

# How's That Strategic Plan Going?

 [openminds.com/market-intelligence/executive-briefings/how-s-that-strategic-plan-going](https://openminds.com/market-intelligence/executive-briefings/how-s-that-strategic-plan-going)

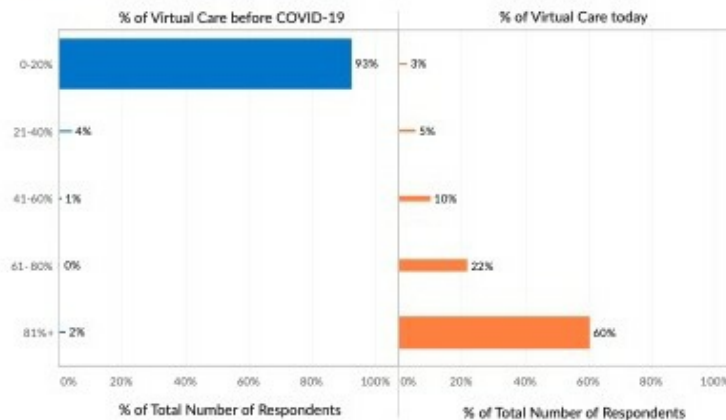
---

I participated in a thought-provoking session today—[So, How's That 2020 Strategic Plan Going? A Roundtable Discussion About the Current Behavioral Health Environment](#)—on the challenges of planning in the midst of the extended arc of this pandemic. At the end of the session, I was thinking about the admonition on the bottom of the monument to the First Massachusetts Sharpshooters (my personal favorite) on the Gettysburg National Military Park: “*In God we put our trust but kept our powder dry.*” Executives need to be prepared to act as and when needed and right now, it is hard to tell what and when that is.

The session, “So, How's That 2020 Strategic Plan Going” provided some great perspectives from the field—Brad Howell, chief executive officer of Fidelity House, Yvette Bairan, chief executive officer of Astor Services, Paul Curtis, executive director of the California Council of Community Behavioral Health Agencies, Greg Wellems, executive director of intellectual disability services at Keystone Human Services. Jeff Silverman, chief marketing and sales officer of Qualifacts and the session moderator, opened with the results of a new national survey conducted by Qualifacts and the National Council For Behavioral Health. Some key takeaways—an estimated 60% of behavioral health services are being delivered virtually right now and 64% of provider organization executives reported a decrease in revenue due to the pandemic. And, 70% of responding executives believe that a large proportion of services will continue to be virtual after the pandemic ends. However, executives identified the need for state and federal regulatory changes to allow services to continue to be delivered by video and audio platforms with the expanded definition of eligible consumer locations.

## The Rise Of Virtual Care

% of Care Provided Virtually



***More than 80% of providers' care is being delivered virtually more than 60% of the time***

That uncertainty about both the arc and length of the pandemic, its short-term and long-term economic effects, and the long-term “post-crisis” model for service financing and delivery dominated the discussion. A key question—how should executives prioritize their time in the midst of the turbulence? There were three action items that were mentioned across the board. First, survival planning—managing safety, operations, cash flow, margins, and expenses. Second, having a longer-term recovery plan for the “most likely” scenario. And third, focusing on day-to-day management to communicate and implement both plans—assuring that the team has what they need to move ahead.

When discussing the transition to crisis management, Mr. Howell noted, “Our role as managers shifted to PPE hunters and gatherers.” Much of this discussion was about technology and virtual services in the transition. Mr. Wellems discussed how their technology focus has been on point of care—they purchased and deployed over 1,000 iPads over the past few months. Ms. Bairan talked about the challenges of “going remote” with more than 800 employees in a week. At Fidelity House, consumers in group homes are making good use of the iPads the organization had bought for them prior to the pandemic to keep in touch with their friends and family. “We should have done that before,” said Mr. Howell. He also had a tip for managing consumer engagement during the pandemic—send “virtual activity kits” to consumers to complement the online communication in their virtual day programs.

As the conversation shifted to managing for the long-term, panelists discussed five key elements in the post-pandemic “new normal”:

- More consumers in managed care with more of the spend in value-based reimbursement (VBR) contracts—including health plans, health systems, and other provider organizations.
- An evolution from all virtual to “hybrid” service delivery models that combine digital and face-to-face services (with much home-based face-to-face service).
- An increase in “integrated” care coordination models that corresponds with the increase in VBR.
- An organizational focus on service portfolios—selective service line offerings to maintain sustainability and promote growth.
- More consolidation of organizations, driven by the need for capital to assume financial risk and invest in technology.

We agreed that the exact future model will be shaped by decisions made by the federal and state government, as well as evolving economic conditions. One issue is what do the stakeholders want. Mr. Silverman shared from the recent Qualifacts survey, only 24% of clinical professionals preferred providing service virtually—the rest want to return to traditional face-to-face service delivery. However, that may not be a view shared by consumers. Mr. Wellems says they are finding that consumers don’t want to return to traditional day services and want a “new normal.”

Whatever the model, technology is going to be an increasingly important element in service delivery and organizational sustainability. Mr. Silverman noted that only 40% of provider organizations responding to the survey thought their electronic health record is suitable for virtual care in the long term. Mr. Wellems anticipates using more telehealth for medical services in group homes in the future and making better use of remote monitoring. But he pointed out that they may need different tech functionality in the future. They need real-time data transfer and an investment in business intelligence to make data actionable for shaping strategy.

Executives agreed that the final decisions about reimbursement and rules—from government and from health plans—are going to shape the scenarios for long-term provider organization strategy. Mr. Curtis emphasized the need to plan for many scenarios based on those decisions. At this point, with so many unknowns, revenue projections for shaping future plans are all over the map. Mr. Silverman reiterated that executives need to be nimble. And I thought Mr. Howell said it best, “Our reimbursement is changing daily. Strategic planning right now is like strategic adaptation—we’re making it up as we go...”

For more on strategic planning, check out the recent issue of the *OPEN MINDS* Management Newsletter, [Creating A Strategy For Recovery: The New Strategic Planning Best Practices](#). And, sign up now for The 2020 *OPEN MINDS* Management Best Practices Institute, that takes place virtually, August 24 through 26. Focused on best practice tools that executive teams need to plan for and manage to strategic recovery and sustainability, the Institute features [30+ sessions](#) including:

- Telehealth – What Will The Payers Change Post-COVID-19? Let's Ask Them
- The Path From Behavioral Health Carve-Out To Integration
- Best Practice Models For Collaborative Care: Coordination Between Health Plans & Provider Organizations
- Portfolio Management & Service Line Development For Sustainability
- Lack Of Access To Care & Care Continuity Challenges: How Providers & Payers Are Addressing
- Making It Painless! Best Practice Models For Streamlining Authorizations & Continued Stay Reviews
- Making Tough Decisions In Turbulent Times: 12 Steps To Creating Your Data-Driven Organization
- Financial Forecasting Models For Fee For Service, Case Rates & New Service Lines
- The New CFO Challenge: An *OPEN MINDS* Seminar On Becoming Your Organization's Strategic Leader In A Changing Market
- Aligning Your Board To The New Sustainability Challenge: An *OPEN MINDS* Seminar On Non-Profit Management

And for even more, join us on September 10 at 1:00 pm EDT for the executive web forum, Marketing Planning For Sustainability In A Post-Disruption Marketplace, led by *OPEN MINDS* Senior Associate Paul M. Duck.

---

*Tagged As:*