The Road to Population Health Management

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Speaker Introduction

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Conflict of Interest

Tone Southerland

Has no real or apparent conflicts of interest to report
Learning Objectives

• Demonstrate the value, promise, and pioneers in population health management strategies
• Identify a patient’s longitudinal clinical history and the challenges of aggregating and analyzing data to better understand what impacts health outcomes
• Discuss how interoperability certification programs, such as ConCert by HIMSS, can leverage structured data to achieve population health management
Agenda

• Population Health Management and Patient Engagement
• State of the Health IT Industry
• Certification and Conformity Assessment
• Adding It All Up
• Q&A
What is Population Health Anyway?

Conceptual framework for thinking about why some populations are healthier than others as well as the policy development, research agenda, and resource allocation that flow from this framework.

Young 1998

Includes health outcomes, patterns of health determinants, and policies and interventions that link these two.

Kindig and Stoddart 2003

The health of a population as measured by health status indicators and as influenced by social, economic, and physical environments, personal health practices, individual capacity and coping skills, human biology, early childhood development, and health services.

Dunn and Hayes 1999
Wait, Isn’t Public Health the Same Thing?

• Public Health is what society does to ensure healthy citizens (IoM 1998)

• Governments need to stabilize health of its citizens to grow strong and increase in influence
  – Need healthy people to provide labor and staff armies
  – Desire happy and healthy people

• Disease/epidemic focused
  – Quarantine measures in 14th century to control Black Death
  – Overcoming yellow fever led to completion of Panama Canal
  – Curing scurvy led to longer maritime voyages
What is Population Health Management?

Population Health + Public Health == Population Health Management

• Collecting and aggregating data
• Performing analysis on that data
• Developing action plans

So that improved clinical and financial outcomes can be realized
It is the Individual Patient That Counts

• **Individual patients** ARE the overall population and each individual matters

• You improve the **individual patient’s** health, and you improve the population’s health
What’s Your Story?

• Our 7 year old daughter hospitalized for food allergies, no solid food for 18 days
• Hospital experience
  – Getting a diagnosis
  – Care managers
  – Transitioning to home
• Your story will happen one day, if it has not already

2012  2016
Where is the Patient in the Triple Aim?

• In 2007 the Institute for Healthcare Improvement (IHI) established a simultaneous focus on three objectives with the goal to improve models of care.

• The Patient is *everywhere* in Triple Aim
  – Patients feel increased cost burden
  – Patients becoming aware of negative experiences
  – Patients are searching for better value!
Public and Private Sectors Work Together

Public sector (government) and private sector (industry) both have a role to play

• Public sector provides incentive through regulation
• Private sector may respond by:
  – building in compliance for competitive market reasons
  – Ignoring completely because the incentive is not high enough
• Finding the right incentive and modality to improve compliance is critical
Britain Public Health Act of 1875

• Public law passed but business ignored
  – People died!

• Business incentive law passed - business stop ignoring
  – People lived!
The Sequoia Project eHealth Exchange

2004 ONC Begins Development of NHIN

2007-08 NHIN Trial Implementation

2009 NHIN DURSA Published

2012 Transition to Public/Private (Healtheway)

2015 Rebranding to Sequoia Project (eHealth Exchange)
Iterating: Learning, Correcting, Moving Forward

• Question and learn from what happened!
  – Did regulation over-reach, was it ineffective? (i.e. ladder against wrong wall)
  – Did private industry build in compliance in ways end users can benefit?

• What's the path forward?
  – Does the regulation need to change? Relaxed, increased, or no change
  – Does health IT need to change? Yes, Always!

Finding the right balance ensures opportunity for private sector to justify continued work

ONC has done this well!
Realizing Population Health Management

• **Patients:** That’s you and me!

• **Family members:** We all have experienced having sick family members

• **Provider offices:** Clinicians and care teams desire improved patient health

• **Federal government:** Wants healthier population but does not want to be the primary driver to maintain status quo

• **Health IT vendors:** Invested in finding solutions for providers

• **Payers:** Want healthier patients to improve quality of care and reduce medical loss ratio
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SDOs: FDA, DICOM, HL7, IHE

Medicare, Medicaid

CCHIT

MU 2

MU 1

MACRA/QPP (MU 3)

Patient Engagement! Health Outcomes!

Trough of Disillusionment

Slope of Enlightenment

Peak of Inflated Expectations

Technology Trigger

Maturity

Visibility
The Paradigm is Shifting

- EHR roles past, present, and future
- The latest paradigm shift: REST, FHIR, Oh My!
- Engagement through apps
- Filling the gaps
Packaging to the End User

• The combination of tools (EHRs, purpose specific apps) must be packaged for end user
  – Shopping for health IT should be like buying a car, but not quite
  – Selecting options to meet specific needs

• How does this happen?
  – Industry certification
  – Market disruption (Henry Ford)
Where is PHM Tomorrow?

- Everywhere!
  - Large computer systems and networks
  - In your pocket (mobile)
  - On your wrist (watches, Fitbit)
- Integrated across all platforms
  - Large database analytics
  - Small niche apps: medication adherence, diabetes management, patient engagement
- Learning Health IT systems
  - Artificial Intelligence/Self-teaching
  - Predictive analytics
  - Natural Language Processing
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Why Certification Matters

• To ensure that standards are followed
• To set the right expectations for end users
• To ensure safety and consumer protection
• To facilitate the effective exchange of data between health IT systems
• To decrease the optionality, and increase the interoperability

So that exchange of data between health IT systems becomes commonplace and just works
Conformance and Certification
Certification Hype

- Where is health IT certification on Hype Cycle?
  - Vendor perspective
  - End user perspective
  - Patient perspective
  - Payer perspective
ConCert by HIMSS Overview

• Grounded in real market demand (the EHR|HIE Interoperability Workgroup) combined with premier HIT industry leaders (HIMSS, ICSA, Stella Tech) to promote validated interoperable solutions.

• Leverages both ISO/IEC 17025 (testing) and 17065 (certification) accreditation requirements to ensure industry recognition and program rigor.

• This comprehensive program and stamp of approval ensures market success for innovative clinical technologies supporting standards-based interoperability solutions.
ConCert Certification Programs

- **ConCert EHR**: for EHR systems providing a simplified way for providers to send secure health information directly to trusted recipients.
- **ConCert HIE**: for HIE systems that enable clinicians to share health information within and across care delivery communities.
- **ConCert HISP**: for Health Information Services Provider systems to send secure health information directly to trusted recipients, including patients.

Certification Marks signify compliance and proof that a product has all of the requirements to be interoperable with other certified ConCert by HIMSS products.
Medical Device Certification (New!) for medical devices and EHR systems to provide a standardized way to exchange programming order information and clinical information at the point of care.

Certification Marks signify compliance and proof that a product has all of the requirements to be interoperable with other certified ConCert by HIMSS products.
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Adding It All Up

Pop Health Strategies + Patient Engagement + Certification and Testing = Improved Health Outcomes
Pop Health Strategies

Improve health outcomes by…

– Giving providers the right tools
– Giving patients the right options
– Giving payers the right level of participation
Patient Engagement

Improves health outcomes by...

- Giving patients a reasonable path to self care
- Giving patients opportunities to partner with the right care providers
- Giving providers increased levels of patient “buy-in”
Certification

• Many different options right now, but market is converging
  – ConCert is complimentary to eHealth Exchange (intraoperability vs interoperability)
  – Carequality and CommonWell alignment
  – IHE Conformity Assessment
• Federal government + private industry are finding best ways to collaborate
  – ONC is very proactive: coding contest, vendors and user outreach
Questions?

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