General Clinical Neurologists in Academic Departments of Neurology

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Motivations and Rationales

- The changes in health care in the United States are leading to increased emphasis on value and population health.
- These changes have led many academic medical centers to develop primary care networks within the community.
- Monitoring and Insuring Quality and safety are increasingly part of everyday care delivery and are increasingly part of (value-based) compensation models.
- Exceptional customer service is vital.
- Many neurologists will seek affiliations with large health systems or multi-specialty groups (as remaining independent will become increasingly difficulty in the post-reform era).
For Discussion!

- **Overview**
  - What is the role of general neurologists in academic departments?
  - Should they have teaching and/or research expectations?
  - How should they be compensated?
  - Are they at the main hospital or in the community?

- **Goal**
  - Stimulate discussion!
  - There are no right answers!
Question 1

Why might academic departments need general clinical neurologists?

- Patient Care
  - Hospital-based patient care
  - Ambulatory patient care
  - Community integration
- Education
- Research
- Service

Required?
Question 2
What are the Patient Care Roles of a General Clinical Neurologist in Academic Departments?

- Undifferentiated referrals from primary care providers
- Work side by side with primary care providers
- Handle uncovered specialties
- Simplify operations of call centers and/or eliminate nurse or physician triaging
- Grow into the community
- Others?
Question 3
What are the Clinical Benefits of General Clinical Neurologists in Academic Departments?

- Gateway for Primary Care
  - Market share → Long term market issues
  - Population health
  - Value and customer service
- Clinical trials enrollments
- Better care for more people
Question 4
What are the Academic Roles of a General Clinical Neurologist in Academic Departments?

• Clinical Education
  • Residency Program Leadership
  • Medical Clerkship
  • Pre-Clinical Neuroscience
  • School of Medicine Leadership

• Clinical Scholarship
  • Clinical Trials / Research
  • Clinical Writing
Question 5
Where might Academic Departments need General Clinical Neurologists?

At the Main University Hospital
At an Affiliate Hospital
In the Community
Question 6
Who should be hired for general clinical positions in Academic Departments?

Clinician Educators and/or Clinical Scholars

Community Neurologists

Both?  Neither?
Question 7
What are the Benefits of Hiring Community Neurologists into Academic Departments?

- Integrated into the community
- History and success at customer service
- Strategic locations
- Strategic patient groups
- Referrals for clinical trials from new sources
- Lower cost clinical care locations
- More subspecialty referrals
Customer Service 1
The Waiting Room
Customer Service 2
The Exam Room
Customer Service 3
The Check In Desk
Question 8
How should Community Physicians be Hired into Academic Departments?

• Options
  • Academic appointment with academic expectation
  • Academic appointment without academic expectation
  • University title without academic appointment
  • Health system employee without university position

• Compensation
  • Identical compensation to academic faculty physicians
  • Different Plan: Higher compensation with risk / reward tied to productivity and outcomes
Question 9
What are the Costs of Hiring Community Neurologists into Academic Departments?

- Traditional role of academic medical center as focused on education and research
- Cultural differences
- Compensation differences with traditional faculty
- Highly inconsistent faculty expectations
- Differentiation with community
- Others?
Summary

- The changes in health care in the United States emphasize:
  - Population health
  - Value (including value-based compensation)
  - Timely and convenient access
  - Quality and safety
  - Cost containment

- Academic Medical Centers (AMCs) are in a unique position to capitalize on these changes.

- AMCs must maintain their traditional roles in education and research yet maintain leadership in this new clinical care environment