

ENHANCING THE EXPERIENCE OF CARE

HIGH-TOUCH, HIGH-TECH



A FAMILY DOCTOR HELPS PRIMARY CARE PHYSICIANS EXCEL AT VALUE-BASED CARE AND, IN THE PROCESS, DRIVES THE TRIPLE AIM FOR POPULATIONS AND IMPROVES PRACTITIONER SATISFACTION.

When Clive Fields, MD '88, prepared to enter a physician workforce that inherently favored specialization, he often heard: "You're too smart to go into family medicine."

Dr. Fields ignored that admonition, and 30 years later he is a leader in the national movement for healthcare reform, working to "broaden the role and impact of primary care" as urged by the Institute for Healthcare Improvement. He is co-founder and chief medical officer of VillageMD, which provides primary care practice services for more than 2,500 physician partners across eight states. The company runs on a value-based, primary care-led model that rewards improvement in health outcomes. It uses data analytics and the power of teams to optimize physician-patient encounters.

"Value-based care is just another name for quality care," Dr. Fields said. "We're delivering the tools, teams and strategies for primary care physicians to deliver the highest-quality care. We're supporting them in the best of the old and best of the new. We want doctors and patients to form a relationship that lasts a lifetime."

VillageMD helps its practices thrive in the pursuit of national Triple Aim goals: better care for individuals, improved health of populations and lower per capita costs. Its partners are consistently recognized by the Centers for Medicare and Medicaid Services for successes that include rates of hospital admissions and readmissions 20 to 45 percent lower than market averages, a 92 percent patient satisfaction rate for high-risk care management and Medicare costs that are 20 to 45 percent below the market average.

The company helps its physician partners reclaim the joy in patient care through collaboration with interprofessional healthcare teams that include health coaches, diabetes educators, pharmacists, advanced practice providers, dietitians and others. It also maximizes physician-patient time through collection and analytics of electronic medical records and claims data before and after each visit.

"All information is available at the point of care," Dr. Fields said. "As a result, our physicians see more patients, see them more often and are able to impact a greater population. We're managing our population proactively, as a team. We're successful because we're responsive, determined to improve care, and we generate economic efficiencies."

Dr. Fields explored many specialties before pursuing family medicine.

"I had to discover what I really wanted, which was a continuous relationship with patients," he said. "I like people better than diseases. Family medicine allows you to practice across gender, age and disease, to know people both inside and outside the exam room and across the community. It's a decision I've never regretted."

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CLIVE FIELDS, MD '88

He credits the Chicago Medical School with exposing him to both public and private sectors of care, which helped him recognize the injustice of the disparities he witnessed.

"I saw how a physician in a primary care specialty had the opportunity to affect those inequities at both the individual and macro level," he said.

After completing his residency at Baylor College of Medicine in Houston, Dr. Fields joined his father, Harold J. Fields, MD, at his small, independent practice in the same city.



IN NAMING CLIVE FIELDS, MD '88, ITS 2018 PHYSICIAN EXECUTIVE OF THE YEAR,

the American Academy of Family Physicians cited his early adoption of data-driven, risk-stratified care management. These strategies are now employed across the nation to improve clinical quality, the patient and provider experience, and lower the total cost of care. Dr. Fields is chairman of the Accountable Care Coalition of Texas Board of Directors, medical director and board member of Select Care of Texas, and a member of the founding board of the new University of Houston College of Medicine, set to open in 2020, which aims for 50 percent of each graduating class to take up practice in primary care.

Left: Clive Fields, MD '88, at VillageMD headquarters in Chicago's Loop.




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CLIVE FIELDS, MD '88

“Dad brought the patient-centered philosophy from national healthcare systems in his native Scotland and from Canada, where house calls and personal calls after discharge are the norm,” said Dr. Fields, who worked to grow the practice by taking on Medicare risk contracts and developing efficiencies in workflow and clinical protocols. The resulting increase in quality of care, cost containment and improved patient outcomes increased physician compensation under the value-based model of care.

“We saw an opportunity to take our integrated, coordinated clinical model and expand it not just throughout the Houston marketplace, but the national marketplace,” Dr. Fields said. “We wanted to use a high-tech approach to augment and scale the old-fashioned, personal, high-touch approach, which was so successful for generations of physicians before us. The data and the literature supported the fact that primary care was the best positioned to impact care. In looking at macro trends, we realized we had an opportunity, and that opportunity was to lead.”

Dr. Fields is undeterred by the nation’s shortage of primary care physicians, which the Association of American Medical Colleges warns could reach nearly 50,000 by 2030.

“It’s a disparity in numbers, specialties and location of physicians,” he said. “We believe primary care serves the greatest purpose by offering continuous, coordinated care over a long period of time and over the evolution of diseases. That’s where the solution lies in both access and treatment. Ultimately, that will drive an increase in income for primary care and interest in primary care by medical students.” 

Above: Dr. Fields chats with, from left, Tina Ciesielski, executive assistant, and Marissa Lee, senior manager in business development, at VillageMD headquarters in Chicago’s Loop.

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