Welcome to Leadership in Crisis: Staying Calm and Setting a Course in the Storm, A CIO's story of Managing COVID-19

The presentation will begin shortly.

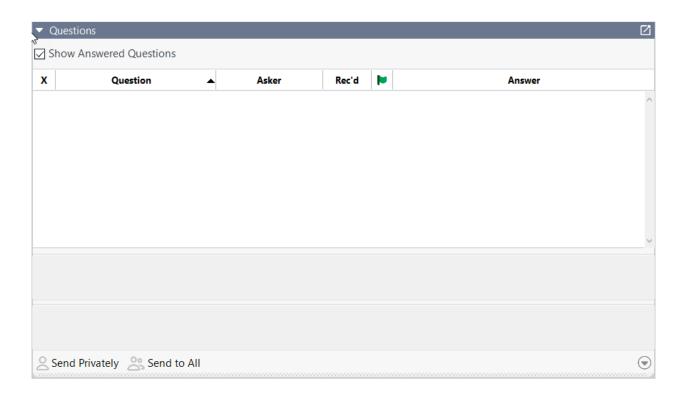
Please note that all attendees are in listen only mode.

A recording of this webinar will be sent out to all attendees.





Inquiries may be submitted using the Questions window.





About eMedApps

eMedApps is a Healthcare Information Technology Services company providing practices, clinics, and hospitals with a full range of services, as well as a suite of products designed to increase efficiency and facilitate communication.

- Founded in 1999
- Working as partner with NextGen since 2001
- Serving healthcare clients across USA
- Services and Products for healthcare providers



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About Our Presenter

Mical Cayton, is the CIO of a California FQHC-Community Medical Centers in Stockton, CA. CMC is a network of 24 health care centers, that continues to expand, serving patients in San Joaquin, Solano and Yolo Counties. He has been with the organization almost 2 years.

Previously, Mical was Division CIO at Kaiser Permanente, and has extensive experience working across various verticals supporting Information Technology functions, including financial services, government, and logistics. He has worked at well known companies such as Amazon, Expedia, Wells Fargo, and Bank of America.





About Our Presenter

Community Medical Centers is one of the largest safety net providers in California employing 900 FTE's and the FQHC is a Federally Qualified Health Center and certified by the Joint Commission as a Primary Care Medical Home. Mical runs and oversees operation of CMC's IT department and is directly responsible for the implementation of key technology systems used by the organization. As the Covid-19 break-out continues to spread across the country, IT leaders, like Mical have realized they need to shift their strategic priorities to not only help their organizations and clinicians handle the pandemic, but figure out how will they continue to lead and operate as a successful CIO and FQHC in the future.



Mical's Story

Mical's story begins the week of March 17, 2020 when the stay at home order was announced by the Governor of the state of California. He will discuss how he was able to utilize technology to deliver quality results, and what he anticipates his organization will be like in a Post-Pandemic World.











March 17—The First Week of the Pandemic

Pandemic-Early Days

- Immediately took inventory of resources, validated laptops, hardware, licenses (zoom & others) that were available to support staff/remote workers, scaled up technologies quickly.
 - Adjusted workflows
 - Day 2-started to support telephonic calls/visits
- Leveraged existing applications
 - NextGen, Otto, Doximity, WebEx, etc.
- No clinics closed
- Only 10 FTE's laid off



Pandemic-Early Days

- Administrative and Front office staff hours reduced.
- Leadership took pay cuts.
- Patient visits to clinics decreased by 30%.
- Call center continued to operate status quo.



Pandemic—Early Days

- What tech products were need to support remote work?
- Review and revision of workflows.
- Staffing, who, where.







- The COVID-19 crisis provided a singular focus for our organization. Within 3 days we pivoted to a telehealth model that included billing code changes allowing our providers to accomplish and bill telephonic visits remotely.
- CMC Billing Director very proactive, on top of coding changes and was ready to bill telehealth immediately.
- CMC CMO guided providers in knowing what to do, how to do telephonic visits, workflow changes



.• Providers started taking telephonic calls by the third day of the pandemic.

• Level of executive leadership support without ego's has been exceptional and has resulted in CMC being very nimble in our decision-making process during this

pandemic.



- Increased and improved data analytics. Leadership gets daily reports:
- ~ Operational reports to look at end of day patient visits
 - ~ Breakdown of type of visit
 - ~ Trends

No show visits decreased up to 50%







- Currently continuing with telehealth model which we were previously moving towards before Covid-19.
- Faster turnaround for decisions related to tech product selection and deployment.



Financial Challenges Faced

Financial Challenges

- A new Financial reality arrived with the Pandemic.
- At the peak of the stay at home losing 57K per day. That has now corrected and the number is much smaller.
- Upgraded IT infrastructure.





Financial Challenges

- Balancing work/home for employees with reduced work hours.
- Benefits maintenance for workers working *less* than 40 hours per week.
- Workers who are <u>making more staying at home</u> due to enhanced unemployment benefits.



Financial Challenges

- Increased technology spend on laptops (2 in 1 devices).
- Increased support costs for additional software licenses.
- How to add more staff for the business in a strategic manner.
- Priorities what are they given the fluid nature of pandemic.



Impact of the Pandemic — What is the next iteration of CMC's Footprint?





- By the end of 2020, desktop to the cloud, telephone to cloud, EHR to cloud???
- NextGen hardware upgrade, NextGen application upgrade.
- Expanding Data Analytics.



What's Next?

- New Phone service with AT&T.
- Patient Service Center Ring Central pilot and Cisco UCaaS pilot.
- Building out the Technical Infrastructure.
- Decreasing physical office space.
- Get back to Pre-Covid financial numbers.



What's next?

- Begun to review planned capital projects and how to reduce the size of them. Early projections show us saving millions because the footprint of new construction will be smaller(MD offices. etc.)
- Reality now is that not everyone has to be in the office everyday and can work from home. Found that productivity has increased, moral boosted.



What's Next?

- New work guidelines in support of long-term remote work, facilities disinfection procedures driven by facilities and infection control team.
- Pushing the boundaries of innovation especially as we continue to operate via teleworking and provide health services via telehealth and digital health services.
- This has been the classic change management exercise, and we all know change is hard. That being said, open communication, open mindedness to new opportunities and experiences and an open attitude to new ways of working are key.



What's Next?

• As we look beyond COVID-19, we will continue to improve the tools we have and add on to others in order to meet our patients where they are — whether that's in a clinic with a mask or at home with a mobile phone.

• Increased access to care by leveraging video and telephonic tools while preserving operational cashflows are found to be compatible. We don't have to sacrifice patient care at the altar of cashflow. We proved we can improve patient access and stay cashflow positive.



Q&A

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