremendous progress through 100% empanelment of our primary care clinics, the development of population health tools on Epic and the implementation of standardized pathways for chronic conditions and diseases. But we also need the ability to identify those patients with chronic conditions that are not improving. That is where our Population Approach to Health (PATH) pilots come into play. PATH is a collaborative care model. We currently have two PATHs (diabetes and depression) which integrate specialists as an extension of the primary care team. These specialists will work closely with the care team to identify, surveil and manage complex and at-risk patients. PATH is structured as a centralized system where a specialist can remotely provide consultation and support primary care providers and the treatment of their patients. We'll continue to pilot these centralized services in new specialty areas while developing key metrics to assess care and track progress. Through use of tools on Epic, panel reports, registries and population tools, our goal is to support our providers and primary care teams on how to use these tactics to improve the health of their patient population.

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