

# May the Workforce Be with You:

## Next-Generation Provider Workforce Planning

*In this era of provider burnout, recruitment challenges, rapidly shifting expectations and imperatives for market distinction, every health system needs a comprehensive and well-informed provider workforce plan.*

Effective, contemporary provider planning requires thoughtful and intentional consideration of: clinical program growth strategies; care delivery transformation expectations and market requirements; care team model development, including the role and utilization of advanced practice providers (APPs); positioning of physicians as empowered, capable leaders of medical groups and care transformation; and an organizational culture that is collaborative, transparent and accountable.







Leading health systems are moving toward a more evolved approach to understanding provider workforce requirements, based on a comprehensive set of workforce questions and considerations ...



...and toward a more advanced and thorough planning process that will position the health system to achieve its strategic performance goals:

**Traditional Approach:**  
*Supply and Demand*

**Next-Generation Planning:**  
*Drive Strategy, Clinical Models  
and Performance Goals*

 <p><b>Modeling Approach</b></p>	<p>Using a one-size-fits-all model</p>	<p>Tailoring model to each market, understanding transition to value, community needs and care-seeking behavior</p>
 <p><b>Calculating Demand</b></p>	<p>Use of traditional population-based demand ratios</p>	<p>Creatively using metrics that represent systems with evolved care models (e.g. Kaiser) and changing consumer dynamics</p>
 <p><b>Supply of Providers</b></p>	<p>Focus on physicians only</p>	<p>Incorporating use of APPs</p>
 <p><b>Access to Care</b></p>	<p>Assumption of patients accessing physicians through IP/OP hospitals or clinics</p>	<p>Looking at impact of e-visits, telehealth and other virtual care modalities</p>
 <p><b>Care Delivery Model</b></p>	<p>Historic fee-for-service care delivery model assumed in calculating FTEs</p>	<p>Examining evolution of market in terms of adoption of PCMH models, CPC+, bundles and movement in the market to value, and determining implications on FTEs required by role</p>
 <p><b>Analyzing Provider Surplus/ Gap</b></p>	<p>Workforce planning as a mathematical equation comparing supply and demand</p>	<p>Tailoring approaches based on system and service line strategies and market dynamics</p>

**Systems that are most successful in provider workforce planning understand it is not simply a mathematical equation.**

A broad array of variables must be woven together to determine implications for provider recruitment, care model transformation, compensation plan redesign and operational improvement. Engaging provider and administrative leadership in a dynamic conversation around the full set of issues facing providers, including burnout, operational barriers and APP collaboration, is the first step toward a workforce planning approach that will position the health system for the future.

## About the Authors



**Michelle Moratti**  
Director and Leader of  
the Integrated Delivery  
System Segment  
770-317-1218  
[mmoratti@chartis.com](mailto:mmoratti@chartis.com)

Michelle Moratti is a Director with The Chartis Group and leader of the Integrated Delivery System segment. She has over 25 years of line management and consulting experience working with healthcare provider organizations. Ms. Moratti has provided strategic and operational consulting services to healthcare provider clients, as well as led service delivery organizations at companies providing solutions to healthcare providers. Ms. Moratti's areas of focus include strategic planning, accountable care strategy, development of clinically-integrated networks and partnership portfolio design and implementation.



**Mark Werner, MD**  
Director, Clinical  
Consulting and Chartis  
Physician Leadership  
Institute  
540-520-4161  
[mwerner@chartis.com](mailto:mwerner@chartis.com)

Mark J. Werner, MD, CPE, FAAPL is a Director with The Chartis Group leading Clinical Consulting, the Chartis Physician Leadership Institute and our work with the physician segment. In this role, Dr. Werner leads clinical consulting efforts across the firm focusing on: enterprise physician alignment and leadership, medical group performance, adoption and change management, performance innovation, population health, provider-payor relationships and the translation of strategy into clinical operations.



**Michael Tsia**  
Principal  
626-456-2325  
[mtsia@chartis.com](mailto:mtsia@chartis.com)

Michael Tsia is a Principal with The Chartis Group. He serves as an advisor to executive leaders at leading academic health centers, children's hospitals and community integrated delivery networks on numerous topics, including enterprise strategic and financial planning, provider workforce planning, payor-provider partnerships, clinically integrated network design and organizational economic alignment. Mr. Tsia has been a leader in management consulting with The Chartis Group for over ten years and regularly speaks on a variety of healthcare strategic planning topics. He also serves on the Board of Directors for Methodist Hospital of Southern California.



# THE CHARTIS GROUP

## About The Chartis Group

The Chartis Group® (Chartis) provides comprehensive advisory services and analytics to the healthcare industry. With an unparalleled depth of expertise in strategic planning, performance excellence, informatics and technology, and health analytics, Chartis helps leading academic medical centers, integrated delivery networks, children's hospitals and healthcare service organizations achieve transformative results. Chartis has offices in Atlanta, Boston, Chicago, New York, Minneapolis and San Francisco. For more information, visit [www.chartis.com](http://www.chartis.com).

Atlanta | Boston | Chicago | Minneapolis | New York | San Francisco

© 2018 The Chartis Group, LLC. All rights reserved. This content draws on the research and experience of Chartis consultants and other sources. It is for general information purposes only and should not be used as a substitute for consultation with professional advisors.