

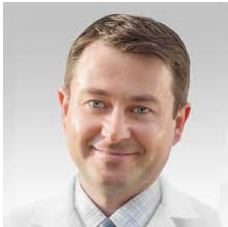


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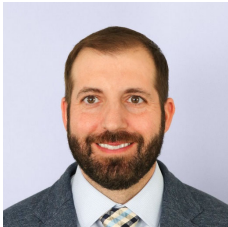
# Northwestern Medicine Center for Spine Health Overview

1


## Introductions




Tyler Koski, MD




Jeremy Larva, PA-C



Shelley Aranas, RN,  
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Lizzie Fankhanel, MBA



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2


2

## Agenda

Topic	Presenter(s)
History and Overview of Northwestern Center for Spine Health	Tyler Koski, MD
Scheduling Protocols and Use of Centralized Call Center	Shelley Aranas, RN, BSN, CNRN
Care Pathways: Non-Surgical Triage and APP "On Demand" Clinic	Jeremy Larva, PA-C
Financial Benefits of the Redesigned Space and Patient Care Pathways	Lizzie Fankhanel, MBA



3



History and Overview of  
Center for Spine Health

4

## Center for Spine Health Overview

### Mission:

Provide the highest level of specialized, interdisciplinary spine care for our patients, inclusive of a wide range of non-surgical interventions for reducing pain and restoring mobility combined with cutting-edge technology and surgical expertise.



### Goals:

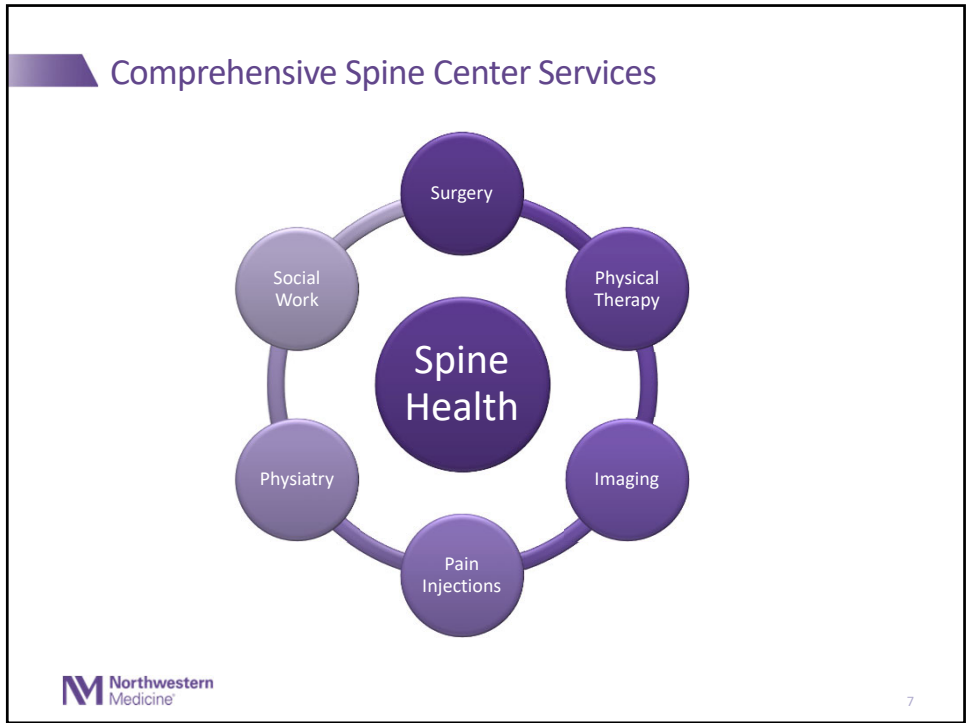
- 1) Enhance the existing **care model** to advance patient care, improve access, increase efficiency and productivity, and improve the patient scheduling experience.
- 2) Design an efficient **care space** that supports this care model and offers a comprehensive range of services (“one-stop shop”) to address all of our patients’ spine needs.

5

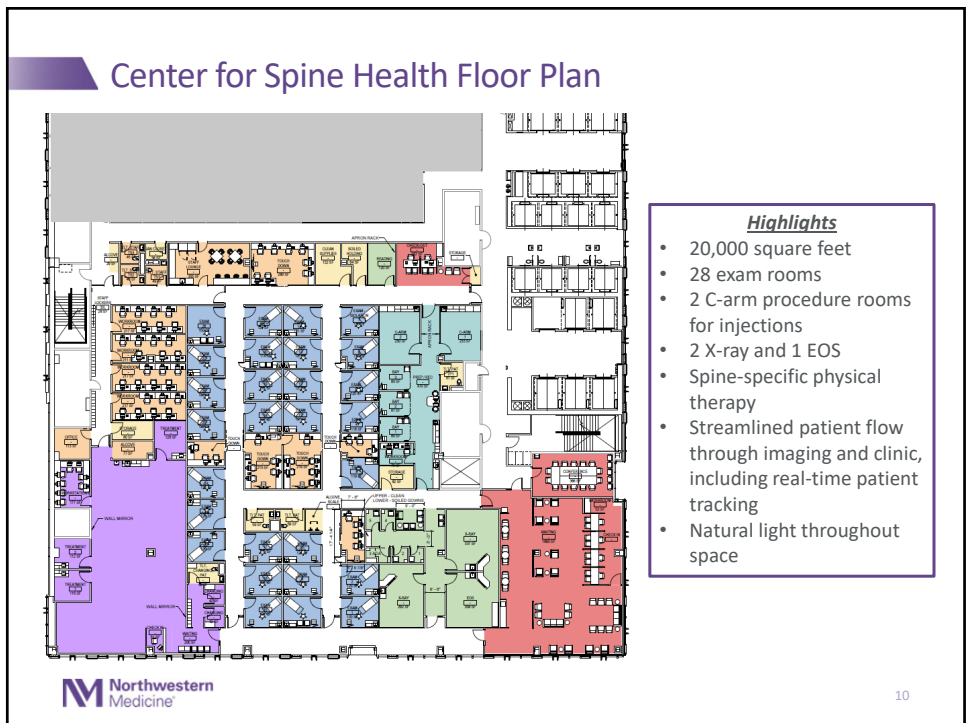
## Guiding Principles for Spine Care Model

- **Improve Access** by maximizing resources to ensure all patients are seen in a timely manner
- **Advance Patient Care** by driving patients upon scheduling to the appropriate care providers
- **Improve the Patient Scheduling Experience** by consolidating to one scheduling number and one call resolution
- **Increase Efficiency and Productivity** by
  - Developing an effective triage mechanism to maximize both non-surgical and surgical pathways
  - Increasing conversion rate from clinic to surgery
  - Streamlining referral outlets with enhanced partnerships (Anesthesia Pain/Physiatry/ Integrative Medicine/ Psychiatry)


6



7

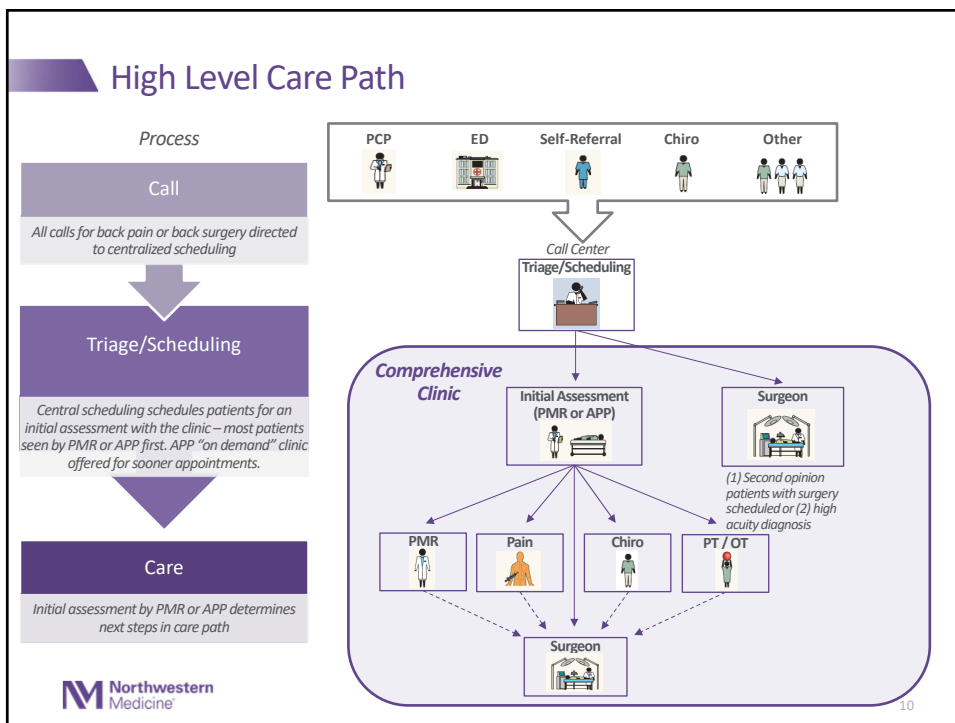


8



## Scheduling Protocols and Use of Centralized Call Center

9



10

## Simplifying Scheduling Protocols

>75 Diagnoses

7 Diagnoses

- Spine/Back/Neck Pain
- Scoliosis
- Tumor/Mass
- Compression Fractures
- Cervical Myelopathy
- Spinal Cord Compression
- Trauma/Fracture

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11

11

## Degenerative Disease Pathway


Are you scheduled for spine surgery with another surgeon?

- Yes → Appointment with Surgeon
- No → What kind of pain are you experiencing?
  - Back
    - Does the pain, numbness, or tingling spread to your legs?
      - Yes → Have you had an MRI or CT of the spine of the affected area in the last 12 months?
        - Yes → Have you tried both physical therapy and injections for this in the last 6 months?
          - Yes → Surgeon
          - No → PMR or APP
        - No → APP
      - No → Have you had an MRI or CT of the spine of the affected area in the last 12 months?
        - Yes → PMR or APP
        - No → APP
    - Neck
      - Does the pain, numbness, or tingling spread to your arms?
        - Yes → Have you had an MRI or CT of the spine of the affected area in the last 12 months?
          - Yes → Have you tried both physical therapy and injections for this in the last 6 months?
            - Yes → Surgeon
            - No → PMR or APP
          - No → APP
        - No → Have you had an MRI or CT of the spine in the affected area in the last 12 months?
          - Yes → PMR or APP
          - No → APP
      - Neck & Back
        - Have you had an MRI or CT of the spine in the affected area in the last 12 months?
          - Yes → PMR or APP
          - No → APP

12

## Provider Requirements


- Surgeon
  - MRI within the last 12 months
  - Radiation of symptoms
  - PT and Injections in the last 6 months
  - Second Opinions
- PMR
  - MRI within the last 12 months
  - No radiation of symptoms
  - No conservative management in last 6 months
  - Patients with both neck and back pain
  - Direct Referrals
- APP
  - No MRI within the last 12 months




13

13

## Use of Centralized Call Center for Scheduling




**PROS**



**CONS**


- Reliable coverage of phone lines during business hours
- Ability to float staff across call center teams to ensure consistent coverage
- Use of advanced data tracking/software using call center industry benchmarks
- Management with expertise in call center administration

- Limited flexibility to implement “non-automated or non-standard” scheduling workflows (e.g. complex panel visits, medical record acquisition, etc.)
- Lack of clinical triage upon scheduling
- Creates burden on clinical staff for patient needs falling outside of scheduling protocols
- Clinical departments not included in hiring, training, onboarding, or coaching call center agents



14

14

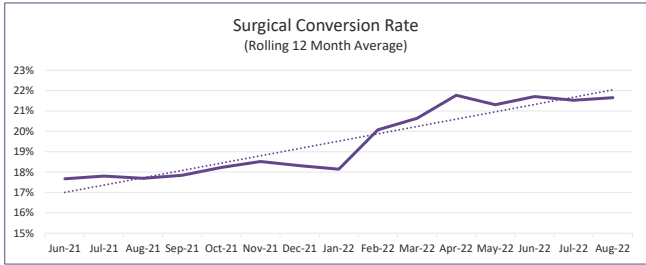


Care Pathways: Non-Surgical Triage and APP “On Demand” Clinic


15

### Improving Access and Efficiency with APPs and PMRs

- Triage assessment by APPs and physiatrists ensures patients receive timely and appropriate care while increasing the efficiency of a surgeon's caseload (e.g surgical conversion rate)
- APP “On Demand” clinic provides further timely access to care by offering patients sooner appointments and initiating interventions (PT, injections, steroids) earlier, where appropriate



Month	Conversion Rate (%)
Jun-21	17.8
Jul-21	17.8
Aug-21	17.8
Sep-21	18.0
Oct-21	18.2
Nov-21	18.5
Dec-21	18.2
Jan-22	18.0
Feb-22	19.8
Mar-22	20.2
Apr-22	21.8
May-22	21.5
Jun-22	21.8
Jul-22	21.8
Aug-22	21.8



16

16






17

**Financial Benefits**

- Retains more PT, imaging, and injection patients within Northwestern as opposed to externally with “one stop shop” model
  - MRI scheduler at check out ensures patients leave with a scheduled imaging appointment
- Ensures timely access to care to prevent patients seeking sooner appointments at other institutions
- Increases conversion rate from clinic to surgery
- Expands patient population seen within the clinic with non-operative patient care pathways as opposed to our previous surgically-driven spine program
- Provides enhanced opportunity to pursue other center of excellence designations beyond Blue Distinction Plus Center

 18

18

Questions?