



# Women's Healthcare

**WOMEN APPROACH  
AND EXPERIENCE  
HEALTHCARE SERVICES  
AS CONSUMERS, NOT  
JUST AS PATIENTS**

Women's health is a unique service line that impacts half the population throughout their entire lives. Building a successful women's healthcare service line requires comprehensive and highly evolved core functions that support subspecialties as well as programmatic and clinical needs tailored to the different stages of a woman's life—from preventive care and family planning/reproductive health, obstetrics, and postpartum to gynecology, oncology, pain management, breast and bone health, and beyond. Women generally enter the healthcare system not as sick patients, but as healthy consumers with high expectations for customer experience and care outcomes. Maternal health is often the first avenue by which women encounter medical services, and for most women, their first inpatient stay is associated with obstetrics. Health systems must realize the opportunity to make a positive impression that keeps women coming back—for themselves, their dependents, and their aging family members.



# MEETING THE HEALTHCARE NEEDS OF WOMEN THROUGHOUT THEIR LIVES REQUIRES A COMPREHENSIVE, COORDINATED, AND CONTEMPORARY APPROACH.

Acknowledgment of the different needs, experiences, and expectations of women, along with shifting cultural norms, is impacting how providers understand and approach equitable women's healthcare.

## MARKET FORCES



**THE BIRTH RATE IN THE US IS DROPPING** by an average of 1% a year—the lowest since the early 1970s—challenging OB/GYN and NICU program stability.



**INCREASED DEMAND FOR PREVENTIVE AND SUBSPECIALTY SERVICES** is driving health systems to shift the focus of their women's health service lines to meet patients' needs at every stage of life.



**NEW PARTNERSHIPS AND COLLABORATIONS** are producing previously unrecognized revenue opportunities through broadened offerings and new bundle programs.



**THE MIGRATION OF MANY WOMEN'S HEALTH SERVICES** to the outpatient setting has created an urgency for systems to engage their physicians in service line operations across the continuum.



**PATIENT EXPECTATIONS ARE EVOLVING** and women expect a highly customized, consumer-friendly experience in the healthcare setting.



Optimized maternal services guarantee revenue because pregnancy and delivery care are covered by Medicaid (45% of births nationally).



More than 60% of GYN surgeries are performed in the outpatient setting.

## MARKET REACTION

### HEALTH SYSTEMS ARE:

- Evaluating their service offerings to ensure population needs are met.
- Pursuing virtual and digital care that gives women greater flexibility in when and how they access care.
- Exploring alternative strategies such as birth centers, midwives, and ambulatory services.
- Treating patients as consumers who envision the hospital stay as a customized experience.
- Investing in facilities that are consumer friendly and offer superior experiences for patients and families.
- Partnering with providers to streamline care, share risk, and improve provider engagement and work/life satisfaction.

### PAYERS AND PROVIDERS ARE:

- Exploring population health and alternative payment models (such as maternity bundles) as a means of reducing the cost of care and developing financially sustainable programs.
- Partnering with hospitals and health systems on technology and capital investments that improve access, throughput, and experience with care.
- Seeking ways to enhance patient care and provider satisfaction with new compensation and coverage models.



# ACHIEVE SUCCESS WITH WOMEN'S HEALTH SERVICES

Providers must articulate their service line differentiators and successfully implement a fully integrated care continuum that not only meets the needs and expectations of women, but also supports the engagement for other services as women bring their families into the system.

✓ **STRATEGIC ASSESSMENT & PLANNING**

Healthcare administrators must assess their organization's market position and opportunities for growth and innovation, and map out the path that best positions their system for future success.

✓ **PROGRAM DESIGN & IMPLEMENTATION**

Services must be rationalized, and care models redesigned, to ensure services appropriately meet the needs of patients and providers. Patients must be able to easily and conveniently access care, and providers require the right tools and support to effectively manage the patient population.

✓ **CAPITAL, TECHNOLOGY, & WORKFORCE INVESTMENTS**

Organizations must appropriately invest in facilities, technology infrastructures, and care team staffing to allow for collaborative care models to succeed and patients to receive care in the place and manner that works best for them.

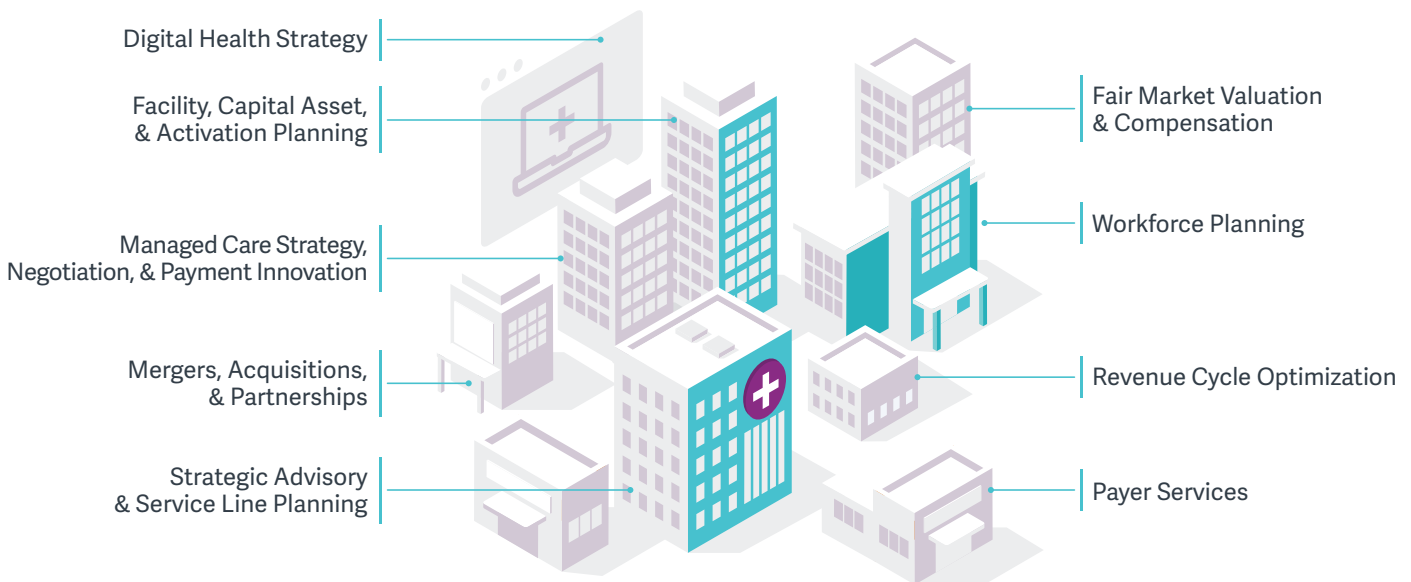
✓ **PROVIDER PARTNERSHIPS**

The OB workforce is transitioning to a predominantly employed/group model. Health systems must seize the opportunity to open conversations with providers and strengthen physician and provider partnerships.

✓ **PAYER & EMPLOYER STRATEGIES**

Providers must cultivate direct partnerships with payers and employers on value-based payments for maternal care to reduce variation in costs, improve outcomes, and enhance patient experience.

**ECG WORKS WITH WOMEN'S HEALTHCARE PROVIDERS** to evaluate, design, and implement successful strategies for high-functioning and sustainable performance.



## CASE STUDIES



### CREATING A STRATEGIC ROADMAP FOR OB/GYN SERVICES

ECG assisted with a multifaceted OB/GYN project that included strategic planning, a physician practice assessment, and service line business planning.

**INTERVIEWED** health system and community stakeholders

**COMPLETED** a situational assessment

**DEVELOPED** specific strategies and tactics to grow program volume and market share

**ANALYZED** the financial impact of strategic scenarios



### BUSINESS PLANNING FOR A CONTINENCE CENTER

ECG was engaged to work with physicians and administrators to understand the challenges and opportunities of developing a continence center and the potential scope of services.

**DETERMINED** that continence centers are a high-volume, revenue-driving service for an underserved demographic

**PROJECTED** a positive net income in year one, with an annual net income of \$3.5 million when operating at capacity

**ACHIEVED** a positive cash flow in year two, with an NPV of \$10 million on a total capital investment of \$800,000



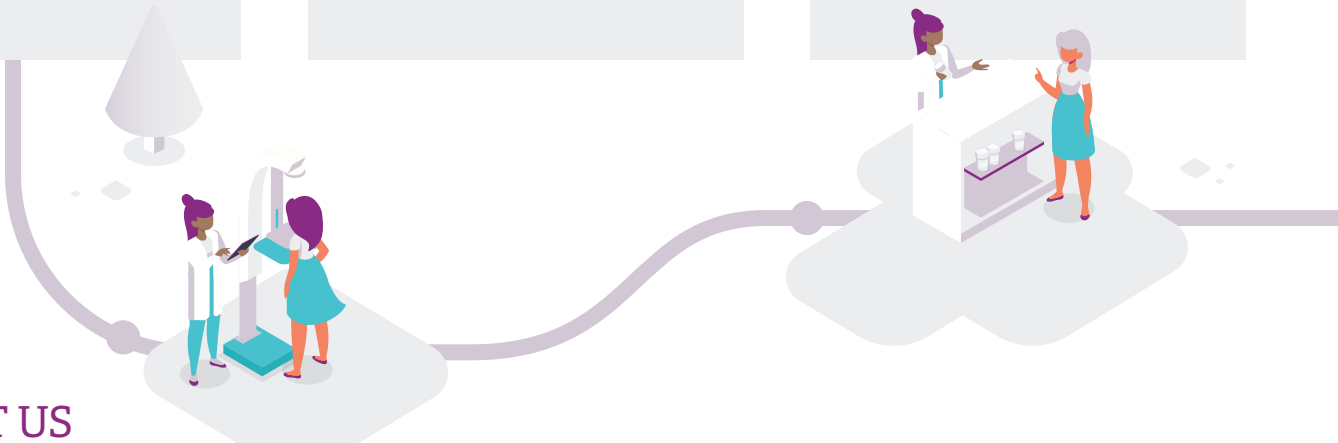
### COMPENSATION PLANNING FOR AFFILIATED OB/GYN GROUPS

ECG supported compensation negotiations between EvergreenHealth and two OB/GYN groups that covered all OB hospitalist and on-call functions for the health system.

**EDUCATED** physician and administrative leaders on best practices for OB/GYN compensation

**DEVELOPED** a compensation structure that maintained individual production incentives while establishing baseline expectations and recognition

**INCORPORATED** the cultural considerations of the community when developing the call coverage model.



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