10th Annual AMDIS-Gartner Survey of CMIOs

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Today's Agenda

- Survey Objectives
- The CMIO: Who Are You Now?
- Business and CMIO Priorities
- CMIO Compensation
- Organizational and Personal Challenges
- Reflections

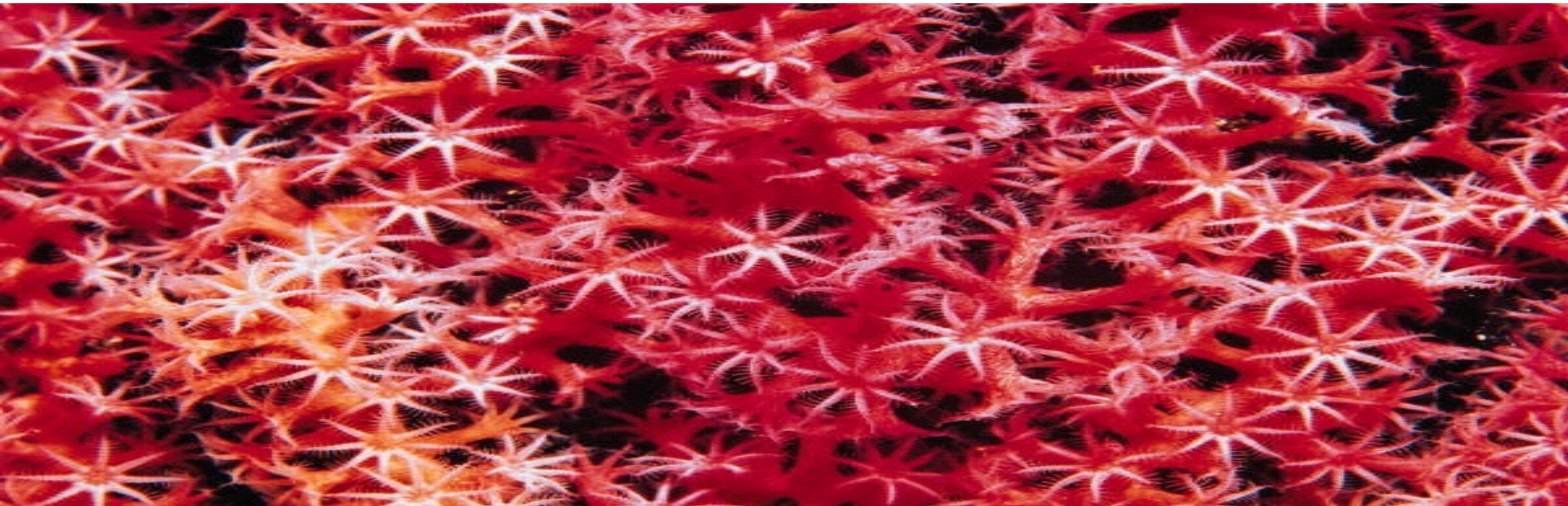**Gartner.**

AMDIS-Gartner Study Purposes

- Inform CMIOs about current state, future directions and personal development in the profession

- Advise CXOs for planning, recruitment and optimal alignment and impact of IT and informatics staff

- Combine with other Gartner research to detect patterns for prediction and prescriptive advice

- CMIOs at more advanced organizations are predictive of many HCIT trends

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Profile of Survey Respondents

- 120 Respondents

  - Very dominantly US integrated delivery systems (that is, hospitals + physician practices)

  - Responsibility across the whole health system

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The CMIO: What 3 Words Come to Mind?

Was Liaison, Then Leader

The 2013 CMIO Word Cloud

What three words come to mind when you think of the CMIO's job in 2013?

Source: Gartner, 2013

The 2014 CMIO Word Cloud:
Are We Meaningful Yet?

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How would you characterize the general mood or e of the physicians you work with?

Challenges for All

- "Engagement had been very high but rapidly changing expectations for rev cycle and physician comp threaten infrastructure abilities to support those changes."

- "Major efforts to include physicians in all projects from the very start for ownership and feedback. We are working hard to target important quality, safety and workflow issues that are highly prioritized by our physicians but limited by all the time we are spending on completing our 2nd quarter attestation for MU2."

- "Given the pace of change, trust with administration is suffering some...CMS deadlines that get moved, discussion over when is MU1, 2, etc. Hard to plan and partner when things change so quickly and at the last minute."

- "Physicians are increasingly challenged to maintain their current practices and revenue, while beginning to adjust to new reimbursement paradigms. They are severely stressed and resistant to most things that have associated time burdens, even if they know there is benefit to patients."

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What Are CMIOs Doing About It?

- "We are not being driven to clinical integration in our market, so are able to take a slower development approach as a result. This is allowing us to maintain the trust we have with our providers, who are mostly independent practitioners rather than employed providers."

- "Those who are positive and embracing change become our early adopters. The others will come along as we show them data and the personal reason to consider the change. We have a very large org, some sites with great change leadership and others without. We try to identify those cultures which are very engaged and ready to lead."

- "It's difficult to gain cooperation, but at some point I manage to get it. Unfortunately we have a difficult EMR and the frustration level for everyone including me is quite high."

- "I find myself spending a majority of my time explaining how practice models and improved care can be achieved despite/in concert with federal regulatory changes."

- "More training and support plus proof points,"

- "We must regain speed lost by EHR and switch to value-based contracting where EHRs offer better value."

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What Are CMIOs Doing About It?
Added Focus On Workflow and Usability

- More gentle touch for aspects that could improve our total patient experience but are not explicitly required by MU, such as really good management of the problem list.

- "I am constantly seeking the rare opportunity for actual workflow improvements in hopes of offsetting the many burdensome mandates."

- "Significant work on usability."

- "Increasing focus on usability innovations."

- "We are constantly working with our vendor to improve the workflow."

- "Working on standardizing workflows to optimize how users interact with the EHR."

- "Focus intently on physician workflow."

- "Increasing focus on usability and user experience to better serve their needs and improve their satisfaction."

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What Are CMIOs Doing About It?:
Balancing the Pace of Change

- "It certainly makes it delicate.... those that are accepting and eager for technologies are scooped up and put to work as super users. Of course - we always did that."

- "Trying to promote closer collaboration with the institution."

- "Only pursuing essential changes and minimal disruptions."

- "We are paying more attention to the timing of events & roll-outs and when possible aiming for a slower pace."

- "I surrendered."

- "The pace of change is much much slower as the new payment models are tied to information systems. We need to be very careful that we have the data right and systems in place before approaching the docs."

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What Are CMIOs Doing About It? Rebalancing Time For Engagement

- "More communication, better governance."

- "Understanding."

- "From a PHO perspective, we help guide members to adjust to changing models of care and reimbursement."

- "Spending more time as a champion."

- "More site visits."

- "More understanding about dealing with change. Informing them change is inevitable."

- "Variable levels of engagement with the older physicians but younger MDs are eager to adopt change and improve things."

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What Are CMIOs Doing About It?
Renewed Commitment; Creative Leadership

- "I must try to predict how my EHR can be used before the users even realize that it can be used in that way. I have to be creative and innovate. Steve Jobs resurrected Apple by accentuating the crossroads of the arts and technology. We must do the same by intersecting medicine and technology."

- "I work to find technology and processes that improve their daily work/the experience of their work."

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What Are CMIOs Doing About It?
Renewed Commitment, Creative Leadership

1. "Requires much more "outside the box" thinking to tie 'why' with 'what and how' needs to be done with implementation, upgrades, MU etc.

2. "Requires constant recruitment and recruitment of physician champions and leadership development .

3. "Requires good allies in the finance department to allocate resources to improve 'clinician experience.'"

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Gartner Health IT Scenario 2020:
Move to the "Real-time Health System"
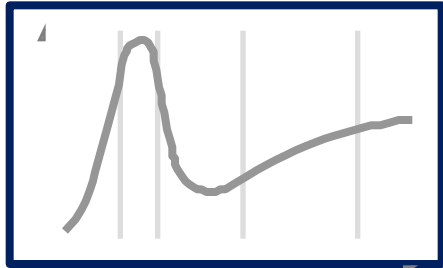
Intelligent Healthcare Operations Systems
for Adaptive Decision-Making

Applications	Analytics	Infrastructure
	Integrated Clin/Bus EHRs	802.11ac, 11ad, 11ah
	...ytics	Industrialized Infrastructure: Fabric, Integrated & Converged, Cloud, "Phase 2" Virtualization
Location & Condition Sensing Platforms	...on-based Data Discovery Tools	...e ...ervice
Patient Throughput & Med Command Centers	Care Coordination Apps	Patient Persuasion Analytics	Managed Mobility Svcs Mobile Protection Intelligence.
Patient Interactive Ed/Decision Aids & Gamification of Therapies	Enterprise HR, Supply Chain Capacity & Cost Flexors	Operational Intelligence Platforms	Proactive & Predictive Data Center Support
"My monitoring"	E- and Video- Visits	Collaborative Decision-Making Platforms	"Software-Defined X"
Digital pathology wi/ auto image analysis	Computer-assisted Coding & Documentation Improvement		
	Smart Machine Doers and Sages	Graph Databases	
		Bigger Data Analytics & Services	
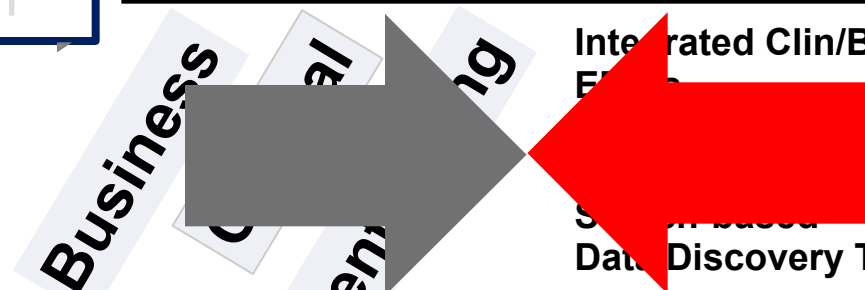
Business **...cal** **...ng**

Analycations & Appalytics

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M&A Means Average Number of Acute Care Beds Is Rising


100%

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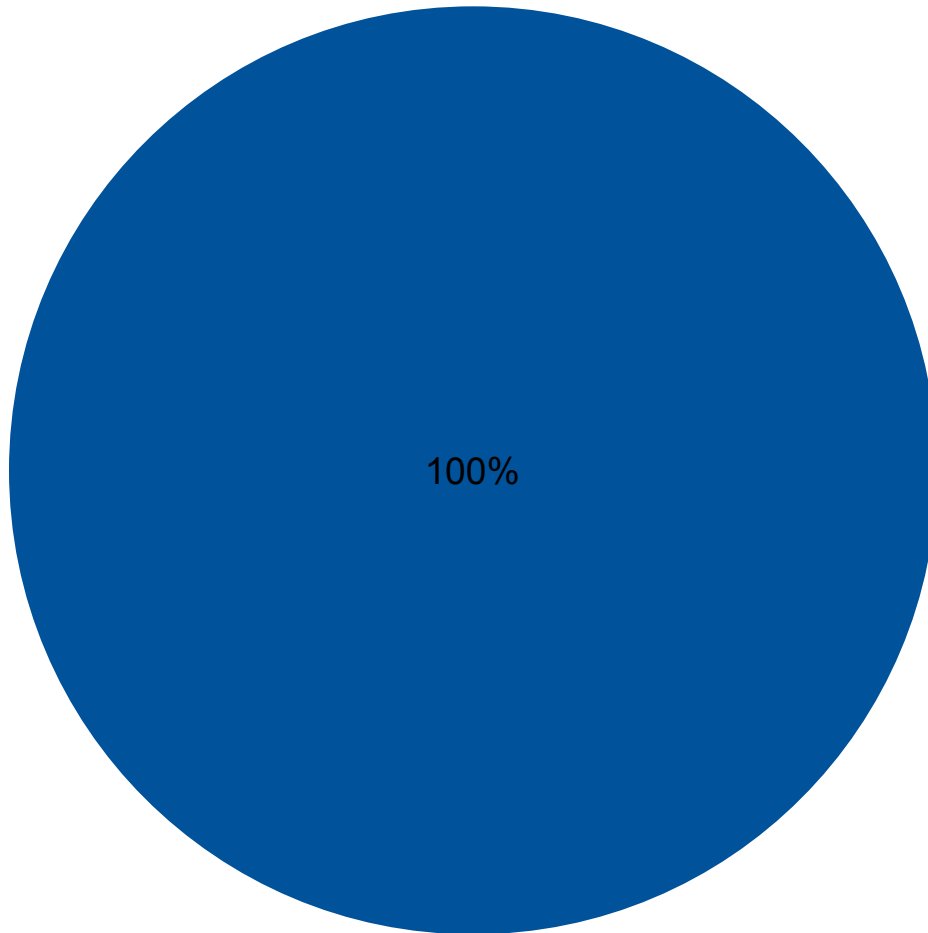
And So Is The Number of Physicians Supported

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CMIOs Are Seemingly Tireless Highly Educated, and Experienced

- 71% of you still practice medicine

- 78% have some previous administrative or management experience

- Only 18% of CMIOs do not have additional Masters, Phd. and/or or MI training such as AMIA 10X10

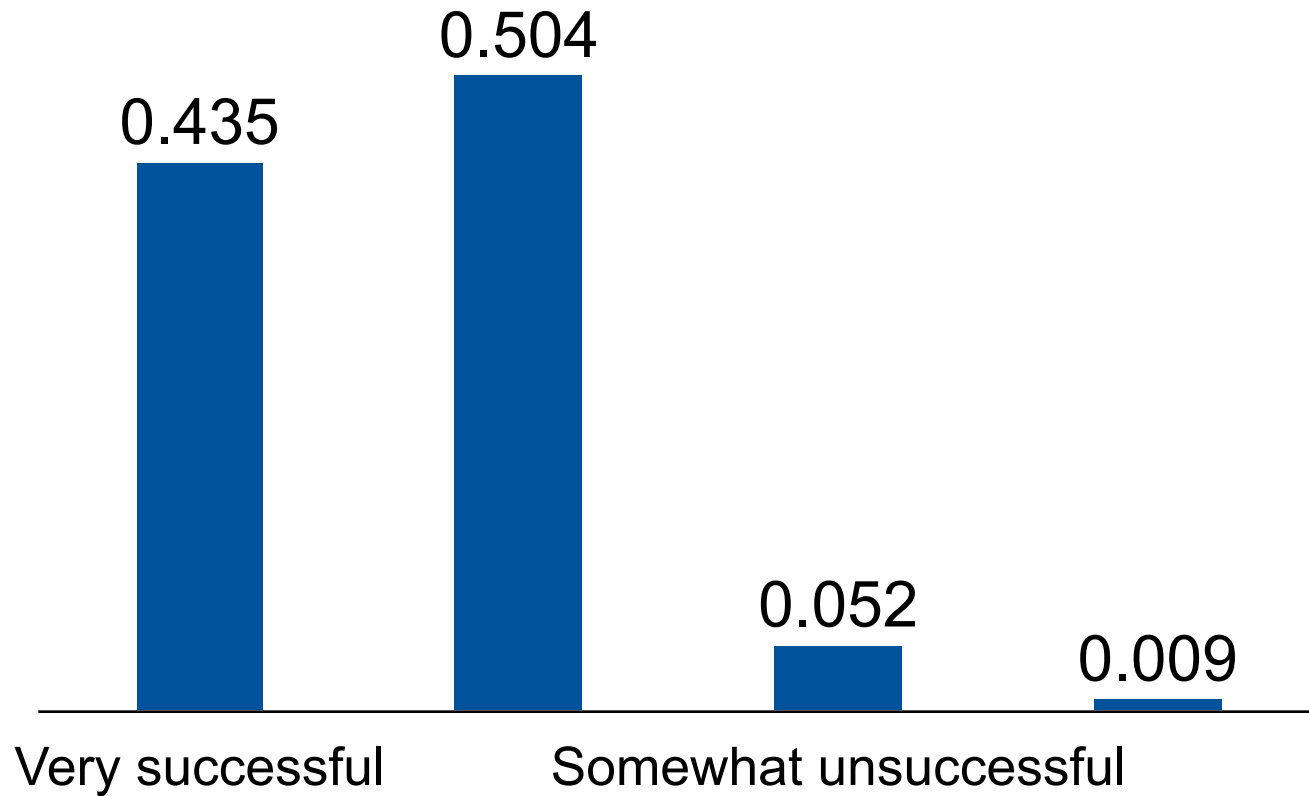- **Clinical Informatics Sub-specialty is a hit**
  - **25% have received**
  - **28% pursuing**

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Sense of Satisfaction and Success
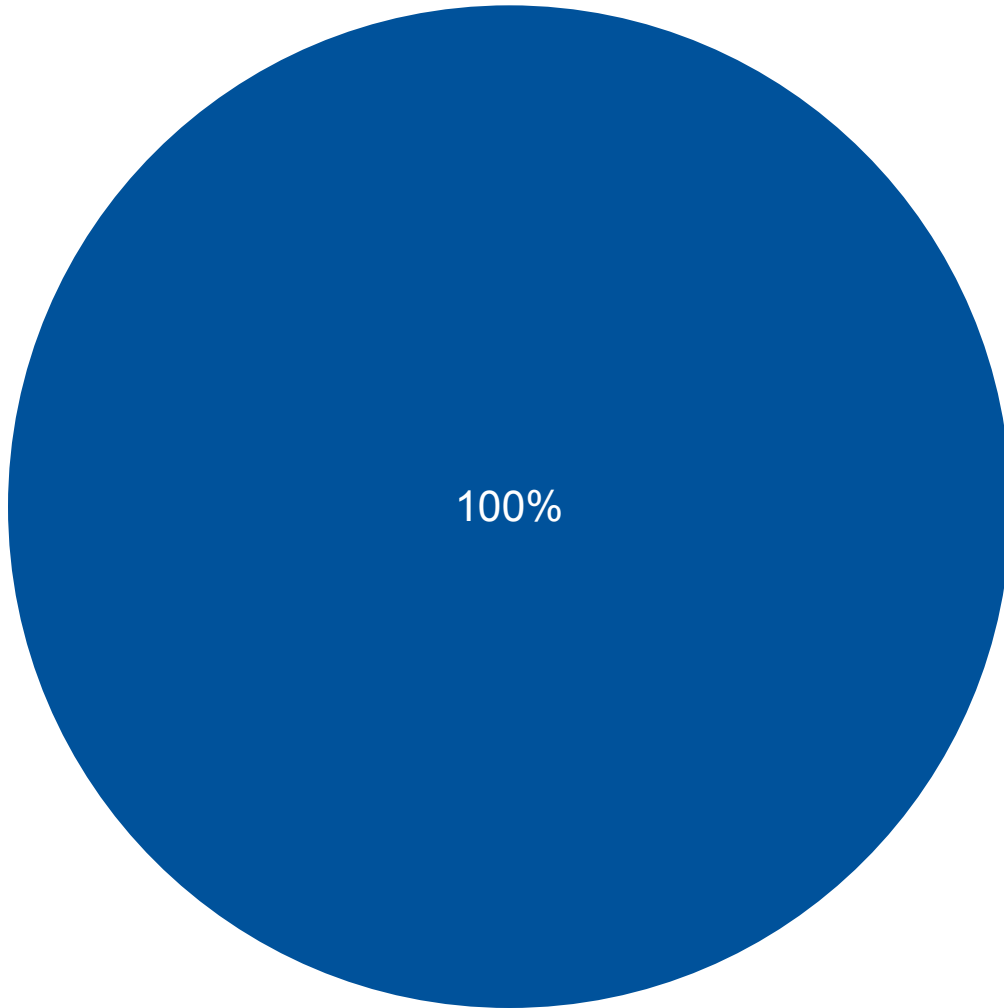
How satisfied do you feel in your current position?

0.438 0.429 0.116 0.018

Very satisfied   Somewhat dissatisfied

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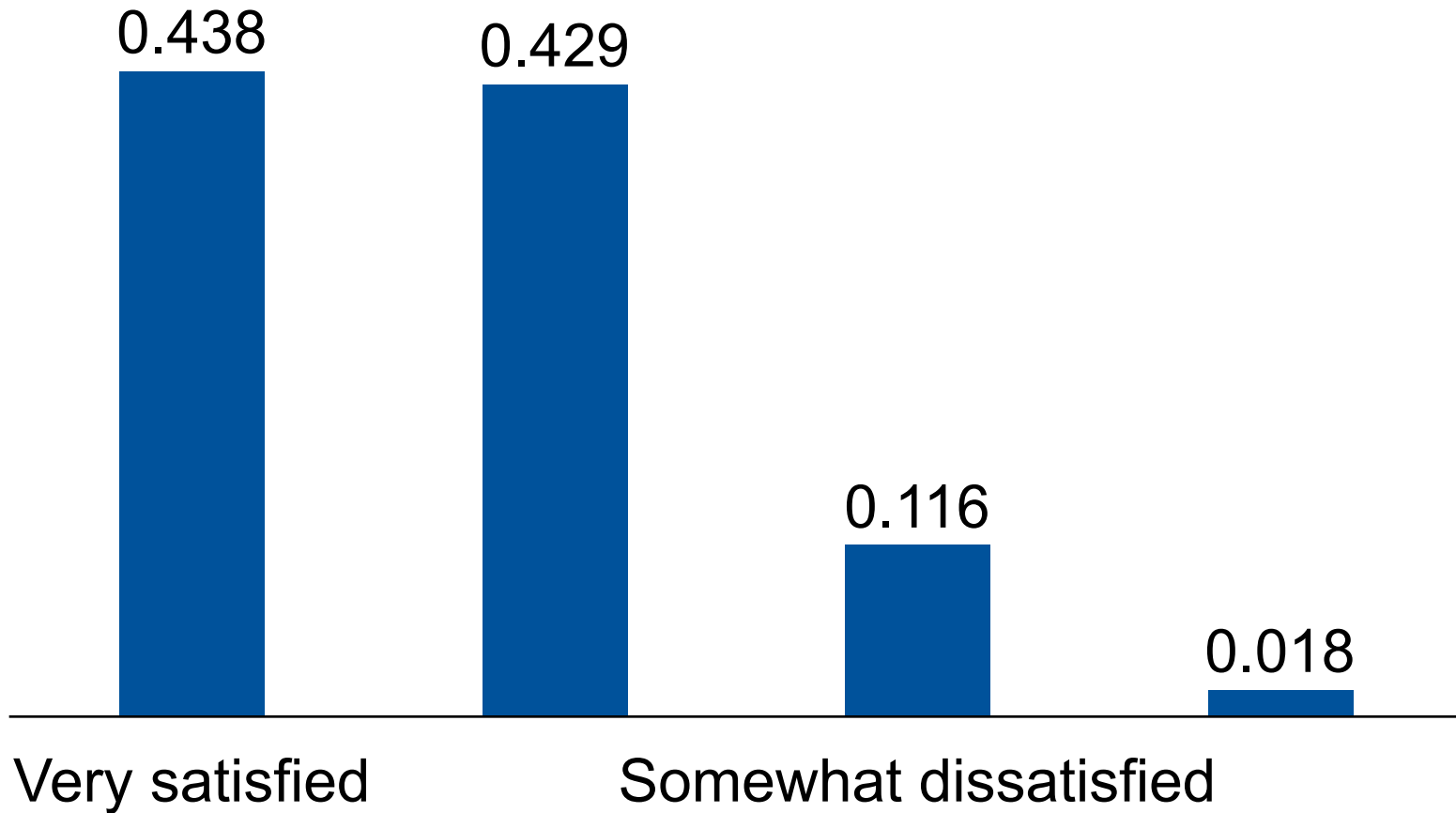
Sense of Satisfaction and Success

How successful do you feel in your current position?

0.504

0.435

0.052

0.009

Very successful   Somewhat unsuccessful

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Across a Range of Sizes
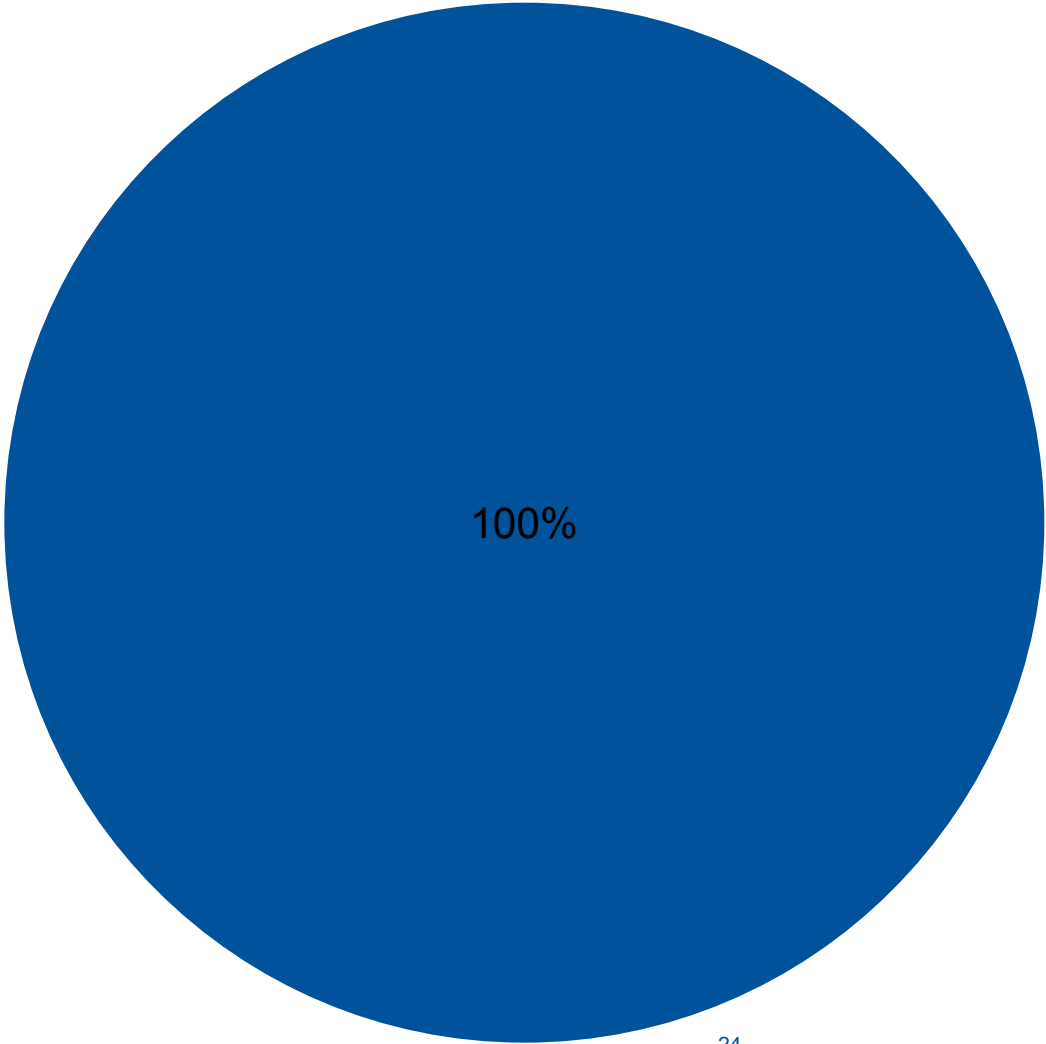# (Note the US shift in average size of IDS)

100%

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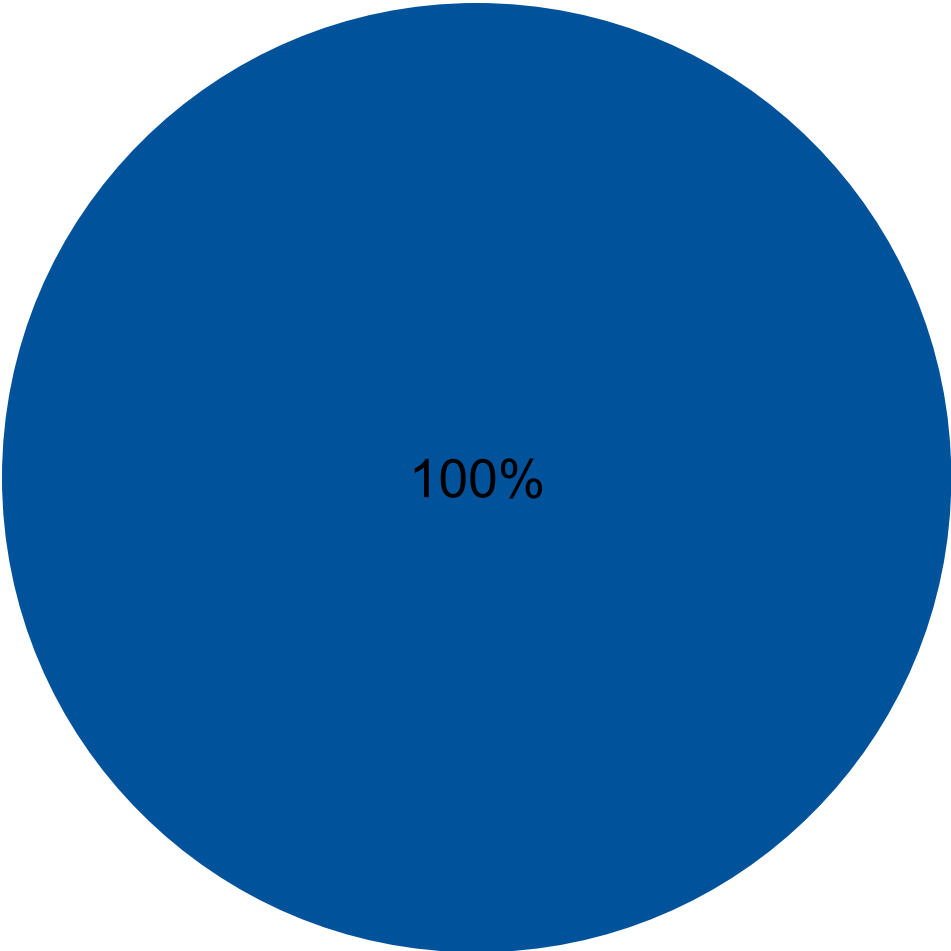# Organization's IT Adoption Profile:
Early (24%), Mainstream (63%), Late (13%)

0.625

0.241

0.134
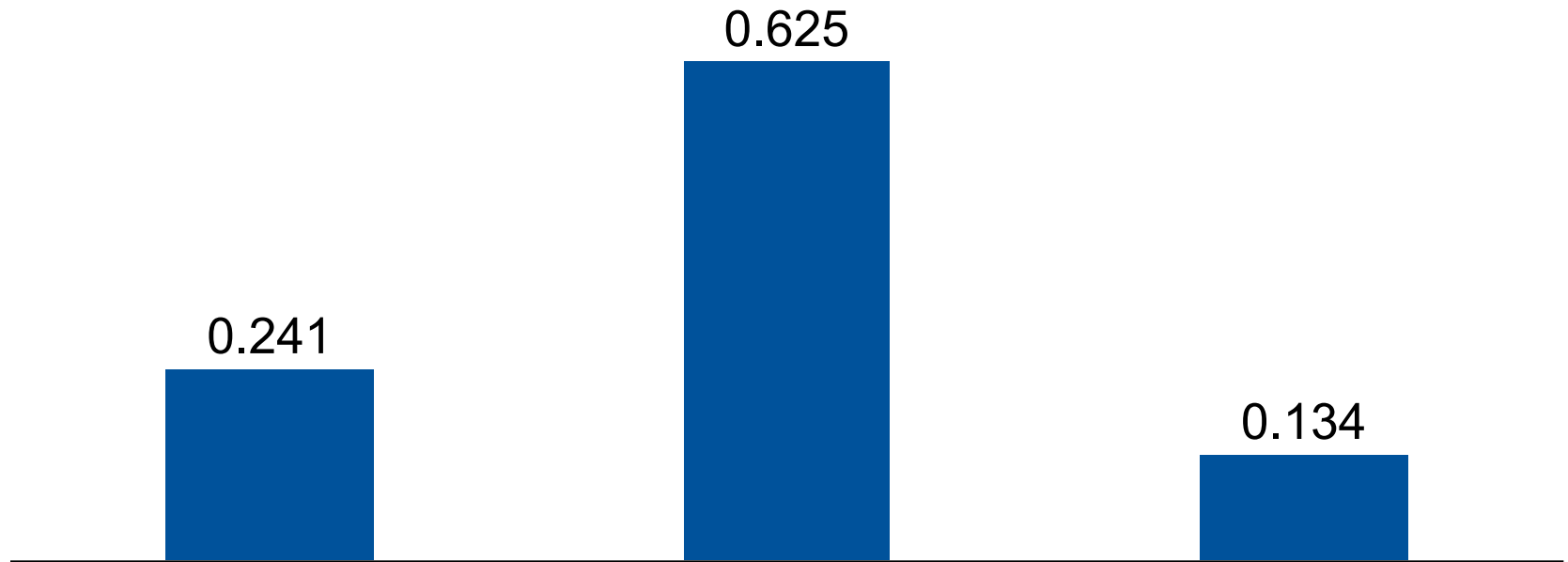
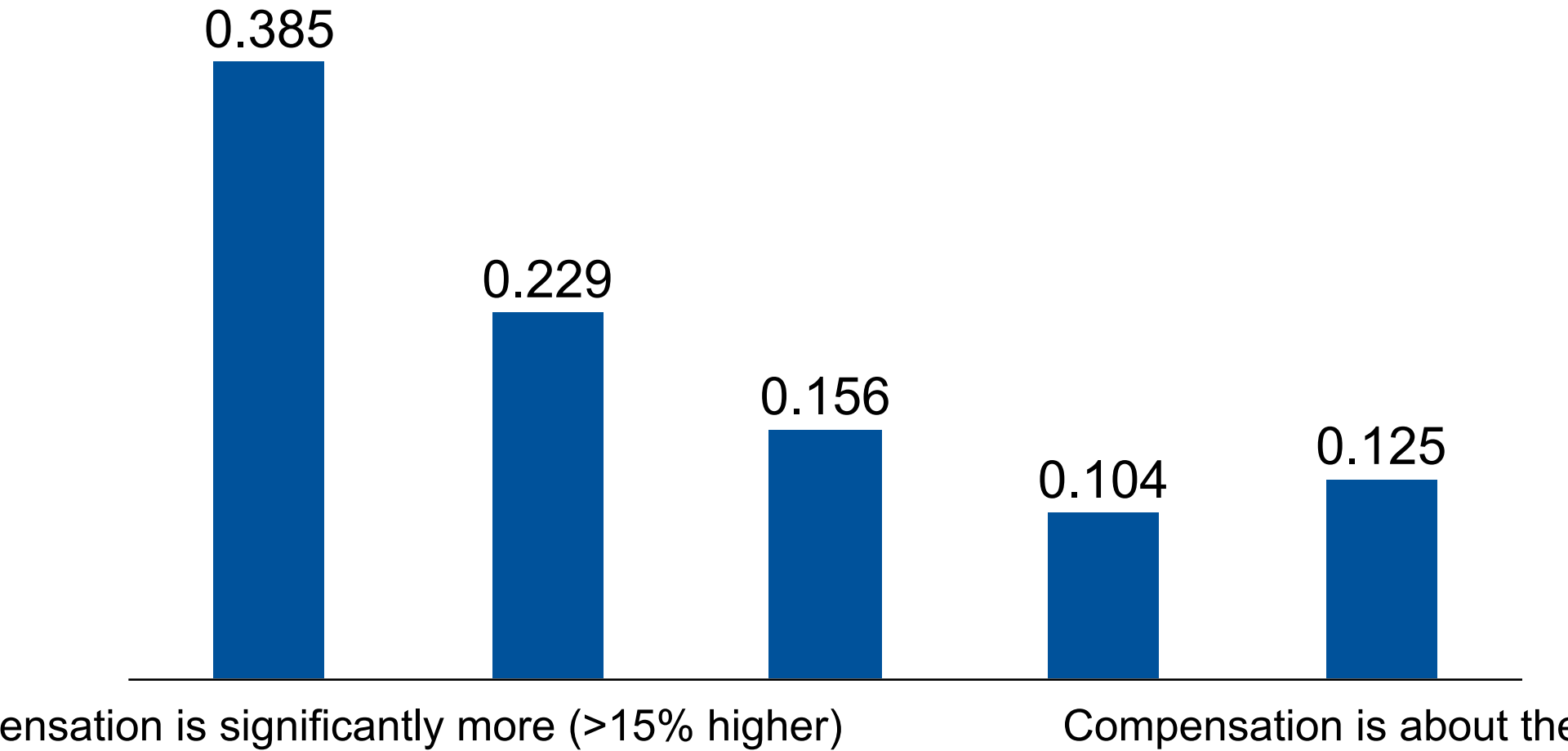ke more risk to help shape development and gain earliest benefit)

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Percent of Hospital Orders Via CPOE

100%

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Percent Using EHR in Physician Practices

100%

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Compensation

0.385 0.229 0.156 0.104 0.125

ensation is significantly more (>15% higher)   Compensation is about the

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CMIOs
Who Are You?

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First CMIO Position? Just 64% in 2014
CMIO Moves Increase

100%

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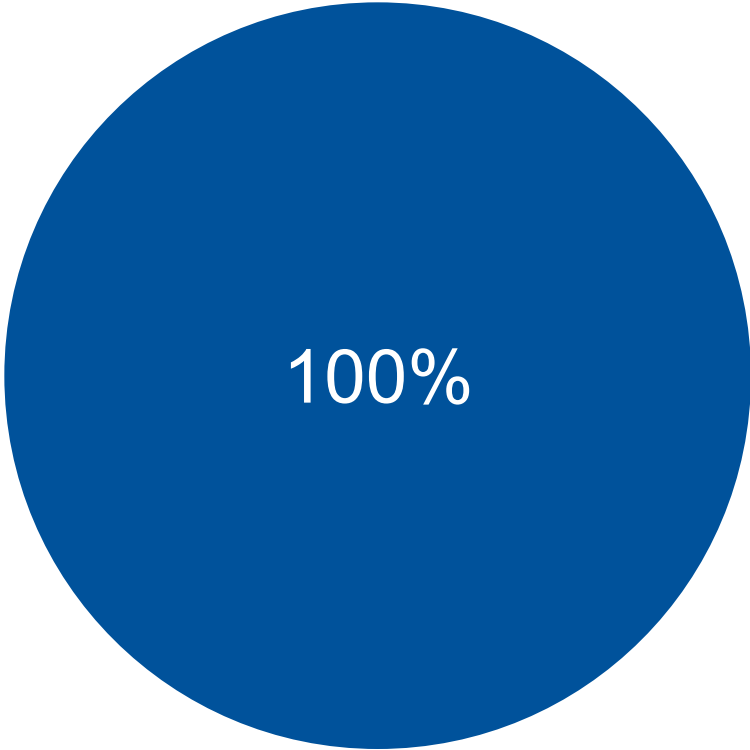
How Long in Current Position?

Bar chart with values:
- Under 1 year: 0.109
- (3-5 years region) 0.257
- 0.307
- 0.208
- More than 10 years: 0.119

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By Age

100%

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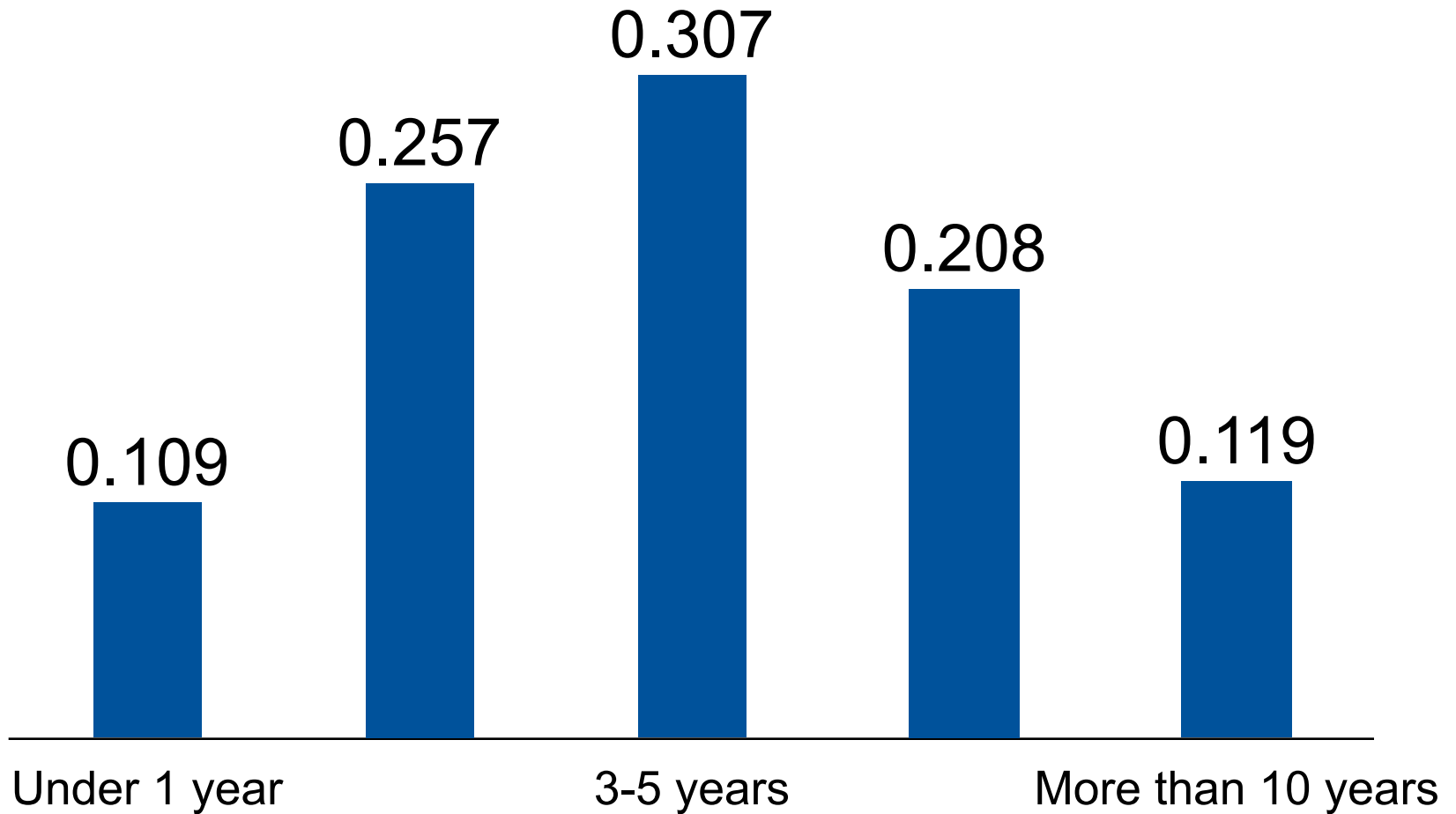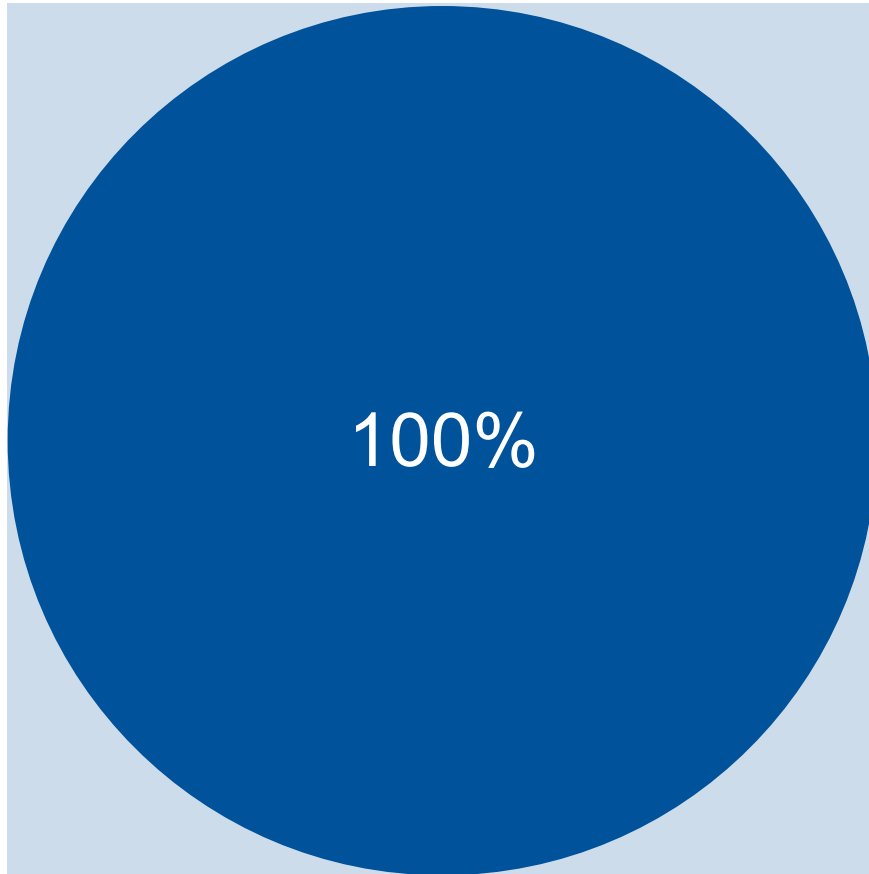
Medical Specialty Background:
Strong Communications and Team

What is your medical specialty (or specialties)?
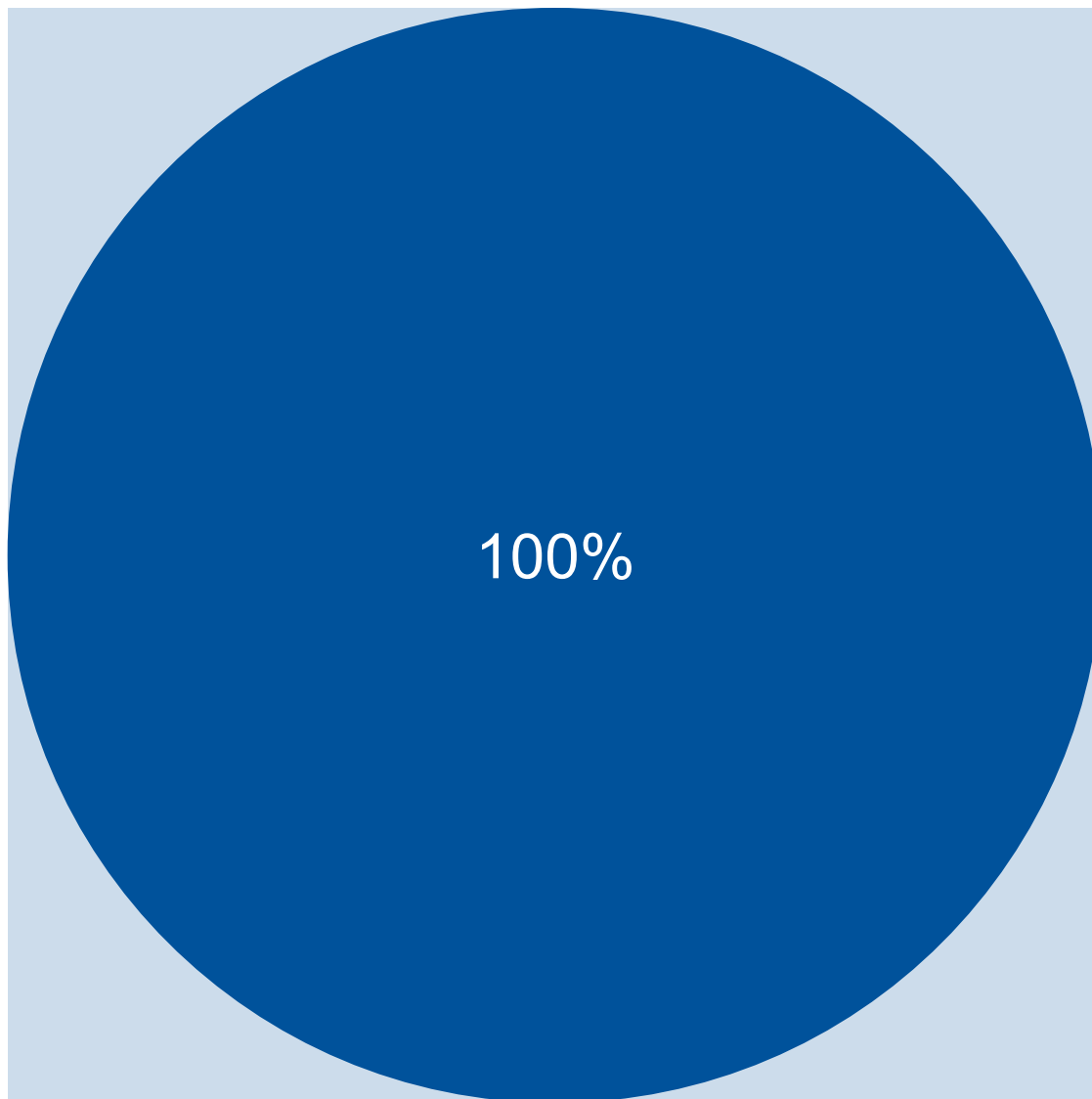
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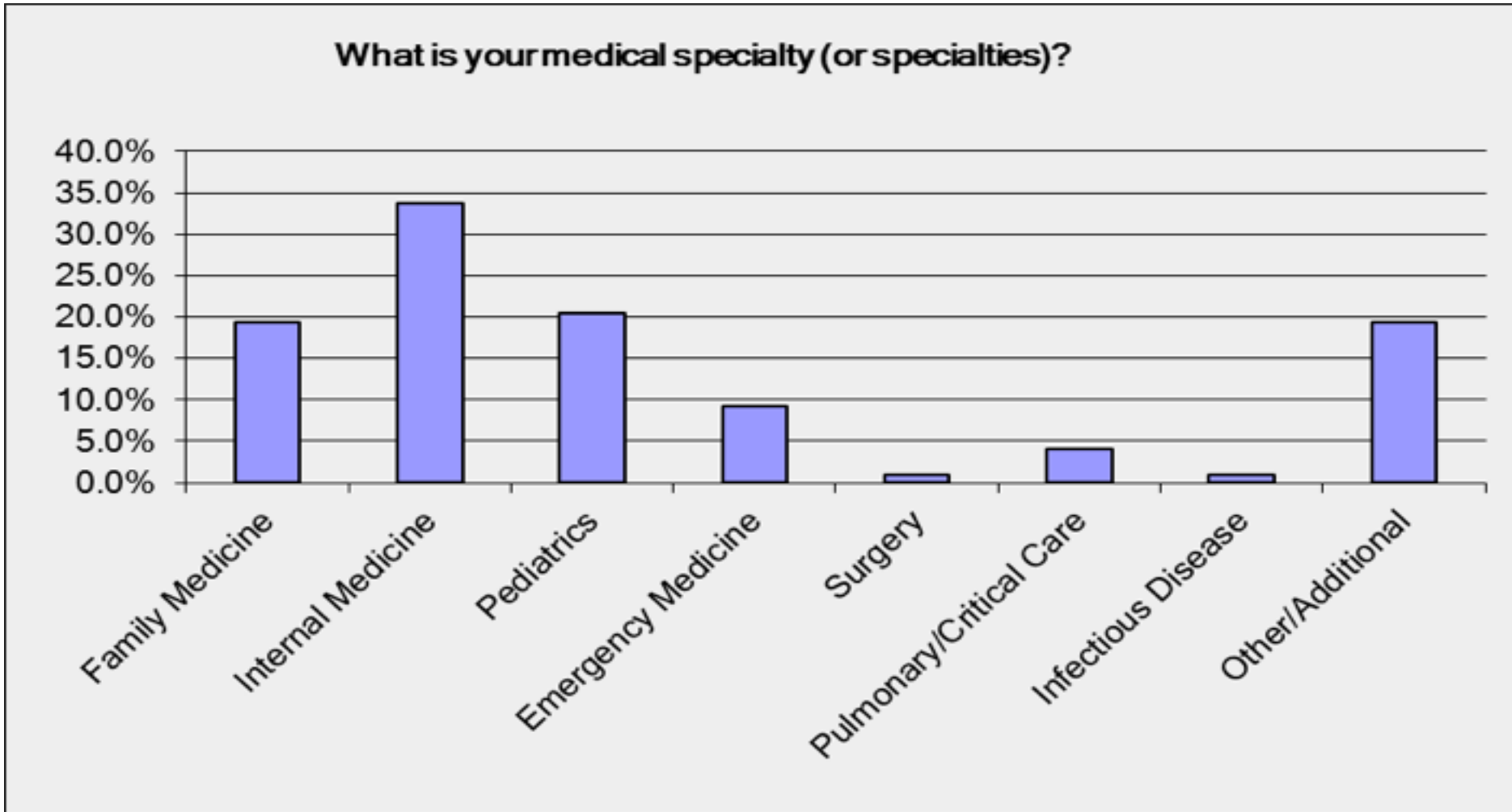
CMIO Still Practicing Medicine?

- 65% say yes
    - In 2005, it was 70%
    - Some correlation with age and CMIO tenure
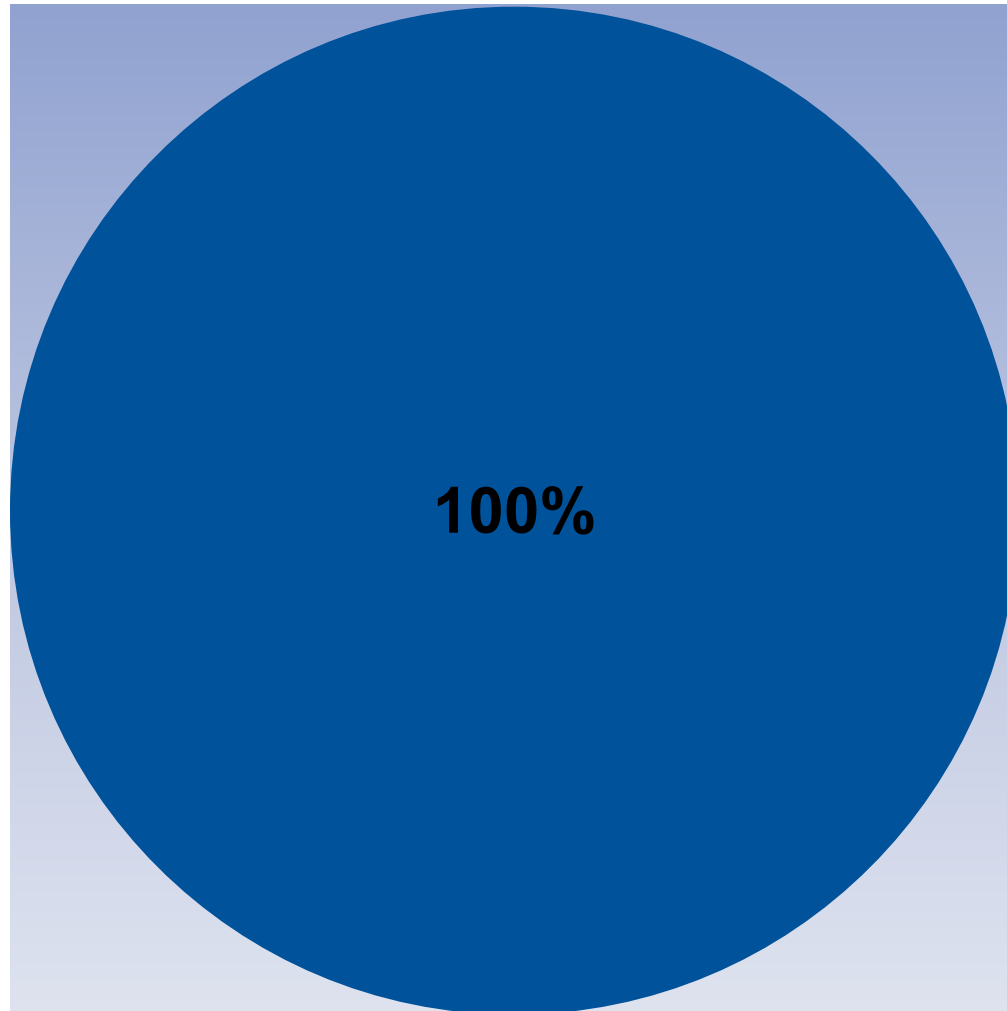
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Percent Time CMIO Practices Medicine

100%

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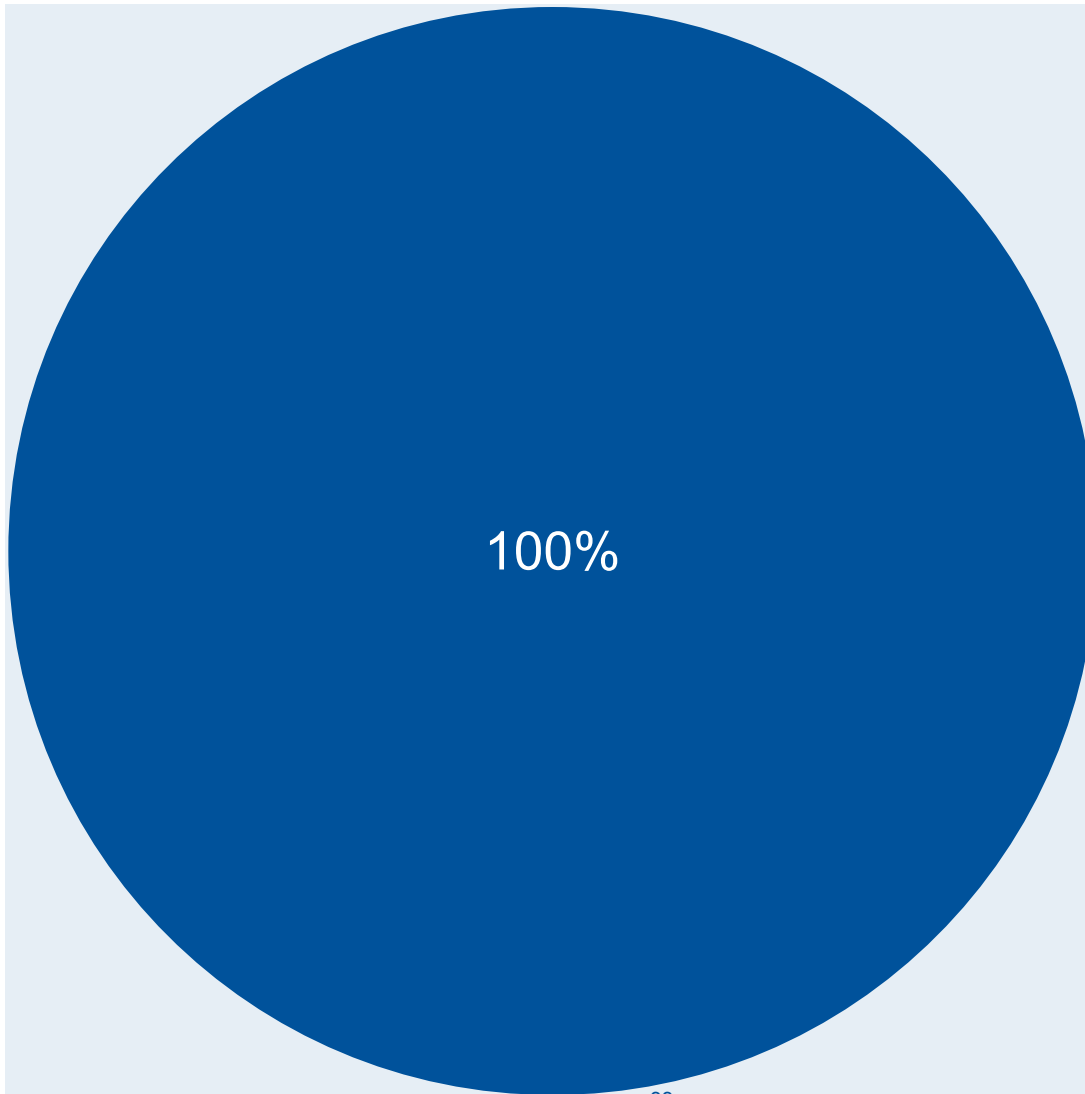
CMIO Most Common Reporting Relationship:
CIO (39%), CMO (36%) Dual CIO/CMO (8%), CEO/COO (12%)

100%

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What Reporting Structure You Would Recommend:
CMO (34%), Dual CMO/CIO (34%) CEO/COO (24%), CIO (4%)

100%

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CMIO Management Responsibilities

- 54% manage a team, up from 47% in 2013

- Some consistency in who's on the team: clinical informaticists, analysts

- Most teams are small

  - <10 FTEs: 37%

  - 10-50 FTEs: 49%

- Where larger, often other functions included (some analytics, HIM on occasion, etc.)

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CMIO
Priorities & Challenges

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Business Priorities

- Operational Efficiency and Margin Improvement: Especially acute care, priority service lines

- Growth: Service lines, ambulatory, capacity

- Population Health/ACO/Care

- Quality/Outcomes Improvement

- Patient Satisfaction/Experience Improvement

"How" Priorities

- Clinical Integration

- Standardization

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CMIO Priorities

- New/replacement and integrated EHR systems/ modules

- Analytics

- MU2

- Clinical Documentation Improvement Initiatives

- Population Health Management Tools

- Standardization and Optimization (workflow, content, process, for quality and cost)

- Clinical Decision Support Initiatives

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Organizational Challenges Confronting CMIOs

- Too many priorities/agendas

- Culture

- Physician resistance ("am I the only one?")

- Leadership/organization commitment to standardization and change

- Money

- Hesitance to invest in long-term informatics

- Talent/skills shortages

- IT lack of expertise in clinical rules and workflows

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Personal Challenges/Desired Areas of Development for CMIOs

- Change management and leadership
  "Improve ability to interact with clinical teams, lead change"

- Skills for fitting into the culture

- "Finding a mentoring relationship in the organization"

- Personal presence/how to gain more visibility

- "Putting effort into getting involved more broadly in the organization"

- Personnel management/team-building skills
  "Overcoming personal agendas to consolidate personnel into a more effective/efficient group"

- "Growth as a leader with the C Suite"

- Organization/time management; "time/balance"

- Improved presentation skills

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Personal Challenges/Desired Areas of Development for CMIOs

- Improved business/financial acumen:
  "Stronger skills in this area will allow me to better speak the CFO's language."

  "Simplifying budget concerns and project mgmt."

  "Managing budgets"

- New business and care models
  Better understanding of population health

- "Managing up and laterally has been an interesting challenge"

- Understanding of analytics

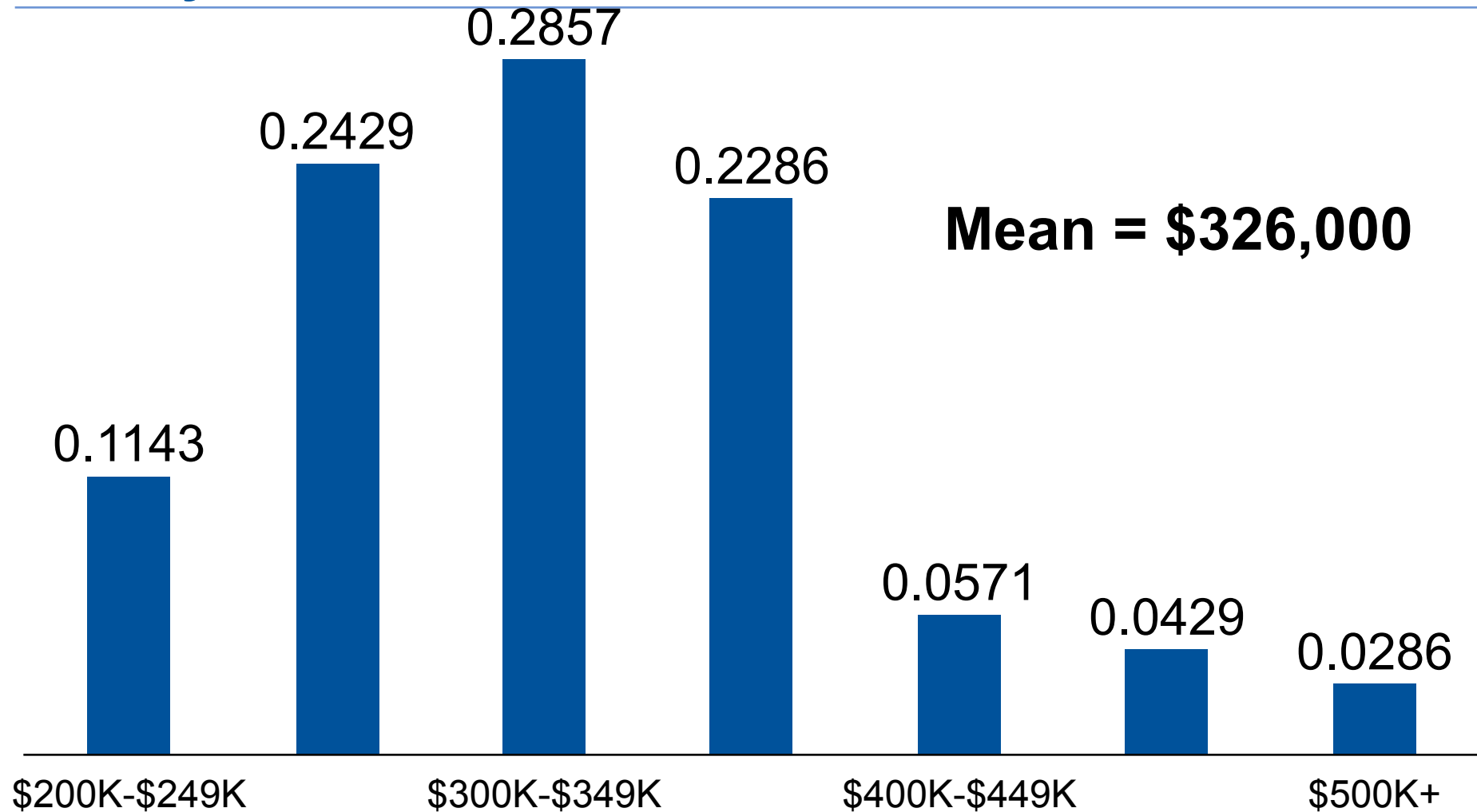# Personal Challenges/Desired Areas of New Skills and Development for CMIOs

- Understanding data analytics and reporting

- Analytics technologies, governance and approaches

- Increase IT/application knowledge or supplement with staff "More technical IT knowledge"

- Better informatics knowledge/perspective on future of IT or roadmap development

- Lack of experience in improving clinical documentation

- "Human Factors/Egonomics/Systems Engineering"

- "Better technical understanding of interoperability, standards specifications"
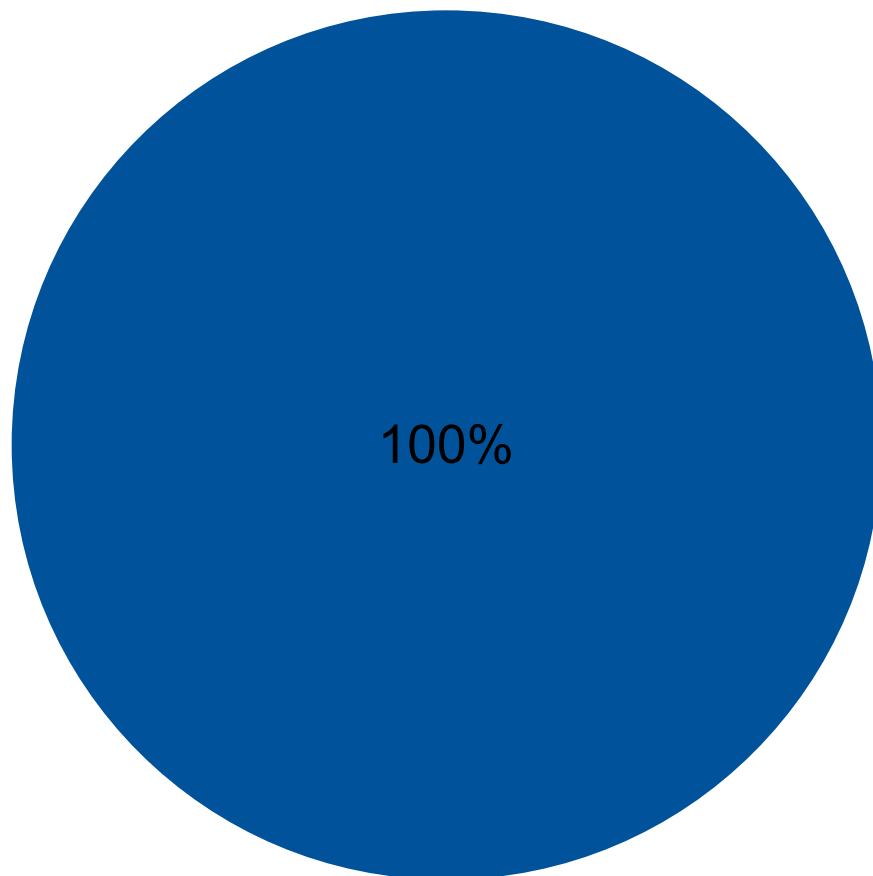
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CMIO Compensation

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CMIO Compensation Highlights (>60% of Time In CMIO Role)

- Mean total compensation = $326,000 (was $318,000 in 2013)

  - Range $206K-$550K

- What correlates with compensation level?

  - + Medical specialty/pre-CMIO salary history (as starting point for discussion)

  - + Geography (cost of living)

  - +Scope of responsibilities

  - + CMIOs with large reporting groups tend to be paid more

  - - *Not* to whom you report

  - - *Not earlier IT adopter status*

  - - *Not* size of health system

  - - *Not* graduate/MI education

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Compensation Break-out
"Nearly/Full-time CMIOs

Mean = $326,000

Bar chart values:
- $200K-$249K: 0.1143
- (next): 0.2429
- $300K-$349K: 0.2857
- (next): 0.2286
- $400K-$449K: 0.0571
- (next): 0.0429
- $500K+: 0.0286

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What Do You Want Your Next Job To Be?

100%

67% "Just" want to be CMIOs - *Not CIO or CMO!*

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