

Leading Practice in the Healthcare Supply Chain

Kurt Banas, MBA, FACHE | Senior Manager, Deloitte

Tom Derrick | Senior Vice President, OpenMarkets

Purpose

Gain insight into core research and pain points causing inefficiency in healthcare's capital equipment market, and how provider's implementation of a better governance structure mitigates pain points and waste for both sides of any supply chain transaction.



Agenda

- Factors contributing to a high SG&A in the healthcare equipment market
- Optimal governance structure for health systems
- How and why optimal governance structures result in great efficiency for health systems and suppliers, with lower costs for all



How many surgical tables will you buy next year?

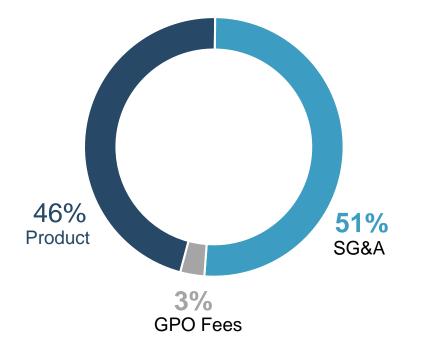
What suppliers will you consider?

What will it cost your suppliers to sell these surgical tables to you?

How much will you pay for your surgical tables?

The \$30 BN Capital Equipment Market is Inefficient

Equipment Supplier Costs



SG&A: Sales, general & administrative costs.

In the auto industry, SG&A is only 7.5%

Source: NYU Stern/Bloomberg



Provider Pain Points







Supplier Pain Points



Lowering the price of equipment usually requires fixing pain points on both sides of an equipment transaction. For providers, optimal governance structures enable a long-term fix to major pain points.





Measurement

Compensation is aligned to Supply Chain performance at system, rather than local level. All initiatives have clear performance metrics.

Example: Supply Chain savings goals only measured at system level to ensure all facilities are in alignment. Adjustments will be made if initiatives adversely affect one facility's financial performance (e.g., facility lab test revenue reductions from increased core lab utilization will be recognized and adjusted).





Efficiency

Accelerates decision-making with simple and effective decision model, empowers Value Analysis Teams to make less-contentious decisions and allocates appropriate resources. Criteria will be defined for "fast track" of decisions.

Example: Supply Chain Governing Committee meetings held monthly with clear escalation process from VATs to Governing Committee and Governing Committee to System C-Suite.





Commitment

Drives organizational commitment and sponsorship from the top down to adhere to decisions and process.

Example: Decisions will be consensus-driven but when necessary Governing Committee Chair will formulate final decision. Adherence and compliance to contracts or utilization protocols will be monitored and non-compliance presented to Committee to determine appropriate corrective action.





Engagement

Ensures key stakeholders across facilities and will be fairly represented in the process. They will have their voices heard before decisions are made.

Example: Supply Chain Governing Committee will have equal clinical and non-clinical membership and representation across all facilities. Expectations of team members will be clearly defined in team charters and membership will evolve as necessary.





Values

Empowers Value Analysis Teams and Initiative Champions and emphasizes accountability for teams to complete initiatives on defined schedules.

Example: There will be a clear expectation of adherence to Supply Chain Governing Committee decisions, and a process for and consequence of not implementing decisions fully in a timely manner.





Accountability

Maintains focus on what is best for a health system and patients, rather than what is best for an individual hospital/facility.

Example: Product preference without clinical evidence supporting superior outcomes will not be a valid reason for lack of support for an initiative. Recruitment teams to consider formulary in cost/benefit analysis





Standardization

Champions efforts to standardize both products and care protocols to deliver safe and effective care at the right cost. This can be accomplished through High Reliability Medicine or Clinical Effectiveness program involvement

Example: Committee agrees to limit product categories to the minimum needed number of suppliers whenever possible to achieve more significant savings opportunities.





What will be different tomorrow?

A new Supply Chain model led by a Supply Chain Governance Committee establishes accountable leadership and enables strategies for sustaining savings.



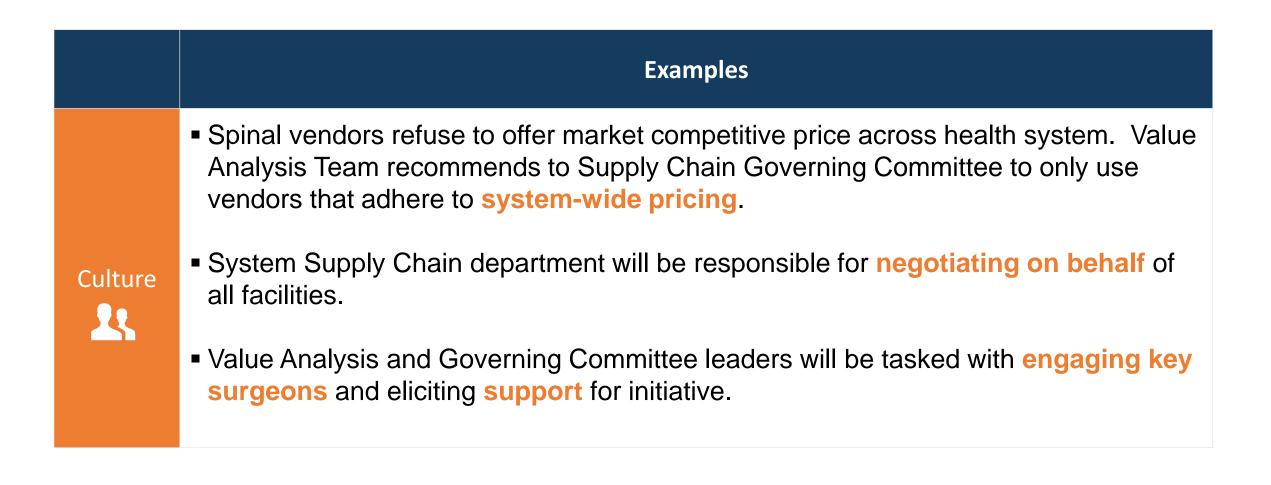
	Lagging Practice
	Organization lack a system-oriented approach
	Facilities act in own financial interest at expense of system
Culture	Physicians are recruited based on the culture of "choice" at some local hospitals





- A system-oriented approach to sourcing and contracting and enforcement of product and service formularies and protocols will reduce cost and improve quality of care
- Culture
- Incentives need to be aligned primarily at system level, then to local facilities to strengthen commitment, values, and accountability
- Aggressive savings goals can ONLY be achieved with active participation by physicians and steadfast support by local administrators







	Lagging Practice
	No or limited existing governance structure
Structure	Communication of decisions at various levels not timely nor standardized
血	 Inconsistent reporting hierarchy within facility procedural areas (e.g., some areas report to supply chain, others report site leadership)



	Leading Practice
Structure	 Supply Chain Executive Council members meet regularly (monthly) to enable quick decisions when warranted and to better address standardization and utilization opportunities
<u></u>	 Realignment of reporting structure for facility Supply Chain Management functions for continuity in implementing contracts
	Expectations will be defined for timely communication of product, service, and technology decisions
	Robust transparency between stakeholders enforced by system-generated transparency



	Examples
Structure	 "Fast track" accelerated (<90 days) implementation timeline (basic commodity and other criteria). Small number of initiatives (PPI, purchased services) will take longer than 90 days and will adhere to strict project plan endorsed by Governing Committee
	Several specific expectations of each key committee will be defined and tracked to ensure timely implementation and communication



	Lagging Practice
Decision	Decisions and contract adherence are not strictly enforced or monitored
Rights	Decisions are not made based on clinical evidence but rather on local preferences
	No clear decision escalation procedures
	No clear decision escalation procedures



Leading Practice Pecision Rights > > Clear decision escalation procedures will be followed

Spend will be monitored after decision for adherence to Supply Chain Governing Committee decisions and each facility will have designated accountable parties



Examples

Decision Rights



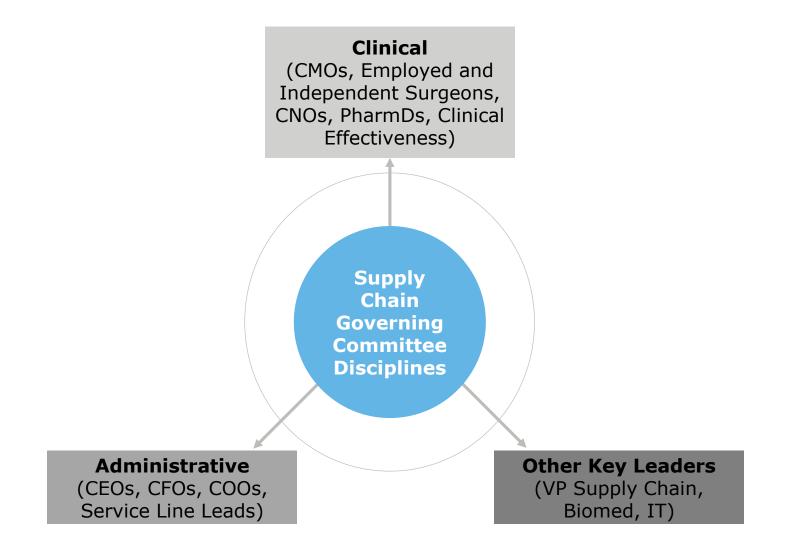
The Radiology/Cardiology Value Analysis Team recommends a 90% committed contract to Bracco for contrast media and the Council agrees. Two outspoken doctors at one facility strongly prefer GE and refuse to comply. This is escalated to the Supply Chain Governing Committee.

 Contract compliance will be reported out on a regular basis to the Governing Committee to identify opportunities to strengthen commitment to Committeedriven product decisions across the system.



Sample Supply Chain Governing Committee

Determining the composition of the Supply Chain Governing Committee is critical to providing oversight and direction to achieve savings goals



Process Overview for SC Governing Committee

Value Analysis/Ad Hoc Initiative Teams

- Initiate and review supply chain, pharmacy, and purchased service opportunities
- Committee Review and discuss propose

Supply Chain Governing

- Review and discuss proposed strategy, risks, and possible alternatives for initiatives
- Provide executive support and guidance over entire Supply Chain governance process

C-Suite Sponsors



Decision Communicated to stakeholders through System Supply Chain in a timely manner

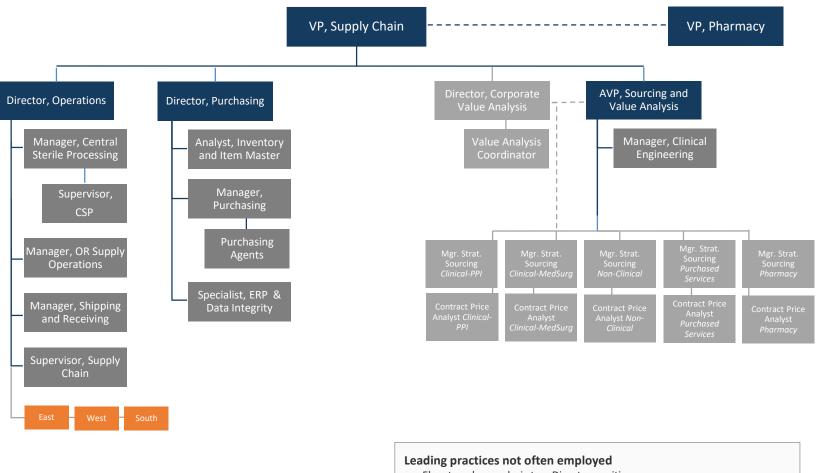
5



Appeals by individuals or facilities are presented with both financial and clinical evidence to the SC Governing Committee for reconsideration



Sample Supply Chain Organizational Structure



New/realigned reporting line New/realigned position Site-specific supply chain lead/manager

- Elevate value analysis to a Director position
- Shift resources to Value Analysis (often from the contracting team)
- Hire Strategic Sourcing managers instead of Contract Administrators



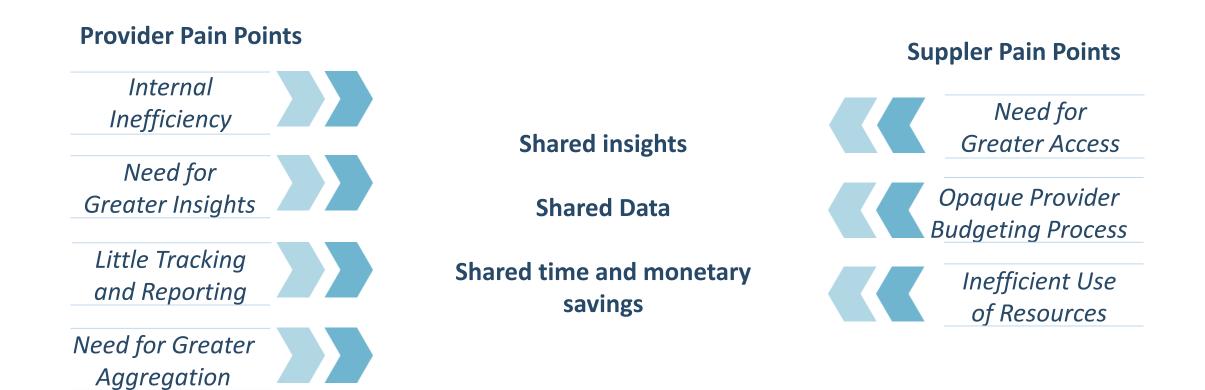
Future State Role Transition

Strategic Sourcing Managers Replace Contract Administrators					
Contract Administrator (Current) Courrent) Courrent					
Largely Transactional	Strategically Focused				
Strategic Sourcing Mana	ager: New Skills Required				
 Advanced analytical and negotiation skills 					
 Communication, presentation, and project management skills 					
 Ability to frame compelling business cases for product selection an line profitability, and deeper partnerships with suppliers and manu 					
 Ability to influence peers and stakeholders 					
• Ability to work effectively with senior management, build and main	ntain strategic alliances and other high-level contractual relationships				



Improving your governance structure can create efficiencies for all stakeholders, including supplier partners. Communicate strategy, changes and timelines often and clearly.

Shared Pain Points Addressed by Better Governance





Summary & Key Take Away

Providers need to continue to strive to better organize their own processes and governance

Demonstrate and demand transparency

A better organizational structure and capital process can help you buy surgical tables faster and for less



Thank You

Deloitte.

Kurt Banas, MBA, FACHE

kubanas@deloitte.com

Image: Comparison of the part of th	CopenMarkets Exchange x							
Beach product catalog Supples Submitted & Internal Reference Number ↓ Respond By ↓ Last Activity ↓ Opdated ↓ Request J Supples Submitted & Internal Reference Number ↓ Respond By ↓ Last Activity ↓ Opdated ↓ Innee stetchers for 13N (#374) A 1 John Doe 23423 0/31/2017 Jone Main Reguest #448 A 0 John Doe 23423 0/31/2017 A 0 3doys ago Submitted Request #448 A 0 John Doe 23423 0/31/2017 A 0 3doys ago Submitted Request #448 A 0 John Doe 23423 0/31/2017 A 0 3doys ago Submitted Request #445 A 0 John Doe 23423 0/13/2017 A 0 3doys ago Submitted Request #445 A 0 John Doe 23423 0/13/2017 A 0 16 doys ago 16 doys ago Doth Request #445 A 0 John Doe 200 10/06/2017 A 0 20 doys ago Doth Request #436 A 0 John Doe 200 20 20 doys ago Doth Surgical Table (#432) A 10 John Doe<	→ C ≜ S	ecure https://om-exchange-demo.her	okuapp.com/app/red	quests/projects/al	l/demands/all	* * 6		₩ 🄶 🕕 (¤) (
Active Requests Suppliers Submitted By Internal Reference Number > Respond By > Last Activity → Updated → Request Name → Suppliers Submitted By Internal Reference Number > Respond By > Last Activity → Updated → Linesci stretchers for 13N (#374) ▲ 1 John Doe 23423 10/31/2017 Jones Smith sent a message a day ago Submitted Request #448 ▲ 0 John Doe 23423 10/13/2017 - Concold 13 days ago Morkflow Automation Request (#445) ▲ 1 John Doe 23423 10/13/2017 - Concold 13 days ago Submitted Request #448 ▲ 0 John Doe 23423 10/13/2017 - Concold 13 days ago Submitted Request #445 ▲ 0 John Doe 23423 10/13/2017 - Concold 13 days ago Submitted Request #445 ▲ 0 John Doe 10/12/2017 - Concold 15 days ago Draft Request #436 ▲ 0 John Doe - Concold - Concold 23 days ago Draft Request #436 ▲ 1 John Doe	🗿 OPENM	IARKETS Requests	Settings					John Doe 👻
Request № Suppliers Submitted B Internal Reference Number (Respond Be) Lat Activity ← Updated = Internal Preventioner Stretchers for 13N (#374) A 1 John Doe 08/25/2070 Jane Smith senta messase 2 months ago Internal Preventioner A 1 John Doe 24323 10/31/2017 Jon 2000 3 day ago Submitted Request #448 A 0 John Doe 2423 10/13/2017 - 7 days ago Vorkflow Automation Request #449 A 10 John Doe 2423 10/13/2017 - 13 days ago Submitted Request #448 A 0 John Doe 2423 10/13/2017 - - 13 days ago Vorkflow Automation Request #449 A 10 John Doe 2423 10/13/2017 - - 15 days ago Submitted Request #445 A 0 John Doe - 10/06/2017 - - - 23 days ago Internal Preventioner A 0 John Doe - - - - - - - - - - - - - <t< th=""><th>Search produc</th><th>rt catalog</th><th></th><th></th><th></th><th></th><th></th><th>Search</th></t<>	Search produc	rt catalog						Search
Stretchers for 13N (#374) \$1 John Doe 08/25/2017 Jane Smith sent a message 2 months ago Submited Lifts for new pt suite (#449) \$1 John Doe 23423 10/31/2017 - a day ago Submited Request #448 \$10 John Doe 23423 10/13/2017 - 7 days ago Morkflow Automation Request (#446) \$1 John Doe 23423 10/13/2017 - - 13 days ago Submited Request #448 \$1 John Doe 23423 10/13/2017 - - 13 days ago Submited Request #446 \$1 John Doe 23423 10/13/2017 - - 13 days ago Submited Request #445 \$1 John Doe 10/12/2017 -<	Active Reques	ts 🗸						Create Request
Lifts for new pt suite (#449) ▲ 1 John Doe 23423 10/31/2017 - A day ago Submitted Request #448 ▲ 0 John Doe 23423 10/13/2017 - 7 days ago Holter (#447) ▲ 1 John Doe 23423 10/13/2017 - 13 days ago Workflow Automation Request (#446) ▲ 1 John Doe 23423 10/13/2017 - 13 days ago Submitted Request #445 ▲ 1 John Doe 23423 10/13/2017 - 15 days ago Submitted Request #445 ▲ 0 John Doe 10/06/2017 - - 15 days ago Tortt Request #436 ▲ 0 John Doe - 09/27/2017 - - 23 days ago Surgical Table (#432) ▲ 1 John Doe 09/27/2017 - - 23 days ago Barlatric Beds (#409) ▲ 1 John Doe 09/15/2017 - - - - - - - - - - - - - - - - - - -	Request Nam	ne •	Suppliers	Submitted By	Internal Reference Number 👻	Respond By 👻	Last Activity 🗸	Updated 👻
Submitted Request #448 Image: Constraints of the constraints of th	Unread	stretchers for 13N (#374)	≛ 1	John Doe		08/25/2017	Jane Smith sent a message	2 months ago
Interview Interview <t< td=""><td></td><td>Lifts for new pt suite $(\#449)$</td><td>A 1</td><td>John Doe</td><td>23423</td><td>10/31/2017</td><td>-</td><td>a day ago</td></t<>		Lifts for new pt suite $(\#449)$	A 1	John Doe	23423	10/31/2017	-	a day ago
Workflow Automation Request (#446) I John Doe IO/12/2017 I 5 days ago Submitted Request #445 I O In Doe IO/06/2017 I 5 days ago Draft Request #436 I O In Doe I O In Doe I S days ago Surgical Table (#432) I John Doe I O In Doe I John Doe I O In Doe I D In Doe I D In Doe I D In Doe	Submitted	Request #448	å 0	John Doe		-	-	7 days ago
Submitted Request #445		Holter (#447)	å 1	John Doe	23423	10/13/2017	-	13 days ago
Draft Request #436 4 0 John Doe - - 23 days ago Surgical Table (#432) 4 1 John Doe 09/27/2017 - 23 days ago Barlatric Beds (#409) 4 1 John Doe 09/15/2017 - a month ago		Workflow Automation Request (#446)	å 1	John Doe		10/12/2017	-	15 days ago
Surgical Table (#432) 1 John Doe 09/27/2017 - 23 days ago Bariatric Beds (#409) 1 John Doe 09/15/2017 - a month ago	Submitted	Request #445	å 0	John Doe		10/06/2017	-	15 days ago
Bariatric Beds (#409) 🛓 1 John Doe 09/15/2017 - a month ago	Draft	Request #436	å 0	John Doe		-	-	23 days ago
		Surgical Table (#432)	å 1	John Doe		09/27/2017	-	23 days ago
Bariatric Bed Project - Nursing Admin (# 🛔 1 John Doe 09/22/2017 - a month age		Bariatric Beds (#409)	å 1	John Doe		09/15/2017		a month ago
		Bariatric Bed Project - Nursing Admin (#.	🏝 1	John Doe		09/22/2017		a month age
IV stands for OR (#395) 👗 1 John Doe 23523 09/05/2017 - 2 months ag		IV stands for OR (#395)	A 1	John Doe	23523	09/05/2017	-	2 months ag



Tom Derrick tderrick@openmarketshealth.com

About Deloitte

Deloitte refers to one or more of Deloitte Touche Tohmatsu Limited, a UK private company limited by guarantee ("DTTL"), its network of member firms, and their related entities. DTTL and each of its member firms are legally separate and independent entities. DTTL (also referred to as "Deloitte Global") does not provide services to clients. Please see www.deloitte.com/about for a detailed description of DTTL and its member firms. Please see www.deloitte.com/us/about for a detailed description of the legal structure of Deloitte LLP and its subsidiaries. Certain services may not be available to attest clients under the rules and regulations of public accounting.

This communication contains general information only, and none of Deloitte Touche Tohmatsu Limited, its member firms or their related entities (collectively, the "Deloitte Network"), is, by means of this communication, rendering professional advice or services. Before making any decisions or taking any action that may affect your finances, or your business, you should consult a qualified professional adviser. No entity in the Deloitte Network shall be responsible for any loss whatsoever sustained by any person who relies on this communication.

Copyright © 2016 Deloitte Development LLC. All rights reserved.