We are celebrating Stratis Health's 50th anniversary this year, a golden (!) opportunity to reflect on the past and set our sights on the future as an organization leading collaboration and innovation to improve health.

A little history — our organization was established as the Foundation for Health Care Evaluation in 1971. The name changed to Stratis Health when the Health Outcomes Institute merged into the organization in 1997. Our work in the early decades focused on quality assurance. As the field of health care quality advanced to embrace quality improvement and patient safety science and tools, so did Stratis Health. With each passing year, we deepen our commitment to improving health and health care.

The results-driven culture, combined with a deep commitment to trustworthiness and integrity, Stratis Health’s hallmarks, sit solidly on the shoulders of those who have guided the organization and implemented our work for the past five decades — our Board members and staff. We have a tradition of strong leadership on our Board of Directors — these leaders come not only from health care, but from public health, community-based organizations, industry, and the consumer market.

We have deep gratitude for how wisely and generously our Board members have shared their time and expertise to set strategy, open doors, and broaden our network, and serve as stewards of our mission and nonprofit status. Our staff members are and always have been our single greatest organizational asset for all 50 years. The expertise, relationships, and commitment to our work have

(Remaining True... continued on page 2)
Remaining True to our Mission for 50 Years (Continued)

Jennifer P. Lundblad, PhD, MBA
Stratis Health

How Costs Have Changed in the US Over 50 Years*

When Stratis Health launched, milk was $1.32/gallon, eggs were $0.60/dozen, a loaf of bread was $0.70, and bacon was $0.90/lb. But changes in health care costs are eye-popping:

- On a per-capita basis, health care spending has increased over 31-fold, from $353 per person to $12,118.
- National health expenditure as a percent of GDP has leapt from 6.9%, to 18% — the highest among developed countries.
- Largely driven by specialty drugs, prescription drug expenditure has vaulted from $5.5B to $358.7B.
- Medicare spending has jumped from $7.5B to $858.5B or 21% of total national health expenditure.
- Medicaid spending has also soared — from $5.1B to $359.6B.

* 1970-2020; Source Statista

Implementation Science: The scientific study of methods to promote the systematic uptake of research findings and other evidence-based practices into routine practice to improve the quality and effectiveness of health services.

been extraordinary. Many have heard me say what a joy it is to serve as Stratis Health’s CEO because of the colleagues with whom I have the privilege of working!

It is impossible to commemorate our 50th anniversary without proudly celebrating our accomplishments in improving the health and care of seniors. Our service as a federally designated Medicare quality improvement organization is the single most longstanding of our programs and coincides with our founding in 1971. The program and the federal agency sponsoring it have both had different names over the years (does anyone remember the Health Care Financing Administration, or HCFA?), but the purpose has been constant — to improve the quality of care for Medicare beneficiaries. Today, we carry out Medicare’s quality improvement programs through Superior Health Quality Alliance, the joint venture we formed in 2018 with partner organizations, which we fondly describe now as “the power of eight.”

As I reflect on what Stratis Health is today and as we look to the future, our biggest shift in recent years has been that community has become our unit of action in so much of our work. We are trying to break down the silos of care delivery, and we are building bridges between health care and community. As a result, we are right in the thick of addressing social needs; the only way to create equitable and sustainable health improvement in the communities we are serving.

And today, those communities are nationwide. While Minnesota remains home base for us and is the health care and partner community with whom we are deeply connected, our portfolio of improvement initiatives has us working nationally, with more than half of our programs in other parts of the country.

Lastly, as we have sharpened our focus, we have incorporated an implementation science approach into our work enabling us to solve complex problems and bring promising practices to scale. The investment we have made in understanding and integrating implementation science is powerful and complements our quality improvement science, together putting us on the leading edge of health improvement.

We remain true to our mission and do so by embracing new and emerging improvement methodologies and deepening our work to bridge health care and community. Here’s to making lives better for the next 50 years! ☺
Podcast Conversation Sparks Reflections on the Past and Future of Stratis Health

One way Stratis Health is celebrating 50 years of advancing health care quality improvement and patient safety is through a series of podcasts featuring Jennifer Lundblad and a variety of remarkable health care influencers. Released earlier this year, the first podcast brings together Dale Thompson, former Board member and chair and former president & CEO of Benedictine Health System, and Kelly Fluharty, care transformation manager for Winona Health. This Q&A is an expanded version of the podcast, available at stratishealth.org/50th-anniversary-podcast-series/.

Q. Jennifer: I'm delighted to welcome two extraordinary leaders to the conversation today focused on the evolution and future of Stratis Health. Dale Thompson and Kelly Fluharty are teaming up to share retrospective and prospective views of Stratis Health's mission and work. Would you each share what drew you to Stratis Health and service on our Board?

A. Dale: Our organization was in the midst trying to get to a different place with quality in the long-term care sector. I was aware of the good work Stratis was doing in quality and it proved to be true. When we learned how you collaborate with all kinds of organizations, I was happily surprised how Stratis Health was continuously evolving to help organizations improve by tapping through their quality improvement bench strength.

Kelly: My first introduction to Stratis Health was several years ago when Winona Health was working its way into value-based contracting and ACO integrated health partnerships were brand new. We needed some guidance on how to get this work underway, so we engaged with Stratis Health to gain access to regional and national best practices on a wide range of care transformation activities.

Q. Jennifer: Dale, as you reflect on your prior Board leadership role at Stratis Health, what observations and insights can you share about the evolution of the organization during your time of service?

A. Dale: It was clear there was a concerted effort to evolve as a strong resource for quality and I felt very good about that. The countless other day-to-day things Stratis Health is involved with are certainly worth noting as well. But with my bias toward long-term care, what really struck me was the organization was leading the way to support quality improvement across the entire health care continuum through rich data and information, along with training and education.

Q. Jennifer: Let’s fast forward to today. Kelly, as a current board member what excites you about the organization’s direction?

A. Kelly: The active learning and sharing long-held and emerging ideas through continuously expanding connections is spectacular. In looking to the future, one of the things I have loved watching over this past difficult year is how incredibly adaptable and agile Stratis Health has been.

The pandemic has laid bare the tremendous health inequities in our health care system. Stratis Health is doubling down on efforts to advance the conversation about social determinants of health, with health inequities at the core of its Transformation Framework. Your recent work in supporting, learning about, and disseminating the Pathways Community Hub Model in Minnesota is a big deal. This model shows incredible promise for truly addressing deep health inequities in the community, finding a way to accelerate the rollout of evidence-based practices that is sustainable for community care coordination.

Q. Jennifer: I think about the fact that our work must always be at the leading edge of improvement methodologies and responsive to what’s going on in the communities that we’re serving and supporting as a nonprofit organization. From your perspectives and experiences, how does Stratis Health fulfill its mission in continually changing ways?

(Podcast Conversations continued on page 4)
A. Kelly: I see Stratis Health as ahead of the curve. A lot of the work we’re discussing today was underway prior to COVID-19, but I see an organization comprised of learners who are continually absorbing new information, then applying it to the various organizational activities and initiatives. Having health and equity at the center of processes and threading that through all the work you do is critical to success.

Q. Jennifer: Dale same question to you. As you reflect on your time in a leadership role setting our vision and direction from the Board and the Board chair seats, how do you think about Stratis Health continually evolving to meet our mission in the community?

A. Dale: My observation is the importance of keeping the Stratis Health core values in front of you. They are so well reflected in your work. For example, true collaboration is a rare and real strength. Many people claim to be collaborative, but they don't make very good partners and nothing much happens. This certainly does not hold true for Stratis Health. The partnerships you have had in the past and today are authentic.

The other thing I've always felt coming to Board meetings, seeing your people, is that Stratis Health is a snappy place to be — it's full of energy and commitment and these are not things to be taken for granted. A lot of organizations have a strong mission, but it doesn't go anywhere, because there isn't the energy or true commitment to meaningful core values.

Q. Jennifer: In 2021 we are celebrating our 50th anniversary coming on the heels of one of the most difficult years across the board, but especially in health care and improving health. It has been a year of profound challenges and changes and we still have a tough path in front of us. How has the importance of the Stratis Health mission and work been magnified if you think about all that's happened since March of last year?

A. Dale: We're now beyond a half million people having died from COVID, and nearly one-third are linked to nursing homes. In a very personal and painful way, people have watched parents, grandparents, spouses, and other loved ones die alone. I predict that's going to draw Stratis Health into some significant changes.

Stratis Health Core Values

- In all interactions and decisions, we are committed to quality, defined as excellence in execution; respect defined as being fair and inclusive; and integrity, defined as being honest and transparent.
- Our staff emphasizes collaboration — teamwork and partnership — in all relationships.
- We aspire to be an organization where staff is continually learning, optimistic, and having fun while delivering high-quality work.

The opportunity might lie in becoming immersed with those leaders in quality who are dealing with things like infection control and with other issues about managing infectious diseases. Your organization has the expertise and the data and you're not afraid to harness the science of quality improvement to serve as a catalyst for long overdue change.

Q. Jennifer: As you reflect on this last year of profound challenges and changes, how has the importance of Stratis Health’s work and mission been magnified from your perspective?

A. Kelly: I always return to your bold tagline, “making lives better.” How do we do that? There’s so much involved in terms of quality and health equity and Stratis is involved in many different areas that are truly making that happen on so many fronts.

Jennifer: Thank you so much for joining me today for helping us celebrate the 50th anniversary of Stratis Health and for contributing to making lives better.
Celebrating the Power of Teamwork

Staff members with longest and shortest tenure share what makes Stratis Health a great place to work

Alberta Albright
Financial/Payroll Clerk for 30+ years

Despite having opposite types of jobs — one internally focused, the other externally focused — comparing notes about what drew us to Stratis Health and what makes it a great place to work led to a consistent theme: Trust and integrity are an integral part of the culture.

Alberta’s Story
Over 30 years ago, I joined Stratis Health as a file clerk before I moved into the Finance Department. Stratis Health was known as the Foundation for Health Care Evaluation, overseeing the quality of care delivered to Medicare patients. We served as a Professional Standards Review Organization for Medicare (part of HCFA). A big shift happened in the early ‘90s when HCFA introduced the Health Quality Improvement Program, adding a program with hospitals and physicians to improve the quality of providing care in addition to the quality assurance case review function.

When the Foundation became Stratis Health in 1997, merging with Health Outcomes Institute, it meant we were gaining relationships with managed care organizations and employer groups nationwide. That really changed the volume and type of work.

We had been doing case review and receiving paper copies of medical records, but the world was changing fast. Our finance and IT teams began to automate things and help providers get information and payments in real-time, rather than quarterly. The Stratis Health team has kept creating solutions that solve small problems before they become big ones. Once a problem has been solved, we move on with our work and do not always remember the volume of resolved issues. But it’s good to reflect and take time to remember that every day brings a new chance to make a positive difference for others — and for the long term.

As a Stratis Health financial/payroll clerk, it’s very gratifying to know I can contribute by helping to get the bills paid, ensuring documentation is accurate, and keeping operations simplified and streamlined so my coworkers can focus on caring for the people who are counting on us to improve health care.

When I think about the past 50 years and the next 50 years, I know we will keep helping others, whether it’s a coworker, a patient, a health care professional, or anyone else in the Stratis Health network. We couldn’t have imagined the technology advances, the challenges, or the rewards that have happened, but when you have a team that supports, trusts, and believes in one another, I know the next 50 years will be just as great.

Carrie’s Story
I came to Stratis Health about four years ago as a program manager for the Partnership to Advance Tribal Health (PATH). I lived in Bemidji, MN, and I was the first employee to work remotely 100% of the time, which is just one of the ways I knew I was joining an organization that is flexible, creative, and not only accepting of alternative work arrangements, but sees the value of having an employee living in the community being served. Not long after the pandemic hit, I received handwritten notes from executive leaders thanking me for proving that remote work is possible and sometimes preferred. Having worked for large organizations, it was touching to be reminded that I’m not just a number. I matter.

Our PATH work is complex. We serve in national and local capacities as subject-matter experts, providing technical assistance in the areas of quality improvement, culture of safety expertise, and health equity. In addition, we provide analytic support for facility level and IHS-wide data and develop and facilitate national leadership learning and action network sessions where hospitals learn and practice leadership skills, share experiences, and build relationships across IHS facilities. There is simply nothing better than having purpose-driven work, combined with being part of a team where each member is valued for the role they play and for their contributions.

It’s a privilege to work for Stratis Health. As I think about how we will be making lives better for the next 50 years, I would like to see Stratis Health continue to grow and expand its services nationally to improve and sustain change in health care by closing the gaps between health care and community.
Social Determinants of Health: Agile, Continuously Responsive to Changing Needs

people and communities. They work on a number of initiatives to strengthen partnerships between health care and community organizations, reduce inequities, and harness data to uncover additional services or capacity that may be missing.

As an example, based on a Community Health Needs Assessment in Duluth, MN, Stratis Health helped the community evaluate e-referral platforms that would support the need to identify social needs through screening and designing closed-loop referral processes and workflows to assure patient needs are met.

Stratis Health also recently completed a comprehensive redesign of its Culture Care Connection online learning and resource center, with the support and partnership of UCare. The goal is to support clinical and non-clinical health professionals with tools and resources to build awareness skills and encourage action to help them be responsive to and supportive of the diverse patients and communities they serve.

UCare is excited to strengthen our partnership with Stratis Health as we continue to advance health and racial equity for our members and communities,” said Pleasant Radford, Jr., health equity officer at UCare.
What are Social Determinants of Health?

Social determinants of health (SDOH) are the conditions in the environments where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks.

SDOH can be grouped into 5 domains:

- **Education Access and Quality**
- **Social and Community Context**
- **Health Care Access and Quality**
- **Economic Stability**
- **Neighborhood and Built Environment**

Source: U.S. Department of Health and Human Services Healthy People 2030

Improving the Health of Communities, Organizations, and Systems

**Stratis Health Areas of Expertise:**

- **Strengthening Organizational Capacity:** We build organizations’ critical infrastructure to deliver valued services to patients and communities.
- **Redesigning Care Delivery:** We help conceive and design health care delivery in ways that not only result in better outcomes, but in improved efficiency and value.
- **Building Community Capacity:** We leverage health care and community resources to expand capacity and deliver increased quality health services.

“By ensuring the health care community has easy access to leading tools and resources through Culture Care Connection, we are living our mission to always go the extra mile to help our members,” said Monica Gossett, community outreach manager for UCare. “Helping those on the front lines of health care take action and stay current about health equity, disparities, anti-racism, and related topics helps them deliver the best possible patient care and helps patients achieve their best possible health.”

Culture Care Connection also offers a special focus on cultural responsiveness, which is the ability to recognize and understand the role culture plays in health care and adapt care strategies to meet patient needs. A growing library of Diversity in Minnesota Information Sheets enables health care workers to learn more about the background, religious and cultural beliefs, communication preferences, and prevalent health issues of people who commonly face health care access challenges.

“Understanding the role culture plays in health care is very important; still, each patient’s preferences, practices, and health outcomes are shaped by many factors,” said Sarah Brinkman, program manager at Stratis Health. “That’s why adopting a patient-centered care approach is essential. The curated materials on Culture Care Connection support clinicians and organizations to ensure patients are engaged, understand their care plans, and are at the center of all care decisions.”

“The refreshed Culture Care Connection site offers tools, resources, and training for health care professionals that simultaneously tackle inequitable care and biases and improve patient and community health.”

Numerous studies show that health care professionals are prone to implicit biases, which can impact clinician-patient interactions. Clinicians may provide the same information to all patients about treatment choices, risks, and outcomes, but nonverbal cues can counter efforts to display empathy or build rapport. Patient behavior and decisions are affected when they perceive clinician bias. For example, bias can change a patient’s behavior, resulting in higher treatment dropout, lower participation in screenings, delays in filling prescriptions, poorer perception of care quality, avoidance of health care, and ultimately, worse health outcomes.

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Source: U.S. Department of Health and Human Services Healthy People 2030
We are pleased to welcome incoming Board members Reuben Moore, and Todd Stivland. Reuben is president & executive officer of Minnesota Community Care; Todd is CEO and founder of Bluestone Physician Services. Meet all our Board members at stratishealth.org.

You are invited to “sign” our virtual 50th anniversary video guest book! Be a part of our growing history by recording a message. It could be a favorite Stratis Health memory, a shout-out to a favorite staff member, or an anniversary greeting. If you’re camera shy, simply pop a Post-It note over your lens.

Mini podcasts are under way! A series of brief podcasts celebrating Stratis Health’s 50th anniversary is being posted to the website. Check out “The Evolution – and Future – of Stratis Health,” and “Addressing Social Determinants of Health to Improve Health Equity.”

A gift to strengthen our home community: Stratis Health has made a $10,000 contribution to the Center for Economic Inclusion. Amid the pandemic and the racial justice crisis, the Stratis Health Board of Directors voted to redirect its 2021 Building Healthier Communities grant program to a one-time gift to an organization dedicated to promoting social justice in our home community.

Updated rural palliative care toolkit makes its debut: Stratis Health recently wrapped up the latest three-year project supporting the development of rural community-based palliative care teams and services across three states and to build foundational resources. The new resources can be found on the lower right of this page on our website.