

Centers for Medicare & Medicaid Services

Evaluation of the Medicare Acute Care Episode (ACE) Demonstration

Contract Number: HHSM-500-2006-000071

Initial Site Visit Report Final

March 12, 2012

Attention:

Jesse M. Levy, PhD

Contract Officer's Representative

Center for Medicare and Medicaid Innovation

Submitted by:

IMPAQ International, LLC

Oswaldo Urdapilleta, PhD (Project Director)

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APPENDIX VOLUME I
IMPAQ FURNISHED MATERIALS

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**APPENDIX A: BENEFICIARY FOCUS GROUP RECRUITMENT
SCREENERS (CARDIOTHORACIC AND ORTHOPEDIC PROCEDURES)**

**PARTICIPANT SCREENER FOR
CARDIO BENEFICIARY ACE FOCUS GROUPS**

Hello, my name is _____. I am calling on behalf of the Centers for Medicare and Medicaid Services (CMS). CMS has contracted with a company called IMPAQ International, a research and consulting firm in the Washington DC area. We are working with the Centers for Medicare and Medicaid Services and [insert the name of the hospital] to speak with Medicare beneficiaries who have recently undergone a cardiothoracic procedure at [insert name of hospital]. We are looking for participants for a focus group we are holding at [insert name of hospital].

IF ASKED: (EACH INTERVIEWER WILL HAVE THIS INFORMATION).

If respondents ask how their name was obtained, tell them their phone number was randomly selected from a list of individuals provided by the Centers for Medicare and Medicaid Services. [If respondents are concerned about participating, tell them that our contract with CMS specifically prohibits me from revealing anything more than their first name to CMS or the hospital or anyone else, whether or not they participate in the focus group.]

This project has been approved by the U.S. Office of Management and Budget (OMB). The OMB Clearance Number is 0938-1117. If you like, I can give you a name and address where you can send comments and questions or suggestions regarding the process for recruiting potential participants in the focus groups.

CMS, 7500 Security Boulevard,
Attn: PRA Reports Clearance Officer,
Mail Stop C4-26-05,
Baltimore, Maryland 21244-1850

Your answers to these questions will be held completely confidential by IMPAQ, meaning we will not provide anything more than your first name to CMS.

Would you be interested in participating?

- () Yes.....Continue
- () No..... Thank and terminate

1. Do you consider yourself to be fluent in English?

- () Yes.....Continue
- () No..... Terminate

2. Have you recently undergone a cardiothoracic procedure at [insert hospital name]?
 Yes.....Continue
 No..... Terminate

3. How long ago did you undergo your procedure?
 less than 6 months.....Continue
 6 to 12 months ago.....Continue
 1 to 2 years ago.....Continue
 more than 2 yearsTerminate

For questions 4-7, recruit a mix of individuals

4. Into which of the following categories does your age fall?
 18 to 64.....Continue
 65 to 70Continue
 71-75.....Continue
 76 to 80.....Continue
 81 and older.....Continue

5. Which of these categories does your total annual household income fall into? [*May opt-out if they wish to.*]

- Less than \$34,999
 \$35,000 to \$49,999
 \$50,000 to \$75,000
 Over \$75,000
 opted out

6. Please identify your highest completed level of education. [*May opt-out if they wish to.*]

- Some High School
 High School Diploma/GED
 Some College or Associate's Degree
 Bachelor's Degree
 Graduate or Professional Degree
 opted out

7. So that we can be sure that all backgrounds are represented in our project, could you please tell me the race or ethnic origin you identify with [1 or more responses OK; may opt-out if they wish].

- Hispanic or Latino/a
- American Indian or Alaska Native
- Asian
- Black or African American
- Native Hawaiian or other Pacific Islander
- White
- opted out

8. Record Gender—DO NOT ASK UNLESS UNABLE TO DETERMINE; may opt-out if they wish.

- Female
- Male
- opted out

INVITATION

Thank you for answering our questions. Based on your responses, we would like to invite you to participate in a focus group which will be held in [insert city and hospital] [insert date] at [insert time]. The total time will be no more than 2 hours. We will not be providing transportation to the hospital, but we will provide everything that you need to participate in the focus group when you arrive. Your participation is completely voluntary. We will provide you with a \$25 stipend for participating as well as a light snack and refreshments. The incentive you will receive is in cash and **is not reported as income to the IRS.**

Are you willing to participate?

- Yes.....Continue
- No..... Terminate

We will not be able to provide transportation, interpreters or Braille materials. We can accommodate wheel chair access. Will you still be able to attend?

- Yes.....Continue
- No..... Terminate

I'm glad that you will be able to join us! At this point I need to collect some contact information from you. Then we will send you a confirmation letter and directions to the facility via e-mail (or regular mail).

Name: _____

Address: _____

Telephone # (Day): _____ (Evening) _____

E-mail Address: _____

We are only inviting a few people, so it is very important that you notify us as soon as possible if for some reason you are unable to participate. Please call *[insert name and phone]* if this should happen. We look forward to having you participate on *[insert day]* at *[insert time]*.

Do you have any questions?

Great! Thank you for your time and we will be in touch again the day of the focus group. Please bring reading glasses if you use them.

TERMINATE TEXT

Thank you very much for your time, and thank you for answering our questions. Unfortunately, based on the focus group requirements, we can't extend an invitation at this time. Thanks so much for your time and have a good *[day/evening]*.

**PARTICIPANT SCREENER FOR
ORTHO BENEFICIARY ACE FOCUS GROUPS**

Hello, my name is _____. I am calling on behalf of the Centers for Medicare and Medicaid Services (CMS). CMS has contracted with a company called IMPAQ International, a research and consulting firm in the Washington DC area. We are working with the Centers for Medicare and Medicaid Services and [insert the name of the hospital] to speak with Medicare beneficiaries who have recently undergone an orthopedic procedure at [insert hospital name]. We are looking for participants for a focus group we are holding at [insert name of hospital].

IF ASKED: (EACH INTERVIEWER WILL HAVE THIS INFORMATION).

If respondents ask how their name was obtained, tell them their phone number was randomly selected from a list of individuals provided by the Centers for Medicare and Medicaid Services. [If respondents are concerned about participating, tell them that our contract with CMS specifically prohibits me from revealing anything more than their first name to CMS or the hospital or anyone else, whether or not they participate in the focus group.

This project has been approved by the U.S. Office of Management and Budget (OMB). The OMB Clearance Number is 0938-1117. If you like, I can give you a name and address where you can send comments and questions or suggestions regarding the process for recruiting potential participants in the focus groups.

CMS, 7500 Security Boulevard,
Attn: PRA Reports Clearance Officer,
Mail Stop C4-26-05,
Baltimore, Maryland 21244-1850

Your answers to these questions will be held completely confidential by IMPAQ, meaning we will not provide anything more than your first name to CMS.

Would you be interested in participating?

- Yes.....Continue
- No..... Thank and terminate

9. Do you consider yourself to be fluent in English?

- Yes.....Continue
- No.....Terminate

10. Have you recently undergone an orthopedic procedure at [insert hospital name]?
 YesContinue
 No Terminate
11. How long ago did you undergo your procedure?
 less than 6 months.....Continue
 6 to 12 months ago.....Continue
 1 to 2 years ago.....Continue
 more than 2 yearsTerminate
12. Into which of the following categories does your age fall?
 18 to 64.....Continue
 65 to 70Continue
 71-75.....Continue
 76 to 80.....Continue
 81 and older.....Continue
13. Which of these categories does your total annual household income fall into? [*May opt-out if they wish to.*]
 Less than \$34,999
 \$35,000 to \$49,999
 \$50,000 to \$75,000
 Over \$75,000
 opted out
14. Please identify your highest completed level of education. [*May opt-out if they wish to.*]
 Some High School
 High School Diploma/GED
 Some College or Associate's Degree
 Bachelor's Degree
 Graduate or Professional Degree
 opted out
15. So that we can be sure that all backgrounds are represented in our project, could you please tell me the race or ethnic origin you identify with [*1 or more responses OK; may opt-out if they wish.*]
 Hispanic or Latino/a
 American Indian or Alaska Native

- Asian
- Black or African American
- Native Hawaiian or other Pacific Islander
- White
- opted out

16. *Record Gender—DO NOT ASK UNLESS UNABLE TO DETERMINE; may opt-out if they wish.*

- Female
- Male
- opted out

INVITATION

Thank you for answering our questions. Based on your responses, we would like to invite you to participate in a focus group which will be held in [insert city and hospital] [insert date] at [insert time]. The total time will be no more than 1.5 hours. We will not be providing transportation to the hospital, but we will provide everything that you need to participate in the focus group when you arrive. Your participation is completely voluntary. We will provide you with a \$25 stipend for participating as well as a light snack and refreshments. The incentive you will receive is in cash and **is not reported as income to the IRS.**

Are you willing to participate?

- Yes.....Continue
- No..... Terminate

We will not be able to provide transportation, interpreters or Braille materials. We can accommodate wheel chair access. Will you still be able to attend?

- Yes.....Continue
- No..... Terminate

I'm glad that you will be able to join us! At this point I need to collect some contact information from you. Then we will send you a confirmation letter and directions to the facility via e-mail (or regular mail).

Name: _____

Address: _____

Telephone # (Day): _____ (Evening) _____

E-mail Address: _____

We are only inviting a few people, so it is very important that you notify us as soon as possible if for some reason you are unable to participate. Please call [insert name and phone] if this should happen. We look forward to having you participate on [insert day] at [insert time].

Do you have any questions?

Great! Thank you for your time and we will be in touch again the day of the focus group. Please bring reading glasses if you use them.

TERMINATE TEXT

Thank you very much for your time, and thank you for answering our questions. Unfortunately, based on the focus group requirements, we can't extend an invitation at this time. Thanks so much for your time and have a good [*day/evening*].

BENEFICIARY FOCUS GROUP MODERATOR GUIDE

Introduction: 2 Minutes

Hello, my name is _____, from IMPAQ International, a research and consulting firm that is working with the Centers for Medicare & Medicaid Services to conduct the Acute Care Episode Demonstration evaluation. I want to thank you for agreeing to participate in the focus group today. Today I will be asking you about your experiences and opinions about the ACE demonstration here at [insert hospital name]. I'm not an expert on the ACE demonstration; I just want to hear your honest opinions.

We have scheduled these focus groups today as part of the Acute Care Episode (ACE) Demonstration. We are conducting focus groups with Medicare beneficiaries who have recently undergone a procedure here at [insert hospital name]

Before coming into the room, you were asked to review and sign an informed consent form for your participation in the discussion. Did everyone sign it? I just want to go over some of the key points on the consent form to make sure we are in agreement. [Moderator: Review consent form, emphasizing audio taping, observers, and privacy.]

Ground Rules: 5 Minutes

Before we begin, I'd like to go over some basic ground rules for our discussion.

- We are audio-taping the focus group for use in preparing a report about findings. Because we are taping this meeting, I ask that you speak loudly and clearly. If I think you are speaking too softly to be heard on the tape, I will ask you to speak up.
- Please speak just one at a time so everyone has a chance to participate.
- Don't engage in side conversations-- we need for everyone to hear what the others are saying and for everything that's said to be heard easily on the tape.
- Sometimes I'll go around the table and ask everyone for their input. At other times, I will just throw a topic open for general discussion.
- Participation -- we would like to hear from everyone in the group, but you don't have to answer every question.
- No evaluation -- there are no right and wrong answers. We expect differences in how people see things, and we need to know about these differences.
- Feel free to disagree or question each other. The purpose of a group session is for us to learn things in group interchanges that we don't get out of one-on-one discussions. If someone says something you disagree with, please let us know.

- Some observers are present here, [Moderator: Introduce Note taker and anyone else in the room]. They want to hear what you have to say about the topics we'll discuss and take notes, but we don't want you to feel constrained by their presence.
- If anyone needs to use the restroom, they are located (specify). There is no need to stop the discussion.
- Your participation is voluntary.
- If you have a cell phone, please turn it off or set to vibrate.
- The session will last about 1.5 hours.

CMS will take into consideration comments from this focus group as well as comments from other interviews and focus groups we are conducting all over the country where this demonstration is taking place. Please keep in mind that your participation in this focus group is completely voluntary. Please be assured that your responses will be kept confidential. We will provide all the information we collect to CMS in a combined form only, with any potentially identifying information removed. You may not answer any questions that you prefer not to answer. If for any reason you wish to discontinue the focus group, you may.

For CMS to speak with the public, we are required to have approval from the Office of Management and Budget. **[Moderator: Please write the OMB number and address on the flip chart so participants can write down if they like]**

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is **0938-1117**. The time required to complete this information collection is estimated to average **(1.5 hours) or (90 minutes)** per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

Do you have any questions before I begin?

APPENDIX B: INFORMED CONSENT FORM

INFORMED CONSENT FORM

As part of a research study for the Centers for Medicare & Medicaid Services (CMS), IMPAQ International, LLC is conducting focus groups with [Medicare beneficiaries, physicians, non-physician hospital staff] to obtain their opinions, experiences, and perceptions of their [recent hospitalization or work] at the [insert health system name].

Before you participate in this discussion, we would like you to understand your rights in the process and how the information you share will be used. Please review the conditions listed below.

- Your participation is totally voluntary.
- Participation poses minimal risks to you. If you feel uncomfortable expressing your opinions and ideas you can choose not to answer any questions you do not want to answer. If you would like more information or would like to talk to someone about the topics, please let the moderator know.
- Your name will not be used in any reports. We will be taking notes during the discussions about what was said and report aggregate responses and opinions. Summary information will be shared with CMS.
- You may discontinue your participation at any time either by leaving the group or choosing not to answer a question. There will be no penalty or loss of benefits.
- Any questions you have about this study will be answered before we begin the focus group. Contact information is provided below for any questions that arise after your participation.
- The focus group session will last about 1.5 hours.
- The entire session will be audio-taped for report-writing and analysis purposes. Only the team responsible for the evaluation will have access to the tapes.
- You will receive a monetary stipend to compensate you for your time.

Contact information: If you have any questions or concerns about your participation or have any questions about the study, please contact Camellia Bollino at 443.718.4356.

By signing this document you understand the above and agree to participate in this group.

Print your Name: _____ Date _____

Sign your Name: _____ Witness: _____

**APPENDIX C: BENEFICIARY RECRUITMENT LETTER AND CMS
LETTER**



April 5, 2011

Dear «First_Name» «Last_Name»,

We hope that this letter finds you well on the road to recovery following your recent surgical procedure. The Centers for Medicare & Medicaid Services (CMS) has contracted with IMPAQ International, LLC and the Hilltop Institute at the University of Maryland, Baltimore County to conduct an evaluation of your experience with the orthopedic procedure you underwent at [hospital name]. As part of our evaluation, we are conducting focus groups with Medicare beneficiaries who have recently been hospitalized for an orthopedic procedure at [hospital name]. Our team is interested in evaluating your experience during your treatment and would like your participation in these focus groups. Enclosed is a letter from CMS highlighting the importance of this project and your participation.

Your participation is voluntary and will be held confidential. Refusal to participate will not affect Medicare benefits to which you are otherwise entitled, and you may discontinue participation at any time without any consequences.

A representative of our evaluation team will call you soon to give you more information about the focus group date and location. If you choose to participate, the total time will be no more than 1.5 hours. We will provide refreshments and everything you need for the focus group. You will also receive a \$25 stipend for attending.

If you would like to join the focus group and/or have questions about this evaluation or focus groups, you can speak to a member of our evaluation team by calling (202) 696-1000 and saying, "I am calling about the ACE focus groups."

On behalf of CMS, I would like to thank you in advance for helping us with this very important evaluation.

Sincerely,

/s/ Oswaldo Urdapilleta

Oswaldo Urdapilleta, Ph.D.
Senior Health Policy Analyst
Director, Health Policy Research

10420 Little Patuxent Parkway, Suite 300, Columbia, MD 21044 USA Tel +1 (443) 367-0088 Fax +1 (443) 367-0477
1425 K Street NW, Suite 650, Washington, DC 20005 USA Tel +1 (202) 289-0004 Fax +1 (202) 289-0024
Internet <http://www.impaqint.com>



Dear [Beneficiary Name],

The Centers for Medicare & Medicaid Services (CMS) has contracted with IMPAQ International, LLC and Lovelace Health System to evaluate the treatment provided by Lovelace Medical Center. As part of the evaluation, IMPAQ will be conducting focus groups with Medicare beneficiaries who have recently been hospitalized for an orthopedic treatment at Lovelace Medical Center. CMS is committed to hearing from Medicare beneficiaries like you and understanding your experiences.

I would like to invite you to participate in a focus group with other Medicare beneficiaries who underwent a procedure at Lovelace Medical Center. Your decision to participate is voluntarily and any information you provide will be confidential. Your Medicare benefits will not be affected by your choice.

A representative from IMPAQ will contact you within a few days with more specific information. When you are contacted, I hope you will accept the invitation to share your perspective. You can also contact IMPAQ at (202) 696-1000 to join the focus group. Your input is valuable in assisting CMS in assessing programs and policies for continued or expanded use.

If you have any questions about this evaluation, please feel free to call me at (410) 786-6600 or e-mail me at Jesse.Levy@cms.hhs.gov.

Sincerely,

/s/ Jesse M. Levy

Jesse M. Levy, PhD
Medicare Acute Care Demonstration Evaluation
Contracting Officer's Technical Representative

Office of Research, Development and Information
Centers for Medicare & Medicaid Services

**APPENDIX D: PHYSICIAN RECRUITMENT LETTER (BAPTIST
HEALTH SYSTEM)**



[DATE]

Dear [PHYSICIAN NAME]:

The Centers for Medicare & Medicaid Services (CMS) has contracted with IMPAQ International, LLC and the Hilltop Institute at the University of Maryland, Baltimore County to conduct an evaluation of the Acute Care Episode (ACE) Demonstration in which Baptist Health System is participating. As you may know, the evaluation includes two site visits to ACE hospitals; one in the first year and the other in the final year of the demonstration. During each site visit, there will be a series of activities including interviews with key personnel involved in the development and implementation of the ACE demonstration.

We would like to invite you to participate in an interview to discuss your perspective on various aspects of the planning, implementation, and effects of the demonstration. We look forward to capturing your experience in this critical component of the evaluation process.

We will be conducting interviews on Tuesday, April 5, 2011, at Northeast Baptist Hospital and Wednesday, April 6, 2011, at St. Luke's Baptist Hospital. The interviews are expected to last approximately 1 hour. A member of our team will contact you soon to give you more information about the interview date and location.

If you have any questions about these interviews, please contact me, Dr. Oswaldo Urdapilleta, ACE Demonstration Evaluation Project Director, at (202)-696-1003, or e-mail me at OUrdapilleta@IMPAQint.com. Furthermore, Shan Largoza, VP, Environment of Care, is the ACE site liaison for Baptist Health System. You may also contact him at (210) 297-8850 or e-mail at SLARGOZA@baptisthealthsystem.com.

Thank you for your willingness to assist with the evaluation. We understand that you have many obligations and appreciate your time. We value your input on the effects of the ACE Demonstration on Baptist Health System and the health care provided to patients.

Sincerely,

/s/ Oswaldo Urdapilleta

Oswaldo Urdapilleta, Ph.D.
Senior Health Policy Analyst
Director, Health Policy Research

10420 Little Patuxent Parkway, Suite 300, Columbia, MD 21044 USA Tel +1 (443) 367-0088 Fax +1 (443) 367-0477
1425 K Street NW, Suite 650, Washington, DC 20005 USA Tel +1 (202) 289-0004 Fax +1 (202) 289-0024
Internet <http://www.impaqint.com>

APPENDIX E: SITE VISIT SCHEDULES BY SITE

BAPTIST HEALTH SYSTEM

When	What	With who	IMPAQ Team	Baptist Leads	Location
Regional Office 215 E. Quincy San Antonio, TX 78215 (210) 297-1000					
8:00am -9:00 AM	System Level Interviews	Interview SVP & Chief Development Officer (ACE Senior Executive)	A	Mike Zucker, SVP & Chief Development Officer	Mike Zucker's Office
		Interview with VP, Environment of Care (ACE Project Officer),	B	Shan Largoza ACE Project Officer	Conference Room #1
		Interview with Chief Medical Officer	C	Dr. David Siegel, System CMO	David Siegel's Office
9:30-10:30am		Chief Nursing Executive	A	Tommye Austin, System CNE	Tommye Austin's Office
		CFO, Regional Services (ACE Project Financial Lead)	B	Gary Whittington, CFO, Regional Services	Gary Whittington's Office
11:00-12:00		VP, Quality/Patient Care	C	Wendy Solberg, VP, Quality	Conference Room #1
		VP Business Office Services	A	Tom Bieterman, System Controller and Awoala Banigo VP, Reimbursement	Conference Room #2
12:00	Transportation to Northeast Baptist				
Northeast Baptist Hospital 8811 Village Dr. San Antonio, Texas 78217 (210) 297-2000					
12:00-1:30	Focus Group Session with Patient Navigators	We would like to conduct a focus group with all 5 patient navigators from all hospitals	B	Mari Finley VP Case Management and Raje Wolf, Lead ACE Patient Navigator to coordinate	Executive Dining Room (in Cafeteria)
2:00-3:30 PM	Focus Group with Beneficiaries	This session will consist of beneficiaries who received cardio procedures presenting all 3 hospitals (8-10 participants)	A	Impaq to invite beneficiaries/Karen May, Director Communications to coordinate	Executive Dining Room (in Cafeteria)
		This session will consist of beneficiaries who received ortho procedures presenting all 5 hospitals (8-10 participants)	C	Impaq to invite beneficiaries/Karen May, Director Communications to coordinate	Classroom 1 (by Administration)
3:00-4:30	Focus Groups with Ancillary Support Staff	The session will consist ancillary staff that support orthopedic services from Northeast for 8-10 participants, Pharmacy: Lois Taylor Rad / RT: Kevin Bell or Brett Illing Laboratory: Sara Hollingsworth	B	Will McDonald, COO, Northeast Baptist to coordinate	Executive Conference Room (by Administration)
4:00-5:30 pm	Physician Focus Groups (Cardio)	This session will consist of cardio physicians	A	Impaq to send generalphysician invite. Shana Robinson, Director Physician Services Northeast Baptist to coordinate	Classroom 1 (by Administration)
5:00-6:30	Physician Focus Groups (Ortho)	This session will consist of ortho physicians	C	Impaq to send generalphysician invite. Shana Robinson, Director Physician Services Northeast Baptist to coordinate.	Executive Conference Room (by Administration)
	Interview with one ortho Nurse	Interview with a Nurse on the Ortho floor Tiffany Garza from Joint Club	B	Wendi Deleon, CNO, Northeast Baptist to coordinate	Wendi Deleon, CNO's office
6:30	ACE PHO board	Interview with one physician ACE PHO board member Dr. David Fox	A	Shana Robinson, Director Physician Services Northeast Baptist to coordinate	Executive Conference Room (by Administration)
Day 2, April 6					
Baptist Medical Center 111 Dallas Street San Antonio, Texas 78205 (210) 297-7000					
8:00-9:00 AM	Interview with one cardio Nurse	Interview with a Nurse on the cardio floor	A	Laura Miller, CNO Baptist Medical Center	Board Room
9:00-10:30	Focus Groups with Ancillary Support Staff	The session will consist ancillary staff that support cardio services from , Baptist for 8-10 participants	B	David Goldberg, COO Baptist Medical Center to coordinate	Board Room
10:00-11:30	Focus Group with Beneficiaries	This session will consist of beneficiaries who received cardio procedures presenting all 3 hospitals (8-10 participants)	A	Impaq to invite beneficiaries/Karen May, Director Communications to coordinate	Cafeteria A
		This session will consist of beneficiaries who received ortho procedures presenting all 5 hospitals (8-10 participants)	C	Impaq to invite beneficiaries/Karen May, Director Communications to coordinate	Cafeteria B
11:30: PM	Transportation to St. Luke's Baptist				
St Luke's Baptist Hospital 7930 Floyd Curl Dr. San Antonio, Texas					
12:30-1:30	Interview with One Hospital President	This session will consist of an interview with one of the 5 hospital presidents	B	Dan Brown, President St Luke's Baptist (Shan Largoza to coordinate)	Dan Brown's Office
2:00-3:00	Interview with One Hospital President	This session will consist of an interview with one of the 5 hospital presidents	A	Matt Stone, President Northeast Baptist (Shan Largoza to coordinate)	Admin Conference room
	Interview with One	This session will consist of an interview with	C	Keith Swinney, President Baptist	Board Room
3:30-5:00PM	Physician Focus Groups (Cardio)	This session will consist of cardio physicians	A	Impaq to send generalphysician invite. Tracy Sites, COO St Luke's Baptist to coordinate	Strunk Classroom #2
	Physician Focus Groups (Ortho)	This session will consist of ortho physicians	B	Impaq to send generalphysician invite. Tracy Sites, COO St Luke's Baptist to coordinate	Board Room
5:30-6:30	Interview with one Ortho	Interview with a Nurse on the Ortho floor	C	Tracy Sites, COO St Luke's Baptist to	Amy Lyons, Board Room
Day 3, April 7					
St Luke's Baptist Hospital 7930 Floyd Curl Dr. San Antonio, Texas					
7:00	ACE PHO board	Interview with one physician ACE PHO board member Dr. Ty Goletz	B	Tracy Sites, COO St Luke's Baptist to coordinate	Board Room Joint Club
Regional Office 215 E. Quincy San Antonio, TX 78215 (210) 297-1000					
9:00-10:00	Interview with Chief Nursing Officer	One on one interview with the Chief Nursing Officer at one of the 5 hospitals	C	Laura Miller, CNO Baptist Medical Center (Shan Largoza to coordinate)	Conference Room #2
	Interview with CEO of Baptist Health System	One on one interview with the CEO of Baptist Health System	B	Graham Reeve, System CEO (Shan Largoza to coordinate)	Graham Reeve's Office
10:30-11:30	Interview with Chief Nursing Officer	One on one interview with the Chief Nursing Officer at one of the 5 hospitals	A	Wendi Deleon, CNO Northeast Baptist (Shan Largoza to coordinate)	Conference Room #2
	Interview with COO	Interview with COO of BHS	C	Rod Huebbers, System COO (Shan Largoza to coordinate)	Rod Huebbers' Office
11:30 AM	Visit Wrap up			Mike Zucker & Shan Largoza (Shan Largoza to coordinate)	Mike Zucker's Office

OKLAHOMA HEARTH HOSPITAL

Oklahoma Heart Hospital					
Tuesday, April 26, 2011					
4050 W Memorial Road Oklahoma City, OK 73120					
Time	Methodology	With who	Lead	Location	Note
7:00 - 8:00am	Focus Group	Physician Focus Group	Stephanie Jones	Board Room	
8:45 - 9:45am	IDI	CEO/CMO/Physician Group Medical Director	Nancy Svehla	Board Room	
8:45 - 9:45am	IDI	CFO	Stephanie Jones	TBD	Comptroller will also attend
9:45 - 10:45am	IDI	CNO/COO	Nancy Svehla	Board Room	
9:45 - 10:45am	IDI	Compliance Officer	Stephanie Jones	TBD	
11:00am - 12:30pm	Focus Group	Beneficiary Focus Group	Stephanie Jones	Board Room	Lunch will be served
1:30 - 3:00pm	Focus Group	Non-physician Focus Group	Stephanie Jones	Board Room	
3:15 - 3:45pm	Wrap Up	Compliance Officer	All	Board Room	
Note:	Phone interview with Linda tentatively scheduled for Monday, May 2, 2011 at 10:00 Central, 11:00 EST.				

HILLCREST MEDICAL CENTER

Hillcrest Hospital					
Wednesday, April 27, 2011					
Time	Methodology	With who	Team	Location	Note
7:00 - 8:00am	IDI	Chief Physician- Cardio	A	OHI Conference room	
7:00-8:00am	IDI	Materials Manager	B	OHI Classroom C	
9:00-10:30am	Focus Group	Beneficiary- Ortho	B	OHI Classroom C	~15 attendees
11:30-12:30pm	IDI	Nurse Manager- Cardio Floor	A	TBD	
12:00-1:00pm	IDI	Chief Ortho Physician	B	Tulsa Ortho Boardroom	
2:00-3:30pm	Focus Group	Non-Physicians	A	OHI Classroom C	~10 attendees
4:00-5:00pm	IDI	ACE Manager	B	OHI Classroom C	
6:00-7:30pm	Focus Group	Physicians- Ortho	A	OHI Classroom C	~5 attendees

Hillcrest Hospital					
Thursday, April 28, 2011					
Time	Methodology	With who	Team	Location	Note
9:00-10:30am	Focus Group	Beneficiary- Cardio	A	OHI Boardroom	~15 attendees
9:00-10:00am	IDI	ACE Marketing Director	B	OHI Classroom C	
11:30-12:30pm	IDI	Nurse Manager- Ortho	A	OHI Boardroom	
11:30-12:30pm	IDI	Case Manager for ACE Cardiology	B	OHI Boardroom	
2:00-3:30pm	Focus Group	Non-Physicians- Ortho	B	OHI Boardroom	~10 attendees
4:00-5:00pm	IDI	CFO	B		
6:00-7:30pm	Focus Group	Physicians- Cardio	A	OHI Boardroom	~8 attendees

LOVELACE MEDICAL CENTER

Day 1, August 23		
Lovelace Medical Center		
Time	Team A	Team B
8:30:00 AM MT- 9:30AM MT	Divisional CFO 4101 Indian School Rd, NE, Suite 405, Alb, NM 87110	Divisional CEO 4101 Indian School Rd, NE Suite 405, Alb, NM 87110
10:15:00 AM MT- 11:15 AM MT	Divisional CMO 601 Dr. Martin Luther King Jr Ave, NE Alb, NM 87109	LMC COO 601 Dr. Martin Luther King Jr Ave, NE Alb, NM 87109
11:30:00 AM MT - 12:30MT		Materials Mgr 601 Dr. Martin Luther King Jr Ave, NE Alb, NM 87109
1:30:00 PM MT - 3:00pm MT	Non-physician FG at LMC Main Hospital 2nd Fl Ave, NE Alb, NM 87109 OR Manager, Preop Educator, Joint Education Program, Therapy	Loc: LMC Conference Room #1 - 601 Dr. Martin Luther King Jr
3:30pm MT - 4:30pm MT	Director, MM – LMC 601 Dr. Martin Luther King Jr Ave, NE Alb, NM 87109	LOC: Administration small conference room Medical Towers, Suite 306

Day 2, August 24		
Lovelace Medical Center		
Time	Team A	Team B
7:00AM MT- 8:00am MT	Physician Leader from Group 2: Albuquerque Health Partners - LOC: LMC Conference Room #4 - 601 Dr. Martin Luther King Jr Ave, NE Alb, NM 87109	Physician from Group 2: Albuquerque Health Partners LOC: LMC Conference Room #1 - 601 Dr. Martin Luther King Jr Ave, NE Alb, NM 87109
10:30am MT- 11:30am MT		Women's Hospital COO (CNO requested, but position is vacant at this time) LOC: Women's Hospital - 701 Montgomery NE, Alb, NM 87109
12:00 PM MT - 1:30MT		Non-Physician Focus Group Hospital Auditorium B OR Director, PT Manager & Prehab (Joint Education program), Case Manager, Quality
1:30PM MT - 3:00:00 PM MT		Beneficiary Focus Group Hospital Auditorium B
2:00PM MT- 3:00PM MT	LMC CEO 601 Dr. Martin Luther King Jr Ave, NE Alb, NM 87109	LOC: Administration small conference room Medical Towers, Suite 306
3:15PM MT- 4:15PM MT	Physician Leader from Group 1: Administration small conference room	New Mexico Orthopedic (NMOA) -
5:00pm MT-6:00pm MT	Physician from Group 1: #4 - Main Hospital 2nd Fl	LOC: LMC Conference Room
		Physician from Group 2: Albuquerque Health Partners LOC: LMC Conference Room #4- Main Hospital 2nd Fl

Day 3, August 25		
Lovelace Medical Center		
Time	Team A	Team B
8:30-9:30am	Billing Director 601 Dr. Martin Luther King Jr Ave, NE Alb, NM 87109	ACE Director 601 Dr. Martin Luther King Jr Ave, NE Alb, NM 87109
	LOC: Administration large conference room Medical Towers, Suite 306	LOC: Administration small conference room Medical Towers, Suite 306

Day 1, September 19			
Exempla Saint Joseph (ESJH) – 1875 Franklin Street			
Time	Participants	Location	Notes
12:00 – 1:00 p.m.	Wendy Rockey, RN Senior Director Clinical Operations, CV Institute	Wendy's office (ESJH – 4N 446)	<i>Camie - Contact:</i> 303.837.8056 (<i>Wendy</i>)
2:00 – 3:00 p.m.	Denise Huckfeldt, RN – Cardiac Surgery Lisa Bineau, RN – Cardiac Surgery Cindy Hansen, Materials Manager	Barb Wertz room (ESJH – 1 st Floor)	Non-Physician Focus Group (Part 1 – CV Surgery cost efficiencies) <i>Jasmine - Contact:</i> 303.837.6882 (<i>Denise</i>)
Midtown Building – 1960 N. Ogden			
3:30 – 4:30 p.m.	Dr. Mark Ammons, Dr. Kevin Miller, Dr. Stan Carson, Dr. Jason Shofnos (Exempla Front Range Cardiac Surgery)	Midtown Building (Suite 540 - conference room)	Physician Focus Group <i>Camie - Contact:</i> 303.318.2440 (<i>Robin</i>)
Day 2, September 20			
Exempla Saint Joseph (ESJH) – 1875 Franklin Street			
Time	Participants	Location	Notes
8:30 – 9:30 a.m.	Heather Griffiths, Eric Stanley (Hospital Accounting team)	Caring for Colorado Room (ESJH - 2 nd Floor)	<i>Camie - Contact:</i> 303.813.5286 (<i>Heather</i>)
9:30 – 10:30 a.m.	Heidi Adams, Mary Lee Bartlett, Amy Hearne (Hospital Quality team)	Caring for Colorado Room (ESJH – 2 nd Floor)	<i>Jasmine - Contact:</i> 303.813.5038 (<i>Heidi</i>)
Mullen Building – 1895 Franklin Street			
11:30 – 1:00 p.m.	Patient Focus Group (Edith Martin, Cynthia Ziegler, Charles Husted, Albert Forest)	Auditorium (Mullen Building – Main Floor)	<i>Camie - Lunch provided</i>
Exempla Saint Joseph (ESJH) – 1875 Franklin Street			
1:30 – 2:30 p.m.	Chrisanne Barnes, RN – Patient Navigator Jen Weist, RN – Shift Coordinator – Surgical Telemetry unit Elizabeth Burkey, RN – Surgical Telemetry unit	Caring for Colorado Room (ESJH – 2 nd Floor)	Non-Physician Focus Group (Part 2 – patient care) <i>Jasmine - Contact:</i> 303.837.8939 (<i>Chrisanne</i>)
2:30 – 3:30 p.m.	Sharon Burnett, Senior Director – Marketing Pat Faler, Marketing Specialist	Caring for Colorado Room (ESJH – 2 nd Floor)	<i>Camie - Contact:</i> 303.318.2107 (<i>Pat</i>)
4:00 – 5:15 p.m.	Dr. Mark Ammons, ACE Medical Director Dr. Clarke Godfrey, ACE Medical Director	Weckbaugh Room (ESJH – 1 st Floor)	<i>Jasmine - Contact:</i> 303.837.7044 (<i>Kelli</i>)
Day 3, September 21			
Mullen Building – 1895 Franklin Street			
Time	Participants	Location	Notes
8:00 – 9:00 a.m.	Ben Zapanta, Director of Finance	Ben's office (Mullen – 3M 320)	<i>Jasmine - Contact:</i> 303.837.6978 (<i>Ben</i>)
Exempla Saint Joseph (ESJH) – 1875 Franklin Street			
11:30 – 12:30 p.m.	Rick Harrell, VP – Cardiovascular Services	Ricks' office (ESJH – 4N 442)	<i>Camie - Contact:</i> 303.813.5127 (<i>Tina</i>)
12:30 – 1:30 p.m.	Kelli Christensen, Project Manager, CV Institute	Kelli's office (ESJH – 1NC 135)	<i>Jasmine - Contact:</i> 303.837.7044 (<i>Kelli</i>)
Day 4, September 29			
Time	Participants	Location	Notes
11:00 – 12:00 p.m.	Mary Shepler, RN Chief Nursing Officer	Via conference call	<i>Contact:</i> 303.837.6756 (<i>Pat</i>)