Baton Rouge Area Health Network (2010-Present)

The Client:
Our Lady of the Lake Medical Center | Baton Rouge, Louisiana

The Challenge:
In early 2011, Our Lady of the Lake Medical Center (OLOL), the largest private health care system serving the Baton Rouge, Louisiana area, engaged Health Management Associates (HMA) to facilitate a collaboration with Louisiana State University (LSU), which operates the state’s expansive public hospital system. The task was to develop a model for an integrated delivery system to serve the Medicaid and uninsured populations of the eight-parish region. Spurred by the six storms that had hit the area over the past five years and had significantly impacted the delivery of health care services, these two systems had come together and agreed to merge resources. The LSU system was slated to close its inpatient and emergency services in 2013—to be picked up by OLOL—and committed to significantly expanding outpatient resources. The two systems would integrate their training programs and would, together, reach out to the major provider of mental health services to develop a collaborative model that joined medical and behavioral health services to effectively serve this population.

The Approach:
After extensive review of utilization data and individual interviews with all key players (particularly front line providers, who would be the essential participants in this collaboration), HMA developed an implementation plan for an integrated delivery system (initially named the Baton Rouge Area Health Network). The plan addressed the organization of care, the clinical model of care between the two systems (including affiliated physician groups), the mental health provider, the local PACE program and senior services, and school-based programs. HMA also worked with the two systems to develop an innovative Graduate Medical Education curriculum focused on the training of new providers within an integrated delivery system environment. HMA also assisted OLOL in developing a financial model with the State of Louisiana that allowed them to take on this new volume of uninsured and Medicaid patients.

The Results:
The full organizational structure proposed for BRAHN was not fully implemented, due in large part to the dramatic changes in the LSU system imposed by the State. However, OLOL did implement much of the model of care collaborations; in fact, the model is being replicated in other areas of the state.

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