

## President and CEO Letter

In April of 2010, after more than 30 years of working side-by-side, Northland Medical Associates and Northstar Physicians Network merged to create Integrity Health Network. Here we are five years later and the last of each organization's contracts has been transferred to IHN. The organizations that were – Northstar and Northland – have been respectfully and officially laid to rest through the legal dissolution process.

The former members of both organizations would be proud of the legacies they left. Their final board actions contributed the remaining dollars from each organization to the non-profit, Integrity Health Foundation. This support will ensure the foundation's mission to promote new models of care and invest in the future of independent medicine. And invest it has!

Both Integrity Health Network and Integrity Health Foundation have invested in the new model known as an ACO. We formally launched Integrity Health Innovations, LLC – a Medicare Shared Savings Program Accountable Care Organization (ACO) — in January of 2014.

Our mission to advance independent medicine has also benefited from our decision to create dual medical director roles. We launched the Medical Director of Specialty Care position to work alongside our Medical Director of Primary Care. Together they pursue new initiatives that include co-chairing an internal total cost-of-care committee that is responsible for slicing and dicing the mountains of data we are receiving from commercial, as well as government, payers.

We had a successful, yet bittersweet, transition as Dr. David Luehr stepped down from his role as Chief Medical Officer. This role transitioned to Dr. David McKee, who will also continue as our Medical Director of Specialty Care. Dr. Luehr retired from active practice, but fortunately will continue in his Medical Director of Primary Care role at IHN.

The IHN mission continues to be met by our Clinical Operations team, who has guided our clinics to multiple awards and statewide recognition, as you'll learn about in the Member Benefits section. This section also features exciting news about new models of care and information sharing we are developing.

I would like to thank all IHN members for the work you do to improve patient care and deliver new models and new ways of thinking to make the world a better place. We work with the finest physicians, administrators, and staffs and couldn't make all the progress you're about to read about without your support and hard work. I'd like to give a special thanks to our staff; although small in number, the IHN staff accomplishes a lot! Thanks also to our very active Board of Governors; their regional and specialty expertise is critical to keeping us moving forward in every area that we serve.

Jeffrey L. Tucker

**Creating  
Pathways to  
Tomorrow's  
Success**



### Pathway to ACO Approval

IHN is at the forefront of a rapidly changing healthcare industry. Pathways to success in this industry are often a challenge to navigate. For many physicians and their clinics, it's a challenge to even find them in the first place! Integrity Health Network not only finds these paths for our members, but clears the way to success as quickly and affordably as possible.

We formed an LLC, Integrity Health Innovations, in order to participate in the Medicare Shared Savings Program. In 2014 we were approved by this program as an Accountable Care Organization.

This program is a key component of the Medicare reform initiatives included in the Affordable Care Act. As an ACO, we are helping to drive a new approach to the delivery of health care — one that facilitates collaboration among providers to improve the quality of care for Medicare beneficiaries and reduce unnecessary costs.

*“Collectively, we are able to meet this minimum requirement and enjoy the benefits of the program; no single clinic in our network could have done so on its own.”*

By participating in the Medicare Shared Savings Program, we provide better care for individuals, improve the health of entire populations, and lower growth in expenditures for our members. The Shared Savings Program rewards ACOs that lower their growth in healthcare costs, while meeting performance standards on quality-of-care and patient experience.

Our ACO is comprised of six primary care clinics that came together to serve the minimum threshold of 5,000 Medicare patients. Collectively, we are able to meet this minimum requirement and enjoy the benefits of the program; no single clinic in our network could have done so on its own.

To help us navigate the myriad of Medicare regulations and compile the data necessary that allows us to effectively manage our Medicare population, we partner with Imperium Health Management, a leader in assisting physician-led ACOs.

To clear the path to ACO success, we are increasing the presence of Integrity staff on-site at our clinics to review cost, quality and utilization data. These reviews help members develop improved patient-engagement and population-management tactics. The methods



*IHN's Director of Quality Bruce Penner receiving an Excellence in Healthcare award from representatives of UCare.*

and strategies developed for our ACO population are also applied to all of our other shared-savings contract populations.

### Pathway to Information

Also in 2014, IHN was awarded two Minnesota State Improvement Model (MN SIM) grants through the Minnesota Department of Health to develop a Health Information Exchange (HIE) in Carlton County, Minnesota. The first grant was awarded in 2014 for development of the HIE; the second was awarded in 2015. It's a much larger grant to help fund its implementation.

The project, Carlton County Connects, unites twelve grant partners representing hospitals, clinics, long-term care, public health, behavior health, tribal health and social services to develop a plan for building an infrastructure that will share patient data among community providers.

The initiative would include analytical services tied to the use of the data, e.g. tracking critical financial and quality-related information with the goal of reducing costs and improving quality. This collaboration will eventually shift toward the development of an Accountable Community for Health.

### Pathway to Innovation

IHN has participated in several new initiatives in recent years, such as Minnesota Health Care Home. Another initiative integrated behavior health providers into the clinical workflow of primary care clinics. Both of these initiatives have proven successful in improving health

outcomes and reducing the overall cost of that care. We are always forward-thinking in regard to these models, so we do not just respond to them, but lead in developing and implementing them.

More recently IHN has partnered with the Arrowhead Health Alliance, a joint powers board of five northeast Minnesota counties, to develop a new and creative healthcare delivery model; an Accountable Community for Health (ACH) is an integrated network of providers and community organizations that are accountable for improving the health of Northeastern Minnesota. The ACH will utilize the following key components:

1. A Health Information Exchange that would allow all participants to share electronic health information on a real time basis;
2. An enhanced care coordination system focusing on the patient's needs;
3. An extensive tracking and detailed analysis of the underlying financial and quality-related information, focusing on improved quality and reducing the overall costs of care;
4. The inclusion of public service information and services provided by the counties;
5. The creation of a new local organization, known as a Coordinated Health Services Organization, to achieve seamless coordination of a patient's medical services and social services;
6. Shared-savings arrangements with participating providers; and

Integrity Health Foundation received a grant from a major payer to explore the development of this ACH. To advance this concept, we embarked on a robust, five county road tour to engage medical and community stakeholders. We received unanimous support! Additional payer funding was allocated to IHN to further develop this initiative in 2015.

The underlying theme to all of these initiatives — the ACO, HIE, and ACH — is the importance of collaboration to effectively manage patient populations. IHN fosters both new and longstanding relationships by reaching out in new and innovative ways. We hope to expand these projects and help develop HIE and ACH initiatives in other communities where IHN clinics serve.

Many of these exciting new initiatives are made possible from multiple grants.

### Pathway to Excellence

Quality care at an equitable cost has been a cornerstone of Integrity Health Network and its predecessor organizations since our inception. Due to our extensive Quality Improvement programs, we are consistently recognized for excellent performance. These honors prove that independent providers deliver high-quality and lower-cost care. Ultimately we bring tremendous value to the healthcare marketplace.

Many of our members are top performers in their own right, some even achieving “best-in-class” status. Cromwell Medical Clinic is a consistent top performer in diabetes care. St. Cloud Medical Group and Buffalo Clinic are demonstrating leadership in Total Cost of Care, as well as measured improvement in the quality of care.

Unfortunately there is little public recognition of the quality and cost achievements in specialty clinics, but data shows that IHN's specialists are leaders in their respective specialties regarding both cost and quality.

*“IHN has partnered with the Arrowhead Health Alliance ... to develop a new and creative healthcare delivery model; an Accountable Community for Health (ACH) is an integrated network of providers and community organizations that are accountable for improving the health of Northeastern Minnesota.”*

### Grants Received

UCare: EHR Support

Medica Foundation: Missing Link Staff Education

HealthPartners: Care Transformation

Minnesota Department of Health

Diabetes Education Focus Groups

Senior Web-Based Portal

Minnesota State Improvement Model Development Grant (2014)

Minnesota State Improvement Model Implementation Grant (2015-2016)

Carlton County Health Information Exchange (Carlton County Connects)

## MEMBER BENEFITS

### Awards and Special Recognitions Received

#### MN Bridges to Excellence for Outstanding Performance Awards

- 2011 BTE: 6 IHN clinics recognized for 6 awards
- 2012 BTE: 6 IHN clinics recognized for 7 awards
- 2013 BTE: 6 IHN clinics recognized for 7 awards
- 2014 BTE: 3 IHN clinics recognized for 5 awards

#### HealthPartners Partners in Excellence Awards

- 2011 Silver Award for Generic Prescribing
- 2012 Silver Award for Generic Prescribing
- 2013 Silver Award for Generic Prescribing
- 2013 Gold Award for Attributed Total Cost of Care

2014 Silver Award for Attributed Total Cost of Care

2012 Minnesota Community Measurement Consumer Reports Special Edition

**IHN clinics were two of the three top performers for diabetes management in NE Region**

UCare Quality Improvement Awards

2010 Excellence in Healthcare Award

2014 Excellence in Healthcare Award

**BlueCross BlueShield Recognizing Excellence Awards**

2010: Diabetes, Cardiovascular Disease, IT

2011: Diabetes, Cardiovascular Disease, IT

### Pathway to Advocacy

We know our members' number-one priority is to meet the needs of their patients and the communities they serve. Finding the time to make their voice heard to policy makers is not often possible. IHN makes it happen. We represent our members on numerous committees and task forces that influence both the present and future of healthcare.

By doing this our members know that their unique values, strengths and needs are part of the many policy-making discussions that happen every day. Sometimes this advocacy means taking an unpopular position, but it has resulted in our members earning the respect they are due.

How do we bring our members' voices to the table? A calendar full of task force and committee meetings and hundreds of miles driven to present at state and regional conferences.



*IHN CEO Jeffrey Tucker answering questions about the Accountable Community for Health model at a meeting in Duluth for local health providers and county agencies.*

### Committees

Minnesota Department of Health (MDH)—Health Care Home Leadership Committee

Minnesota Community Measurement (MNCM)—Measurement and Reporting Committee

MNCM Total Cost of Care Technical Advisory Group  
Institute for Clinical Systems Improvement (ICSI)

Mirror2 Task Force

2013 Conference Planning Committee

Conflict of Interest Review Committee

Humana Medicare Advantage Quality Advisory Board

Medica State Public Providers Advisory Council

NE Regional Child & Teen Checkup Partnership

Twin Ports Health Access Partnership

Early Literacy Coalition/Success by Six

Bridge to Health Survey Data Team

HealthShare Clinical Committee

Collaborative Care Cooperative Board of Directors

Minnesota Medical Group Management Association—Payer Relations and Government Affairs Committees

Minnesota e-Health Advisory Work Group

### Presentations/Conferences

The IHN staff has been privileged to bring the voice of independent healthcare to many conferences and other events over the years. These events take place at both public- and private-sector venues.

This outreach has transformed our mission to encom-



pass not only improving as a network of independent physicians, but to create collaborations across corporate, public and government boundaries.

We're finding this message of collaboration is growing in popularity and is well received when presented at events such as the following:

ICSI Total Cost of Care Conference

IHN Care Continuum Initiative (CCI)

Total Cost of Care/ACO Panel

MMGMA Alternative Contracting Panel

MMGMA Day with the Payers

Midwest Medical Insurance Company (MMIC)

Strategic Planning: Issues and Concerns in Healthcare Delivery

McKesson Medical Conference: EHR Roadmap

Riverwood Healthcare Center

Realigning Physician Compensation and Patient Outcomes

MMIC Group Practice Symposium – Collaborating Opportunities for Independents

CALS: Clinical Care Initiative (CCI) Guidelines and Emergency Dept. Strategies

2014 Minnesota Rural Health Conference

Hamline University Health Law Review

ICSI 2015 Colloquium

eHealth Panel

Accountable Communities for Health

Health Care Home/MN State Improvement Model Conference 2015

Minnesota eHealth Conference 2015

2015 Minnesota Rural Health Conference

### Pathway to Support

Staying connected to our members is vitally important. We recently began visiting our clinics on a more regular basis. Given the geographic spread of our network and the unique needs each clinic has, these visits are proving worthwhile for all.

We usually arrive early to meet with physicians before patients begin to arrive. We also meet with other clinic staff, so often we spend full days in our clinics. In some cases our days onsite are planned out to include multiple meetings with individuals and groups. Other times we are there working remotely but available to the providers and staff for discussions.

Two very positive dynamics are resulting from these visits: We are able to work more intimately with our members as we get to know each other and better understand the needs they have. Also we are seeing an increased cross-pollination of ideas and solutions between clinics as we bring lessons learned from one place to another.

IHN also provides members with valuable administrative support. In regard to member services, Patty and Samantha in our office are responsible for reimbursement questions, financial reporting, claims management, and helping members with other issues. New advances include upgrading to a web-based claims reporting system.

IHN maintains a strong marketing presence in the communities it serves. Marketing support for members is available from the network via a co-op advertising program.

### Pathway to Savings

We receive aggressive pricing on contracts for goods and services purchased by our members. The numbers illustrate how we negotiate the best value possible for our members.

On the aggregate level, for the period of 1/1/2013 to 12/31/2014:

Combined Purchasing Volume: \$5,523,201

Savings: \$846,225 (revised total)

Savings per Physician: \$5,531 (revised total)

Our prime vendor agreements demonstrate the vast range of services and resources we offer members. They include, but are not limited to:

- Malpractice Insurance
- Pharmaceuticals
- X-ray Supplies
- Medical and Surgical Supplies
- Reference Lab Services
- Laboratory Supplies
- Office Supplies
- Collection Services

The agreements we've created with our prime vendors offer significant savings for our members, which helps them compete against larger health systems. With

*"We receive aggressive pricing on contracts for goods and services purchased by our members. Savings per Physician: \$3,031."*



IHN staff with former Wisc. Governor Tommy Thompson at the Minnesota's Next Health Care Revolution event in Minneapolis.

*“This outreach has transformed our mission to encompass not only improving as a network of independent physicians, but to create collaborations across corporate, public and government boundaries.”*

Integrity Health Network, a solo practitioner doesn't have to pay more for his or her medical supplies than a system-employed physician.

In addition, Integrity offers both insurance and billing services through trusted partners, again helping our member clinics find what they need to successfully run their practices.

Integrity works collaboratively with our malpractice carrier to bring our

member clinics significant savings. We work together to mitigate risk by offering risk education for all levels of clinic staff.

### **Health Plans. Choice. Voice. Value.**

At IHN, we manage capitation: from cutting checks to risk pool management. We have shared-savings agreements with some of our payers and pay-for-performance agreements with others. We look for ways to reward high-quality care delivered in a cost-efficient manner.

We are not only providers of care. The physicians and employees of our clinics and their families are consum-

ers of care, thus we understand and appreciate the value of managing these costs.

To manage our care more effectively, we watch our utilization numbers closely. We identify trends in claims. We work with our provider partners and patients to better manage their care. We call this approach: Choice. Voice. Value.

IHN serves as a conduit between health plan payers and our providers. During onsite training, we update clinic staff regarding the latest health plan changes. We inform them about our partners, the products IHN has contracted with, contract terms, and reimbursement. IHN is always troubleshooting issues to keep healthcare moving forward.

### **Leadership Opportunities**

We strive to empower physicians and clinic administrators to guide IHN into the future. Following are opportunities for members to have their voices heard:

- IHN Board of Governors
- Administrators Advisory Group
- Quality Improvement Medical Directors
- Quality Improvement Coordinators
- Referral Coordinators
- Laboratory Managers
- EHR User Group
- Health Care Home Workshop

The last year has been one of unprecedented change in healthcare. There has been as much change in the last three years as there has been in the last three decades. Much of this change has been thrust upon physicians by government and corporate entities and has not been mindful of what is best for patients. An undeniable arrogance has tainted the way federal bureaucrats made far-reaching decisions without consulting those of us who actually treat patients.

Although this change is especially challenging for an organization of our size, we have experienced a great deal of success in attenuating the adverse effects to our medical practices and influencing the outside entities responsible for all this change. As detailed in our Member Benefits section, we have successfully created an Accountable Care Organization (ACO), Integrity Health Innovations, LLC.

However, since the ACO model was incompletely studied by the Feds and is largely unworkable, we are considering departing from this model and re-focusing on our own solutions to managing senior care. Our concern stems from a flaw in the ACO design whereby states and organizations which were already providing high-quality healthcare at a low cost (Minnesota in general, IHN clinics more specifically) are penalized in that the baseline from which they must show improvement is already at a low cost per member per month.

We have shown our ability to perform as well, if not better than, our much larger peers. We are already well along in preparation for newer models focusing on community health which promise to be challenging but potentially more workable than ACOs. We will continue to evaluate our ACO program and explore other collaborative options for our senior population.

Total Cost of Care (TCOC) is the commercial equivalent of the Federal ACO in many ways. We have enjoyed another successful year in the TCOC arena, returning substantial sums to our clinics.

On the commercial side we had promising talks with the Blues earlier this year which appear to portend mutually beneficial partnerships. These are ongoing; we have made a great deal of progress, but there is much we still wish to accomplish in this very complicated negotiation. When we reach agreement on this new collaboration, BCBS will join the ranks of several other payers who have proactively worked with us to develop solutions for the marketplace that directly address and attack the rising costs of healthcare.

We are also engaged in discussions which may lead to mutually beneficial relationships between IHN and new strategic partners. Our focus will remain on keeping independent practice viable, profitable and rewarding. We will continue to strive for the best care for our patients.

## **Dr. David McKee**

Medical Director—  
Specialty Care

## Integrity Health Foundation

The past year has proven to be a very busy, productive and exciting one for the Integrity Health Foundation (IHF). The foundation owes its genesis to an organization with a long history: Northstar Physicians Foundation. Founded in 1992, its mission is to enhance charitable, scientific, cultural and educational efforts that advance innovative and cost-effective patient-care models. The foundation also advocates medical education and research to promote quality healthcare in the regions it serves.

In 2014, with the merger of Northstar Physicians Network and Northland Medical Associates nearing completion, the Northstar Physician Foundation's Board of Directors voted to formally change the name. We decided to expand IHF's Board of Directors to include members of the Integrity Health Network Board of Governors, thus encompassing both primary and specialty physicians.

With a strong financial base created from contributions by Northland Medical Associates and Northstar Physicians Network prior to the merger's completion, the foundation has quickly moved on a number of initiatives in support of its mission. These include:

- **John Dwyer, M.D. Endowed Scholarship:** In 2013 a long-standing goal of the foundation was finally achieved with the creation of this now fully endowed fund. The purpose of this fund is to provide one or more scholarships annually to new University of Minnesota Medical School students. Preference is given to students who begin their medical education in Duluth and have a demonstrated interest in practicing family medicine or primary care in a rural area. This fund is matched by the U of M Foundation's "President's Scholarship Match Program."
- **New model of care support:** In 2014 the foundation board voted to fund support of a model of care called an Accountable Care Organization (ACO). This funding helped create and sustain a new organization called Integrity Health Innovations, LLC and serves as a vehicle for independent clinics to compete in the total-cost-of-care contracting arena.
- **Clinic initiatives:** The foundation has supported clinics through a variety of programs, including QI projects, technology initiatives, and assistance with recruitment and start-up expenses for a new provider.

The foundation has worked on other exciting initiatives, most notably grant acquisition from a major health insurance company to explore a new model of care called an Accountable Community for Health. This model is described in more detail elsewhere in this report. The success of our exploration efforts in 2014 led to additional funding in 2015 to further develop this model.

All told, the re-birth of your foundation has been a tremendous success! Our assets have climbed to a new high and the board is committed to using these dollars to support independent medicine and keeping it at the forefront of healthcare in the 21st century.

## Contributing Time and Expertise

Our staff serves on several community boards and committees, volunteering time and contributing expertise to organizations such as: the Duluth Superior Symphony, United Way of Greater Duluth's Success by 6, Lake Superior Transportation Museum, Twin Ports Healthcare Access Program, Northeast Regional Child & Teen Checkup Program, and others.

IHN also sponsors many local fundraisers and community nonprofits and events throughout the year.





**JEFFREY L. TUCKER, EFPM**  
President & CEO

Jeff has more than 29 years experience in health care. He joined Northstar Physicians Network in 1997 as Director of Network Development.

His responsibilities included development of the group purchasing program and oversight of malpractice risk management, utilization review and quality improvement. In 2005 the Northstar Board of Directors appointed Jeff CEO.

Jeff oversaw expansion of the network's services, including purchasing expense management, contracting and reimbursement analysis, new technology programs, and piloting new models of healthcare. Under Jeff's leadership, the network saw its largest growth in network history, expanding the number of providers, specialties and geographical reach.

In 2010 Jeff played an integral role in combining two long-established names in healthcare -- Northstar Physicians Network and Northland Medical Associates -- creating a new entity to respond to market forces and offer a competitive alternative to the big health systems. That same year he was elected President and CEO of Integrity Health Network, LLC. Shortly thereafter IHN formed a subsidiary to operate as an Accountable Care Organization under the Medicare Shared Savings Program (Integrity Health Innovations, LLC) as well as expanding its affiliated non-profit foundation (Integrity Health Foundation) support of independent medicine through direct grants and resources to assist clinics in areas expansion of services and recruitment of new providers.



**MELISSA LARSON, MBA**  
Chief Operations Officer

This position carries the responsibility of integrating the strategic plan of the organization with operations of IHN administration. Melissa also participates in the

development and implementation of payer contracting strategies. She examines systems, program development, quality, fiscal management, physician relationships, compliance, and internal communication to ensure that

IHN resources are focused on optimally responding to the needs of the IHN clinic members and the communities it serves.

AS COO, Melissa acts as a resource to facilitate and help reduce costs, enhance revenues, achieve effective utilization of quality objectives, and analyze and utilize information to develop, lead, and support management decisions. She also represents IHN in key relationships and strategic alliances locally and regionally to further IHN's initiatives and goals.

Melissa joined Integrity Health Network in 2013 and has more than 20 years of experience in healthcare, including 10 years in clinic administration.



**BRUCE W. PENNER, RN**  
Director of Quality

As Director of Quality, Bruce leads, directs and manages IHN's quality measurement, reporting and improvement initiatives. His leader-

ship guides the creation of systems and processes that support network members in their quality improvement activities. Much of this work involves the collection, reporting and analysis of both internally derived and externally reported quality data that demonstrates the quality of the care IHN members provide. He also plays a key role in helping the network organize, report and react to Total Cost of Care data to improve the cost efficiency across the network.

With IHN's formation of a Medicare Shared Savings Program ACO, Integrity Health Innovations, Bruce serves in parallel roles with that organization.

Professional accomplishments for Bruce include being a National Registered EMT and serving as past President of the Carlton County EMS Association, past Vice President of the Arrowhead EMS Association, and past Director of the Alcohol/Chemical Dependency Treatment Series in Duluth.

IHN has earned multiple Quality Improvement awards under Bruce's leadership, including honors from the Minnesota Bridges to Excellence, UCare's Salute to Excellence, and HealthPartners Partners in Excellence programs.

## PHYSICIANS AND STAFF



**DAVID MCKEE, MD**  
Chief Medical Officer &  
Medical Director-Specialty  
Care

Dr. David McKee is a practicing neurologist at Northland Neurology and Myology, P.A., which he founded in 1993. He was recently

appointed IHN's Chief Medical Officer. He has served as our Medical Director of Specialty Care for five years. Prior to that he served continuously in the leadership of Northland Medical Associates from 1993 until it merged with Northstar Physicians Network, forming IHN, in 2010.

David has been elected to Best Doctors in America in 2007-08 and 2009-10. He was also selected as one of the region's "Top Doctors" by Duluth Superior Magazine. Most recently, in 2014, he was honored as one of Castle-Connolly's top neurologists in the Midwest. In addition to practicing neurology in Duluth, Dr. McKee maintains outreach clinics in Cloquet, Virginia, Hibbing and Grand Rapids.



**DAVID LUEHR, MD, FAAFP**  
Medical Director-  
Primary Care

Dr. David Luehr is IHN's Medical Director of Primary Care. He recently retired from practicing family medicine for 37

years at Raiter Clinic in Cloquet, Minn. Luehr has also served as IHN's Chief Medical Officer.

Among the many accomplishments throughout his career, Dr. Luehr served as President of the Minnesota Medical Association and Associate Clinical Professor at the University Medical School in Duluth. He is a Fellow in the American Academy of Family Physicians and winner of the Thomas Stolee Award for Dedication to Medicine. He has chaired the Minnesota Medical Association committee on Quality in Medicine and currently serves as a delegate to the American Medical Association.



**PATTY JOHNSON**  
Operations & Network  
Manager

Patty began her career with the organization in 1993 as a claims processor with Northstar Physicians Network. Her responsibilities grew to include data projects, and

eventually she became Data Manager. She was promoted in 2005 to Manager of Operations, Business Manager of Integrity Health Network in 2010, and Network Services Coordinator in 2011.

Along with knowledge gained from 22 years of experience, Patty has completed the Human Resources Certificate Program and a Financial Accounting course. She continues to take course offerings as they become available.

Most recently her position expanded yet again to cover not only the business side of operations, but clinic support also, thus the change of title in 2015 to Operations & Network Manager.



**SAMANTHA SOLMONSON**  
Performance Improvement  
Coordinator

Samantha started at Integrity Health Network as a student intern during the summer of 2014.

She graduated from the University of Minnesota Duluth with a Bachelor's in Business Administration, majoring in Healthcare Management. After graduation she became the Executive Assistant and Referral Coordinator for Integrity Health Network.

Since then Samantha has taken on a larger role in IHN's quality improvement projects. She assists with Minnesota Community Measurement data collections, ACO data analysis, and Total Cost of Care analysis. Due to the broad range of projects she is involved with, Samantha's title was changed to Performance Improvement Coordinator in June, 2015.

We are in an era where how we pay for medical care is changing. Fee-for-service has been the payment system for the past couple of decades. At Integrity Health Network (IHN) we are working with the new world of medical care. The federal government has entered into the arena with Accountable Care Organizations and private health plans are offering Total Cost of Care contracts. IHN is involved with both.

Both programs require innovation in healthcare delivery. We must look at those entities that drive increases in healthcare costs. Many times the drivers are sociological and societal. With the new system, we must address these issues. We are finding that sometimes just arranging for transportation to the doctor can prevent a costly admission to the hospital. Another example is to treat the depression a patient is experiencing while suffering from another chronic condition to allow for a better outcome of all their care.

We are getting more data than ever before from the government as well as commercial health plans. This will help our efforts to improve care and cost savings. Also helping is collaboration with other physicians as well as nurses, social workers, psychologists, long-term care providers, skilled nursing homes and hospitals. Our work in primary care to provide medical homes for patients fosters this collaboration. IHN's success with medical homes is encouraging other providers to join. This concept is now under consideration by area mental health providers, such as the Human Development Center.

The IHN Quality Committee brings together physician medical directors from every specialty and primary care office to address the concerns mentioned above. In addition we have increased the list of conditions covered under our Care Continuum Initiative. These brief, user-friendly guidelines for treating a wide variety of conditions allow us to more effectively and efficiently tackle many disease processes. These are available for use in our electronic health records and on our smart phones.

Another function of the Quality Committee is to evaluate updates on guidelines from the Institute for Clinical Systems Improvement. Many from our staff have been very involved with this entity, presenting at statewide and national conferences. I have been involved with hypertension guidelines and once served as co-chair for the committee.

During this past year, Director of Quality Bruce Penner and I presented at the Rural Health Consortium. We discussed the need for coordination between emergency rooms and clinics to most efficiently provide complete and quality care.

I have been involved with the Minnesota Medical Association (MMA) and have recently served on the Independent Practice Committee. The board of the MMA continues to look for areas to help independent practices as well as other systems. I also represent the MMA as an Alternate Delegate to the American Medical Association and have brought back information from a national perspective.

Collaboration will continue to be important as we move forward. I have gained new insights to the challenges presented to hospitals while serving on the Cloquet Community Memorial Hospital Board for the past seven years. Recently I was involved with a more wide-ranging collaborative on behalf of IHN: the Accountable Community for Health. This collaborative will study how to decrease costs involved with county social services and public health, mental health, hospitals, long-term care, as well as physician-provided healthcare.

**Dr. David Luehr**

Medical Director –  
Primary Care

**MINNESOTA**

## Albertville

Albertville-St. Michael Clinic

## Baxter

Central Minnesota Sleep Specialists, PLC

Dermatology Professionals, PA

Jennifer Arnhold, MD, PLC

Kurtis A. Waters, MD, PA

(Ear, Nose & Throat/Facial Plastics)

## Buffalo

Buffalo Clinic

## Clearwater

Clearwater Medical Clinic

## Cloquet

Community Memorial Specialty Clinic-Orthopaedics

(Affiliate Member)

Community Memorial Specialty Clinic-General Surgery

(Affiliate Member)

Community Memorial Women's Health Service

(Affiliate Member)

Human Development Center

Mental Health Services

Raiter Clinic, LTD

## Cold Spring

Christopher J. Wenner, MD, PA

Cold Spring Medical Clinic

## Cromwell

Cromwell Medical Clinic, PLLC

## Duluth

Center for Diagnostic Imaging (Facility Member)

Duluth Kidney Services, LLC

Fall General Surgery

Human Development Center

Mental Health Services

Laboratory Medicine Specialists of Duluth

Lakewalk Surgery Center (Facility Member)

Northland Ear, Nose & Throat Associates

Northland Gastroenterology, PA

Northland Neurology & Myology, PA

Northland Plastic Surgery

Orthopaedic Associates of Duluth, PA

Radiological Associates of Duluth, Ltd.

Relf EyeCare Specialists, PA

## Eveleth

Iron Range Clinic

## Grand Marais

Human Development Center

## Grand Rapids

Itasca Surgical Clinic

## Hermantown

Orthopaedic Associates Therapy

Weis Eye Center, P.A.

## Monticello

Monticello Clinic

## Moose Lake

Mercy Hospital & Healthcare Center-Orthopedics

(Affiliate Member)

## Oakdale

St. Croix Hospice (Facility Member)

## Sartell

Sartell Pediatrics, PA

## St. Cloud

Midsota Plastic Surgeons, PA

St. Cloud Medical Group-Northwest

St. Cloud Medical Group-South

## Two Harbors

Human Development Center

Mental Health Services

## Virginia

Charles A. Tietz, M.D., FACOG, Ltd.

**WISCONSIN**

## Ashland

Fall General Surgery

NorthLakes AODA Services

NorthLakes Community Clinic

MainStreet Clinic

## Hayward

NorthLakes Community Clinic

## Iron River

NorthLakes Community Clinic

## Minong

NorthLakes Community Clinic

## Superior

Human Development Center

Mental Health and Addictions