

What's Your Moonshot? Podcast Series

Featuring Luis Garcia, President, RUSH Medical Group

[00:00:00] Narrator: Welcome to A&M Healthcare Industry Group's What's Your Moonshot podcast series where leaders seek to solve big problems and transform healthcare. Join us for conversations to hear how their vision and bold moonshots are becoming reality.

[00:00:33] Narrator: Welcome to A&M's What's Your Moonshot podcast. I'm joined by the Honorable Dr. David Shulkin, ninth Secretary of the U.S. Department of Veterans Affairs and Senior Advisor to A&M, as well as Chris Smedley, Managing Director of A&M's Healthcare Industry Group. Today we're interviewing Dr. Luis Garcia, M.D., FACS, FACHE, President of Rush Medical Group.

[00:01:12] Chris Smedley: So today we'd like to talk with you a little bit about the journey from being a physician to an administrative leader and really how that's transcended and a little bit about your moonshot relating to that. So if you could share a little bit of information that would be great.

[00:01:30] Dr. Luis Garcia: Yeah, Chris, Dr. Shulkin, thank you for the invitation. It's a great honor to be here with you and thank you also for giving me the opportunity to talk a little bit about my journey. And Chris, if you would have asked me 30 years ago if I would have been in the position that I hold today, I probably would have never guessed that. You know, it's been an interesting journey. If you allow me just to briefly talk a little bit about that and how I got where I'm at and then what's my moonshot. I was born and raised in Mexico City. I was the second child. My father is a surgeon. My mother administers a very small community hospital that my father owns and it's in a very poor area of Mexico City. So I grew up learning about medicine but also learning about service.

[00:02:27] Dr. Luis Garcia: And just so happened that my father was such a powerful figure in the community that as I was trying to find myself and what was my journey in life and in medicine, I needed to go out. I finished medical school at LaSalle University in Mexico City. I did my last year of medical school at the University of Miami, and that allowed me to have an opportunity to apply for general surgery residency in the United States. So I ended up training at the University of North Dakota for general surgery.

[00:02:55] Dr. Luis Garcia: Subsequently I did a fellowship in bariatric surgery in Pittsburgh. And the first three years of my career had to be in a rural area because of my immigration status. I had to transition from a J1 to an H-1B visa that would allow me to eventually become a citizen. And that required that I spend three years in a very rural setting in North Dakota. So I was for three years in Valley City, North Dakota. I had to mature very fast as a surgeon, you know, because I was by myself. But it also gave me the ability to understand a lot about leadership too and how I needed to equip myself to be relevant into the future.

[00:03:37] Dr. Luis Garcia: One of the things that we don't know is that as physicians we come out very well educated on clinical aspects but we don't know a lot about the business of medicine. We don't know a lot about leadership. And after that I joined Sanford Health in Fargo, North Dakota. I spent all my career with Sanford, about 28 years. I became the division chief of bariatric surgery. I had a lot of leadership opportunities there. Eventually I became the president of the medical group for Sanford. You know, this was about 2018. A large group of 3,000 physicians across five states. A phenomenal experience. And that allowed me to eventually transition to Chicago now to be the president of the Rush Medical Group.

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[00:04:27] Dr. Luis Garcia: And you know, Chris, I feel privileged. I hold a position of influence. And with that privilege also comes a lot of responsibility. And I feel that my ultimate responsibility with the opportunities that I've been given is to one: create the environment for every clinician to be successful and be able to work at the top of their license and deliver on that promise that we have for our patients. And secondly, how do we train the next generation of physicians to follow our path? You know, only 25% of the executive leadership positions in this country are right now occupied by physicians and we need more of that talent.

[00:05:17] Chris Smedley: Great. Well, Dr. Garcia, that's an amazing story. It's the true American story coming to this country and finding your way and building yourself really the whole way through just by hard work. And you know, it's almost like there should be a movie, you know, and so we can't wait to see what the rest of the script holds for you because I think you're just getting going here in Chicago. But usually in somebody's story, you talked about your dad. He clearly was a big influence and probably your mom too in you thinking about service and mission and getting the right healthcare to people. But once you got to the United States and you started as a surgeon and then you transitioned into leadership and into an executive role, was there a defining moment? Was there somebody that you look back and you say, "They really influenced me or there was something that happened to you that said, I think I want to head in this direction."

[00:06:22] Dr. Luis Garcia: Without a question, Dr. Shulkin, and sometimes things happen like that in life, right, where you prepare yourself in that transition from Valley City to Fargo, North Dakota. I wanted to learn more about medicine and I did an MBA. So shortly after my transition to Fargo, the division chief of bariatric surgery steps down and at the same time the coordinator of the program steps down. And this is at the time in which bariatric surgery there were a lot of questions about whether it should happen or not. What are the complications? What is the long-term effect of having patients go through such invasive surgeries? So there was a lot of interrogation in the industry whether that needed to happen—center of excellence accreditations and all that.

[00:07:21] Dr. Luis Garcia: So the chair of surgery approaches me and says, "Hey Luis, would you like to become the division chief?" Now what that meant is that I was going to inherit a good program but that had a lot of opportunity. But it also meant that my previous boss now was going to report to me. So in my exploration of that, I was very clear that what we needed to do is make that program a top decile program in the nation because it was the most important program in the region. But what that meant is that we needed to change a lot of the structural aspects of the program. A lot of the pathways of care the way we were interacting with our patients was very siloed. You needed to go from building to building. The dieticians were not talking with the psychologist with the surgeons. The outcomes were good but average.

[00:08:17] Dr. Luis Garcia: So setting the vision of we want to be top decile. We want to change the whole structure of the program. And then also it required to build the right team. And when I said the right team, it's not only finding the right talent, but the right talent that were willing to engage with the vision and to work as a team. And it reminds me a little bit of the movie *Miracle*, you know, *Miracle on Ice*, which if you think about it, the coach at the time had the vision that he needed to build a team to beat the Russians. You know, the Russians at the time were a team that had not been beat in

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decades. And the Olympics in Lake Placid were coming and he knew who his people were, but they were not the stars in the college teams. He had to address a lot of animosity against his choices of who the right team was. But he's like, you know, I want the team that is going to be able to work together to beat the Soviet Union. And they got the gold medal after beating the Russians in the semi-final.

[00:09:25] Dr. Luis Garcia: We did the same in Sanford. We got the gold medal. Eventually we got the program to be top decile. But I needed that team and eventually we created this, what is called now the Eating Disorders and Weight Management Center, that is a very comprehensive holistic approach of everybody that comes not only with problems with obesity but eating disorders and feeding disorders. And in these feeding disorders and eating disorders issues, they have become now a national referral center. So it's just one of those proud moments in my life as president of the Rush Medical Group.

[00:10:03] Chris Smedley: Now you have an opportunity to help really train many of the future leaders in healthcare. And based on what you described earlier, there's a real passion that you have in terms of helping physicians navigate in their careers to other leadership roles, which I think there's an underlying theme in there of the challenges in healthcare today. Physicians may very well be the magic ingredient or component of it that helps us navigate through some of these real challenges and hurdles. I'm curious a little bit about your thoughts or your philosophy around organizations being physician-led and knowing all the challenges that you face in your role every day. What gets you out of bed to tackle those and how do we solve this complex dilemma with physicians being a more integral part of it?

[00:10:56] Dr. Luis Garcia: Yeah, thanks for that question, Chris. Let me just share a story with you. When it was announced that I was going to become the president of a medical group for Sanford, I remember one day coming into the doctor's lounge after I was still doing surgery full-time. I came into the doctor's lounge and a good friend of mine, that was another surgeon that we have known each other for 20 years, he looks at me and says, "Oh, so now you're on the dark side of the system." And I'm going to be honest, it hurt. That comment hurt. And I took it personal. And it took me a little bit to understand that his comments were not personal. He was not attacking my persona. He was highlighting a perception of administration versus clinicians, you know.

[00:11:48] Dr. Luis Garcia: And I think the way it is right now is that there's a divide, a big wall that divides what is an administrative duty in healthcare and what is a clinical duty. And unfortunately that wall right now is populated with a lot of mistrust and a lot of miscommunication and a lot of lack of clarity. So the way it should be in my opinion is to get to your question about clinician-led organizations. You have to be able to collaborate. You take a collaborative approach across a difficult challenge, getting the perspective of clinician leaders, getting the perspective of executive leaders, getting the perspective of administration. And what I found as I transition into executive leadership is that there's tremendous talent. There's tremendous talent and there are also great people that want exactly the same things that we want as physicians.

[00:12:53] Dr. Luis Garcia: So the problem is not the lack of intentionality or the lack of alignment. The problem is the lack of communication and the lack of understanding from each other. So one of the things that we're trying to do, for example at Rush, is precisely contribute to resolving that problem by further educating our clinician leaders

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in a more robust way. We have right now a health system management masters that follows a model, and by the way I'm faculty there and I'm honored to be faculty there. But it follows a model what we call the "teacher practitioner model" where you obviously provide all the academic pieces and the theoretical pieces that would allow physician leaders to understand the business of medicine. But also you pair that with continued interaction with executive leaders that are on the front line solving problems every day. And that mix, that exposure, really has gone to identify leaders that would occupy our places in the future.

[00:14:07] Dr. Luis Garcia: Now, what gets me up every morning, Chris, I might be honest. Of course, it's the intellectual challenge of what's going to come next because there's no easy day in healthcare right now. But it is also the fact that we are in the most beautiful profession. The most beautiful profession. I get to interact with what I call caregivers. Whether you are in administration or in the access center or you are a frontline clinician, we are all caregivers and everybody cares about the same outcome, which is the greatest patient care. And so that is what gets me up every morning, you know—how do we collectively identify the solutions to very complex problems in healthcare for the ultimate goal of providing excellence in patient care.

[00:15:09] Chris Smedley: You've described pretty nicely this living in both worlds—living as a clinician but also as an executive—and the challenges with that, the mistrust, the wall of mistrust that you talked about. But I think both you and I always continued to even in these executive roles continue to practice medicine. I remember you at Sanford would say, "I'm on call this weekend and I have to go and do that." What are the things that you think are an advantage to being a clinician and also a leader, but also some of the things that might be disadvantages?

[00:15:51] Dr. Luis Garcia: Yeah, that's a really good question, Dr. Shulkin. And by the way, I always feel that if you're going to try—this is just a personal bias—that if you're going to transition an executive leader, you still need to be able to understand and represent the frontline clinician. So I've made it intentional to continue to practice even if it is a small portion of your time. Now at the same time you do that you need to be honest with yourself, right, of how much can you handle and or should you handle, right. And when do you recognize your limit? I haven't done that now in 10 years and I'm not going to do it for the first time in 10 years, but I continue to practice. I was on call actually this past Friday and I cover acute care surgery for Rush and I also do some endoscopy.

[00:16:39] Dr. Luis Garcia: Now to address your question, Dr. Shulkin, I think that as physicians we have a tremendous advantage coming into leadership and if it's executive leadership, much better. So I would encourage any of our clinicians that are considering that path. It is not easy. It is challenging but is worth every minute. If you think about it, as physicians we naturally are believed to be good leaders because we have a couple of letters behind our name that emanate a lot of respect, right? But I think the key is on a couple of facts.

[00:17:18] Dr. Luis Garcia: We come in as subject matter experts very strongly in a proven world of evidence base, which is the clinical world. But the challenge is how do you prove your talent and your worth in the business side of medicine where, as I mentioned before, we have not been intentionally educated for that. And in problems

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that are much more complex than a single interaction with the patient. So that's one of the big challenges.

[00:17:49] Dr. Luis Garcia: The second challenge I think, Dr. Shulkin, is that having a title doesn't make you a leader—it makes you a manager. And as you know, there's plenty of managers that have plenty of titles that are not good leaders. And what we need is good leaders in those positions of influence. But also we need the informal leaders. We need that army of physicians that understand the issues, what I call the "rain makers"—you know, those respected clinicians that can have a difficult conversation, that can advocate for a bigger picture even if they don't have a title.

[00:18:38] Dr. Luis Garcia: So one of the things that we did in Sanford, for example, I was very interested in that topic. What is the succession planning? If I ever leave Sanford, can I declare that I have an army of people right behind me ready to take my position? But also, can we identify amongst 3,000 physicians who are those rising stars that we need to invest on so they're ready to take the next step on their journey for the sake of our organization and the sake of our patients, right?

[00:19:06] Dr. Luis Garcia: So we created something that is called the RISE program. And to my understanding the program is still up and running and it's been a great success. The RISE program—and by the way it's an acronym that the first cohort actually created—is a three-year program, much like an MBA. The first year, the cohort was about 20 to 25 people. The first year was about learning about yourself. What are your strengths? What are your weaknesses? Knowing who you are in situations of stress, how do you react and how can we make you a better leader?

[00:19:54] Dr. Luis Garcia: The second year was about learning a lot about the business of medicine—finance, HR, revenue cycle, all that stuff. And the third year was putting knowledge into action. So what we did is that we split that cohort in four or five groups and we asked them: you need to identify one challenge in the system that you are going to collectively resolve. And it was just fascinating to watch those informal leaders rise to the occasion and actually create programs and solutions for the system that is still going. And my understanding is that Sanford now is in their third cohort and it's something that I feel super proud of because it was a great team putting it together and it's living a legacy.

[00:20:43] Chris Smedley: Thank you, Dr. Garcia. I hear you saying at Rush the program you're developing—you're putting people out in the trenches to learn by doing. And many leaders would likely say so much of what they've gained over the years has been an accumulation of things that they've done well or things that maybe didn't go as well. Are there some lessons learned that you can share with others as you try to reach the broader audience here of future physician leaders—maybe an early lesson in your career that you still remember to this day and maybe even a more recent one that comes to mind?

[00:21:15] Dr. Luis Garcia: Yeah, Chris, I thank you for the question. I just want to clarify that this program that I spoke about is not my creation and it's actually a master's within one of the colleges at Rush and I just happened to participate as faculty. So I want to clarify that I don't want to take credit for something that I shouldn't. But anyway, plenty of lessons learned, Chris. And let me tell you, I've made my mistakes. I've had my bruises. Let me share with you one instance where I felt really, really bad.

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[00:21:43] Dr. Luis Garcia: So this is COVID. Think about the uncertainty around COVID. EMS at the same time was injecting all the E/M codes into the compensation model for physicians. Sanford had a very unique compensation model that had tiers. And if we were going to adopt all those new E/M codes into the compensation model, it was going to create a lot of inequality and a lot of inequity. So we made a huge assessment of do we do that or do we stay status quo. The direction was to do that because by not doing so we were going to affect many more physicians. But the problem is that by implementing the new model, we were going to affect the highest producers for Sanford.

[00:22:45] Dr. Luis Garcia: So we knew that was the right thing and we did it. The problem, Chris, is that I did it too fast. I did it with not a lot of communication and not a lot of change management associated with it. So what I learned from that experience was one: that doing the right thing all the time sometimes is not enough. Having the right solution to a problem sometimes is not enough.

[00:23:17] Dr. Luis Garcia: The second thing that I learned about was the transition from personal agency. I felt that because I had been in Sanford for 20, 30 years that the message was going to be better received. The transition from personal agency to a collective agency—knowing the problem, how is that problem going to impact or the solution to a problem impact the different stakeholders? And then who are your allies? Who are the people that are going to antagonize that? And what conversations do you need to have in advance to declaring a plan? So, and then the change management associated with that.

[00:23:53] Dr. Luis Garcia: So that was something that I don't forget and it has helped me be a better leader because let's be honest, Chris—whoever tells you that they're in this journey and they have not made mistakes, they're lying to you. You know, we all make mistakes. But I think the key is you always try to do the right thing. And even doing the right thing you're going to affect people. So know the issue, get the data in front of people, communicate properly, create the right conversations before and after. Put the right change management in place. And then even with all that, there are still some instances where things might not go your way.

[00:24:52] Dr. Luis Garcia: And in those instances, all that I promise our clinicians all the time is I'm gonna be honest with you 90% of the time. I will always be your advocate. I might be successful 90% of the time, but in those 10% of the times where I'm not successful representing you, you will know why. And I'll be honest and clear about it.

[00:25:03] Chris Smedley: Well, I think that's a great lesson in leadership and the humility that you have in acknowledging those failures is part of being a great leader. So we very much appreciate you spending the time with us today on What's Your Moonshot and we'll be watching for great things in the years ahead.

[00:25:12] Dr. Luis Garcia: Well, it's been a pleasure. Thank you, Dr. Shulkin. Thank you, Chris.

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