

WHITEPAPER

Creating a successful physician enterprise in academic health systems

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Many academic medical centers (AMCs) have evolved into academic health systems (AHSs) by building or joining large delivery systems to ensure their continued access to patients, teaching settings and a leadership role in their market. Many of these AHSs now employ growing numbers of full-time clinicians alongside their traditional faculty physicians, most of whom are part-time clinicians. While some of these full-time clinicians have faculty appointments, the vast majority have limited involvement in education or research and no expectation for meaningful scholarly contributions.

Most of these AHSs aspire to organize the practices of the academic faculty and the employed full-time clinicians into a unified physician enterprise that enables the organization's overall strategy and provides patients with a consistent care experience across the system. Realizing this aspiration can be challenging as organizational dynamics, history, and structural constraints often impede the integration of the AHS's clinical workforce into a unified practice. This paper explores the approaches and lessons learned from assisting numerous organizations in building physician enterprises that support the journey from AMC to market-leading AHS.

When structured well, AHSs have the opportunity to create powerful physician enterprises that help them successfully fulfill their missions and strategic vision.

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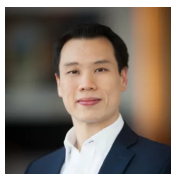
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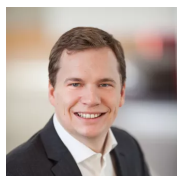
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