# 2023 HEALTHTRUST UNIVERSITY CONFERENCE PLAME **ALIGNED FOR SUCCESS OPTIMIZING OUTCOMES**

Improving Efficiencies & Managing Costs in the Laboratory

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**Drew Preslar** 





## Meet the Presenters



Becky O'Neal, MBA, MLS Director, Advisory Services HealthTrust



Moderator: Drew Preslar, MBA AVP, Advisory Services HealthTrust



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#### **Disclosures**

• The presenters have no real or perceived conflicts of interest related to this presentation

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## **Learning Objectives**

At the end of this session, participants should be able to:

- 1. Identify components of a cross-departmental structure which helps to identify, vet and implement savings initiatives.
- 2. Recall concepts that are important to the success of a cross-functional team structure.
- 3. Describe critical evaluation aspects of an initiative to make the best decision for the healthcare system.







# Part 1

## **Project Formation**

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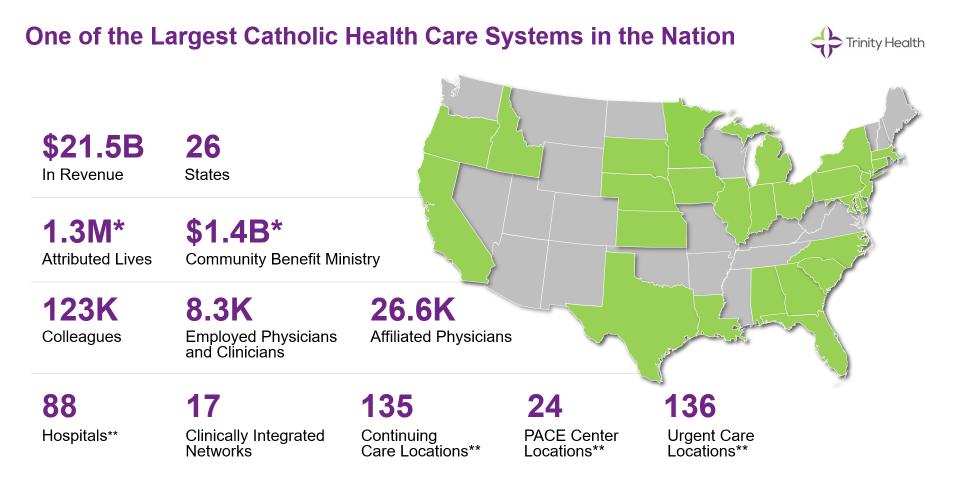


## **Discussion Question**

- 1. What prompted Trinity to embark on this journey?
- What is the size and scale of Trinity Health?
- How were Lab opportunities identified prior to this project?
- What were the challenges that Trinity was dealing with?



#### **Trinity Health Overview**



FY22 data recast to include MercyOne 9.1.2022 acquisition, unless noted. \*Trinity Health FY22 data. \*\*Owned, managed or in JOAs or JVs.

Version: 11.1.22



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#### **Discussion Question**

2. What were some of the structures and processes the team put in place to start the project?





Steering Committee

Project Charter

-		

**RACI Matrix** 

L.	
Initiative	Review/

**Approval Process** 

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Savings Tracking





#### **Project Team Roles & Responsibilities**

TEAM		STEERING COMMITTEE	<ul> <li>Communicate Trinity Health System's commitment to collaboration and success</li> <li>Provide final decision-making authority on issues and initiatives</li> <li>Approve strategic directives; vision/strategy and policy/procedure</li> <li>Provide accountability for non-compliance to contracts and initiative</li> </ul>
ALTHTRUST° LAB	Ż	REGIONAL SERVICE LINE (LAB) REPS	<ul> <li>Provides insight and guidance on key components of project plan and clinical preference</li> <li>Communicate Ministry teams recommendations (product/technology clinical efficacy) to the Steering Committee</li> <li>Represents their region when decisions are made</li> <li>Serves as local champion for savings initiatives and contract compliance</li> <li>Serves as region champion for savings initiatives and contract compliance</li> </ul>
	J.	MINISTRY TEAMS	<ul> <li>Manage the selection of laboratory products (products, services, and technology) for the facility and promotes system standardization and utilization improvement whenever feasible</li> <li>Implement the contract and initiatives decision of Trinity Lab VAT or any system initiatives</li> <li>Provide input and feedback to Trinity Health Lab VAT on any product evaluation, standardization efforts or conversions</li> </ul>

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#### **RASCI Matrix**

#### **Roles and Responsibilities**

<u>R</u>esponsible, <u>A</u>ccountable, <u>S</u>upport, <u>C</u>onsulted, <u>I</u>nformed

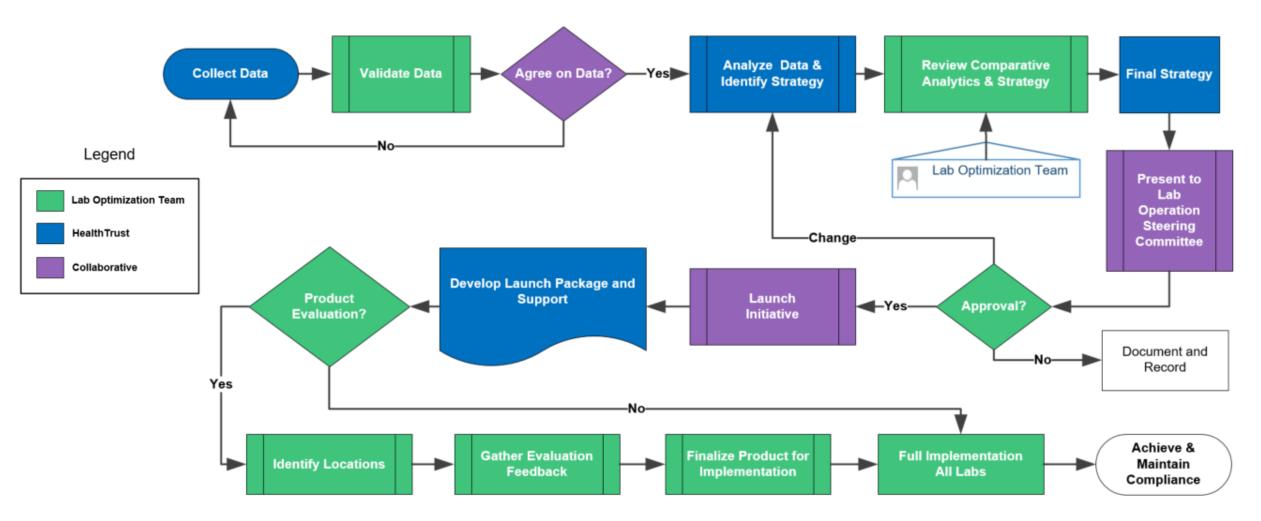
		Ed Hisscock	Dameka Miller	Mike Martin	John Hilton	Lynne Farkas	Meena Rupani	Ross Scott	Scott Gasiorek	Adam Lawing	Suzanne Meinert	Amanda Forth	Dan Pompa	Derek Huntman	Dan Ingram	Rick Phillips	Drew Preslar	Vicki Alberto	Mike Overa	Christa Pardue	Jeff Davidson	Ike Huestis	
Deliverable or Task	Status					Tri	inity/	Leade	ership	)							Н	lealth	าTrus	t			
Governance and Structure																							
Define Roles and Responsibilities (Supply Chain Ops)		1		Α	С			R									С						
Define Roles and Responsibilities (Lab)					Α														R				
Define Roles and Responsibilities (Sourcing)		1	Α		С		R																
Organization design and reporting lines (Supply Chain Ops)		1		Α	С			R									С						
Organization design and reporting lines (Lab)					Α														R				
Organization design and reporting lines (Sourcing)		1	Α		С		R																
Training and Education (Supply Chain Ops)		1		Α	С			R									С						
Training and Education (Lab)					Α														R				
Training and Education (Sourcing)		1	Α		С		R																
Inventory Management								·	·	i	÷	· ·	·		÷	,							
ERP system design				Α	С			R	С								S						
Items/inventory mgt (items, pars, min/max, etc.)				Α	С			R	С								S						
Ordering processes (requisitions, handheld scanning, etc.)				Α	С			R	С								S						
Physical space (layout and flow, special handling requirements)				Α	С			R	С										S				

Source: Developed in collaboration between HealthTrust Advisory and Trinity Health. Please do not reprint without permission.

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## **Initiative Review & Approval Process**



Source: Developed in collaboration between HealthTrust Advisory and Trinity Health. Please do not reprint without permission.

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#### How to Gain Buy-In

Tell it like it is

Break the initiative down in manageable chunks

Hear employees out

#### Reverse the flow

Source: "How to Win the Buy-In: Setting the Stage for Change," Harvard Business Review: https://hbr.org/2008/02/how-to-win-the-buyin-setting-t-1. Accessed 6/1/2023



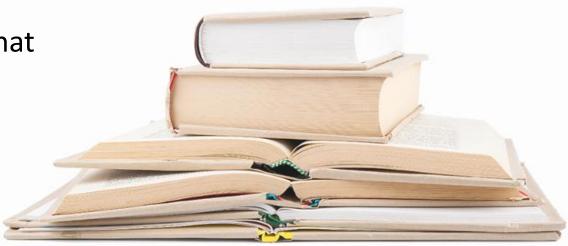


#### What is a Cross-functional Team?

Cross-functional collaboration involves individual teams or representatives from separate departments working together to achieve a common goal.

Cross-functional teamwork helps foster relationships amongst teams who otherwise may have never crossed paths, creating a collaborative culture that benefits all levels of an organization.

Source: "7 Benefits of Cross-Functional Collaboration On Workplace Relationships," *Core Strengths:* <u>https://www.corestrengths.com/cross-functional-collaboration-benefits/</u>. Accessed 6/1/2023



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## **Discussion Question**

3. What were some of the benefits of having a cross-functional team?



1. Insight & Innovation



2. Collaborative Culture



- 5. More Engaged Employees
- 6. Conflict Resolution



3. Colleague Appreciation

- 60
- 7. Team Performance



4. Opportunity to Develop Leadership Skills

Source: "7 Benefits of Cross-Functional Collaboration On Workplace Relationships," Core Strengths: <u>https://www.corestrengths.com/cross-functional-collaboration-benefits/</u>. Accessed 6/1/2023 Source: "Teaming your way through disruption," Deloitte Insights: <u>https://www2.deloitte.com/uk/en/insights/topics/strategy/cross-functional-collaboration.html</u>. Accessed 6/1/2023

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## **Part 2** Building the Pipeline

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## **Discussion Question**

4. How did you all identify opportunities and what were the types of opportunities you identified?



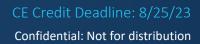
Lab Operations

- Operational Changes
- Standardization (equipment/reagents)
- Reference Lab



Value Analysis & Contracting

- Standardization
- Formulary/SKU reduction
- Right Item, wrong channel
- Product conversion





### **Discussion Question**

5. What were the criteria used to approve and prioritize initiatives?





Impact to Care

**Potential Savings** 

**203** 



Alignment to Existing Strategy







# Part 3

## Implementing Initiatives

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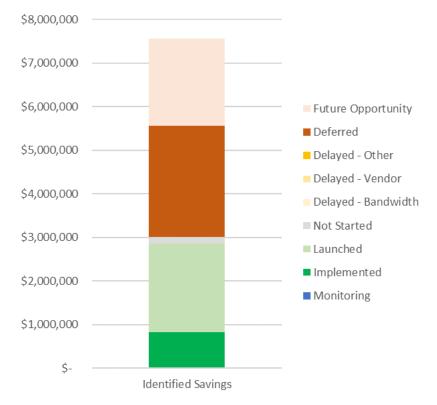
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#### **Savings Tracker Summary**

Initiative Status	Initiatives	An	nual Spend	l	dentified Savings	In	nplemented Savings
Not Started	6	\$	4,773,905	\$	157,489	\$	-
Launched	5		9,263,807		2,023,857		349,337
Implemented	2		2,433,473		827,568		827,568
Delayed - Vendor	0		-		-		-
Delayed – Bandwidth	0		-		-		-
Delayed - Other	0		-		-		-
Subtotal	13		16,471,185		3,008,914		1,176,905
Deferred	1		5,562,392		2,551,152		-
Future Opportunity	4		7,804,752		2,001,673		-
Subtotal	5		13,403,144		4,552,825		-
Grand Total	19	\$	25,963,025*	\$	7,561,739	\$	1,176,905

#### **Total Identified Savings**



		Data Collection	Data Validation	Strategy Development	Revise Strategy	Approved	
Data Source: Trinity Health PO/AP data;	# Initiatives	7	1	1	2	13	24
2020 – 2022. Please do	Annual Spend	\$ 34,178,893	11,383,605	1,990,495	590,390	16, 471,185	\$ 64,164,568
not reprint without permission.	Identified Savings	\$-	-	-	-	3,008,914	\$ 3,008,914

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## **Initiative Example – Reference Lab**

# Scope

#### **Reference Laboratory**

- Dual Source Contract with LabCorp and Quest; Neogenomics for specialty ref lab
- Co-tenant of Warde Medical Laboratory which performs at cost testing for nonprofit hospitals

#### CURRENT STATE/Potential Savings Opportunity

Ministry	Annualized Spend	Potential Savings
IOWA	\$1,990,495	\$411,289
LOYOLA	\$2,800,625	\$413,851
ST. ALPHONSUS	\$ 250,000	\$186,000
ST. FRANCIS	\$ 406,224	\$257,455
ST. MARY'S WATERBURY	\$1,900,013	\$489,142
Grand Total	\$6,448,267	\$1,757,737

Data Source: Trinity Health AP Data; October 2020 – September 2021. Please do not reprint without permission.

#### BUSINESS CASE:

- Current spend \$6.5M with a savings opportunity of \$1.8M
- Recommend converting any current testing sent to commercial labs (i.e. LabCorp, Quest, Mayo, and ARUP) to Warde
- Increased volume to Warde = Increased savings for all co-tenants (rebates)
- Convert off-contract spend with Mayo or ARUP to Ward, Quest or LabCorp
- Future goal of standardizing all ref lab testing for Trinity to Warde (if testing is offered)

#### CONVERSION CONSIDERATIONS:

- Cross-reference testing to determine like-for-like platforms, methodology and turn-around-times
- Pathologist/Medical Director approvals for testing conversions
- Address IT/interface delays or limitations

#### **RESULTS:**

- \$409K in savings had been realized at the end of the engagement
- Project was on-going and a dedicated resource from Warde was assigned

Source: Jim Cook, MBA, MT(ASCP)DLM, Laboratory Integration and Consolidation in a Regional Health System, *Laboratory Medicine*, Volume 48, Issue 3, August 2017, Pages e43–e52, <u>https://doi.org/10.1093/labmed/lmw069</u>

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## **Initiative Example – Lab Distribution**



## Distribution of laboratory supplies to front-line users

- Dual Source Contract
- Key Products: Provides a broad portfolio of laboratory products. Products include general lab supplies and small laboratory equipment

Category	Distributor ported Total Spend	Cor Sav	imated oversion vings to Brand	SKU Reduction
Distributor Spend	\$ 48,419,131			
Product Categories Conv. to Dist. Brand	360,606		81,600	
Grand Total	\$ 48,779,737	\$	81,600	

Category	B Reported al Spend	Estimated nversion Savings	otential ebates	Potential Savings
Identical	\$ 1,903,452	\$ 113,661	\$ 134,235	\$ 247,896
Alternative	974,837	151,752	61,731	213,483
Other Supplies (Equipment)	309,621			
Other Supplies (MedSurg)	155,043			
Other Supplies - Only distributed by Dist. B	4,486,745			
Grand Total	\$ 7,829,698	\$ 265,413	\$ 195,966	\$ 461,379

Data Source: Trinity Health PO Data; May 2020 – April 2021. Please do not reprint without permission.

#### BUSINESS CASE:

#### **Opportunities:**

- Laboratory Distribution spend with 72 vendors, including Trinity Distribution Center
- Conversion savings opportunity ~ \$542,979 savings

#### CONVERSION CONSIDERATIONS:

#### **Conversion Phases:**

- Phase 1: Identical Dist. rep reviews volumes with Ministry and seeks approval
  - 1A Dist. rep works with inventory to bring in volumes to local DC
  - 2A Dist. provides updates to Ministry when product is stocked locally and ready to order
  - 3A Dist. loads price for price parity across Trinity ministries
  - 4A Ministry deactivates/activates MMIS# (deplete remaining inventory)

Phase 2: Alternative/SKU Reduction – Dist. rep reviews products and volumes with Ministry

- Dist. rep orders samples when requested
- Dist. rep follows-up with ministry after samples have been evaluated (Repeats Step 1A – 4A)





## **Initiative Example – Blood Collection Needles and Tube Holders**



Safety blood collection devices used for collection of blood into containers while maintaining safety and protection of the collection professional.

- Justification for Conversion: This is a safety category and is currently awarded as multi-source category.
  - Regulatory requirements require all vendors to have needle stick prevention built into either the needle or holder.
  - Lower cost alternatives are available without loss of quality or safety.

#### BUSINESS CASE:

- Option 1: Savings opportunity of **\$2,535,828.** SKU reduction from 46 to 8 using formulary (excluding items with NO cross)
- Option 2: Focus on reducing use of butterfly needles.
   Develop algorithm to assist decision making on when to use straight vs. butterfly needle

#### **RESULTS:**

- 1. Focused on butterfly needle utilization
- 2. Increased visibility through executive-level cost reduction
- 3. Data shows shift in utilization from butterfly to straight needles

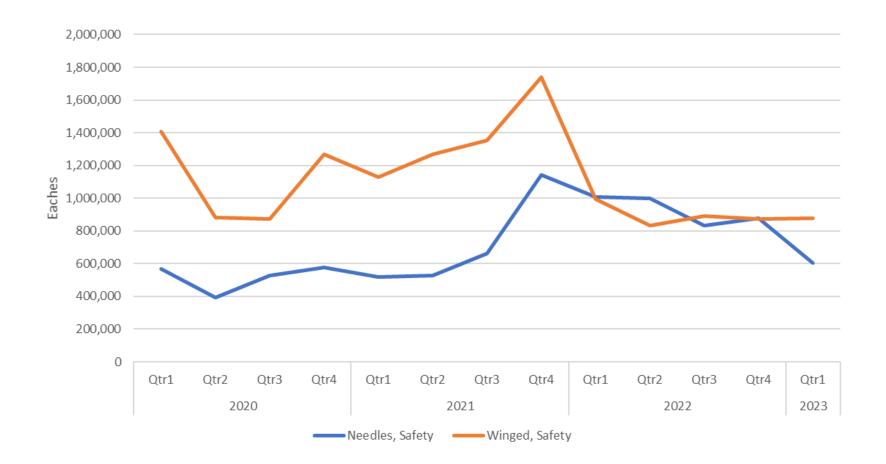
An	Annual Spend Vendor 1 S		dor 1 Savings	Ven	dor 2 Savings	Venc	lor 3 Savings
\$	5,545,828	\$	2,535,292	\$	1,220,051	\$	103,605

Data Source: Trinity Health PO Data; July 2020 – December 2020. Please do not reprint without permission.

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#### **Blood Collection Needles and Tube Holders**



Data Source: Trinity Health PO Data; January 2020 – January 2023. Please do not reprint without permission.

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# **Lessons Learned**

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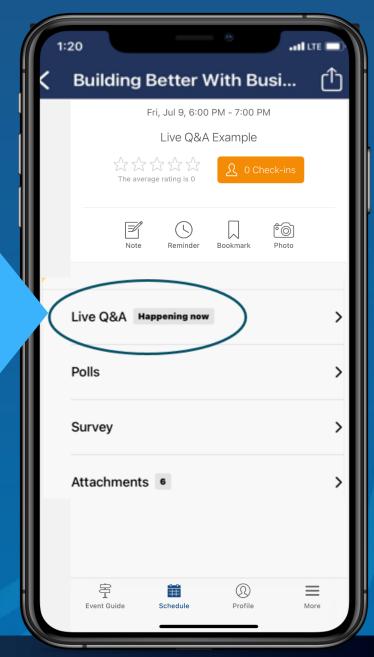




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- Click on "Live Q&A," then "Ask a Question"
- > Type your question & hit "Submit"
- Send in any time; Qs will be held until the end of the session





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# Thank you...

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