INNOVATIVE METHODS

FOR DATA SHARING TO THE MEET CHALLENGES OF VALUE-BASED CARE

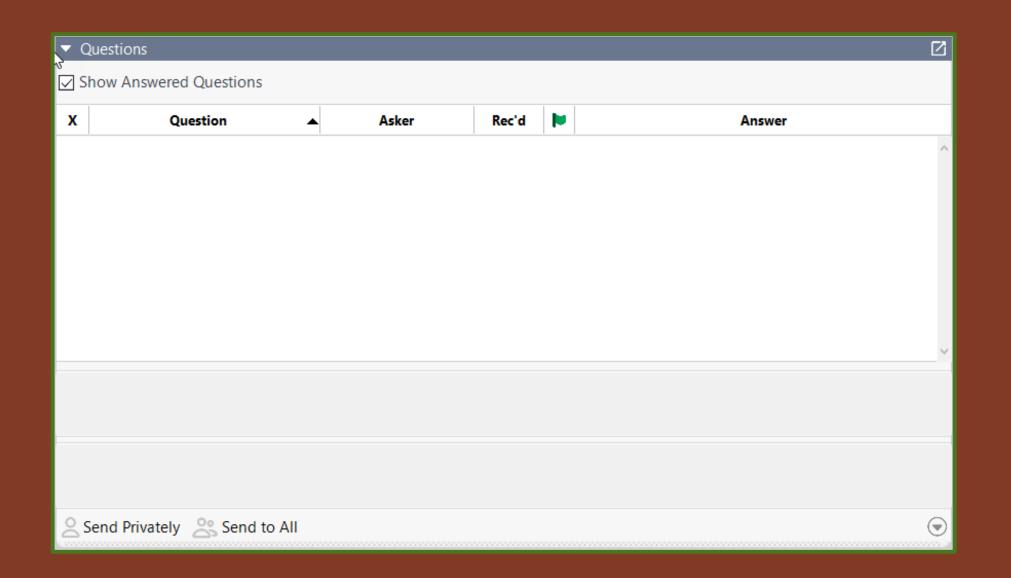
The presentation will begin shortly.

Please note that all attendees are in listen only mode.



THERE WILL BE A Q/A SESSION AT THE END OF THE WEBINAR.

Submit your questions in the webinar Questions window.
A recording of this webinar will be sent to participants.





HOSTED BY FLAACOS



Florida Association of ACOs

Florida Association of Accountable Care Organizations (FLAACOs) is the premier professional organization for accountable care organizations and healthcare leaders throughout Florida and beyond.

We are bringing together organizations that drive providers to work together to increase the quality of care delivered to patients while significantly lowering medical costs overall. Driven by shared savings payment arrangements developed by both government and private sector payers we are witnessing and driving the fast growth of value – based models.



SPONSORED BY NPO



Northern Physicians Organization

NPO is a physician organization that owns a clinically integrated network and ACO in Northern Michigan.



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INNOVATIVE METHODS

FOR DATA SHARING TO MEET CHALLENGES OF VALUE-BASED CARE

Presented by

VIK SHESHADRI

eMedApps VP of Product Development

ED WORTHINGTON

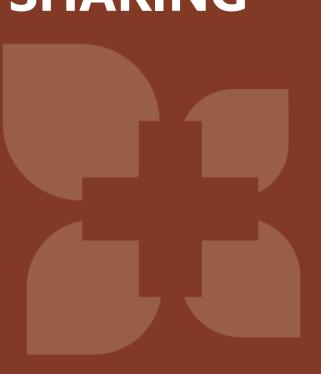
Northern Physicians Organization IT Director

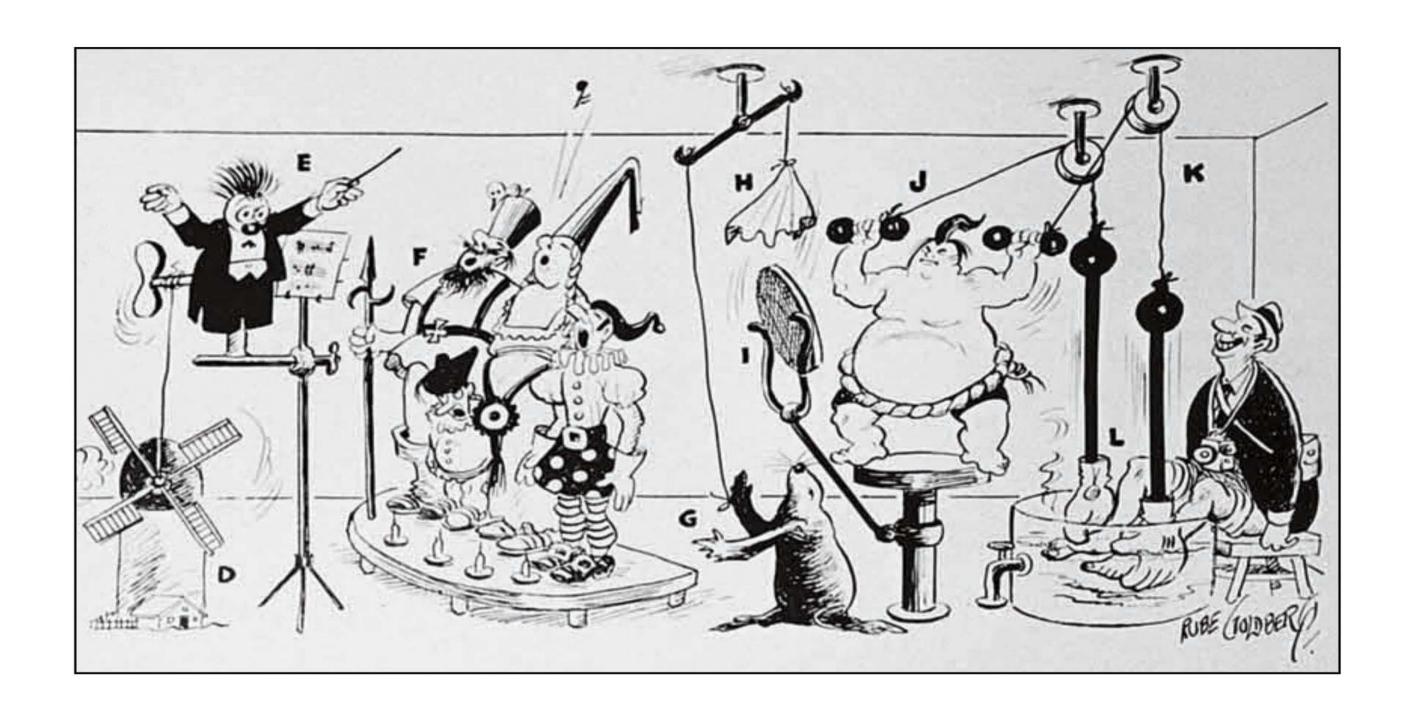


TODAY'S CHALLENGES

INTEROPERABILITY PITFALLS IN A MULTI-EHR ENVIRONMENT

CURRENT STATE OF DATA SHARING







TECHNOLOGY APIs



- Web services based
- Single implementation



Variability in implementation



Variability in fee structure

- App based fees
- Transaction based fees







Industry-wide support



- Need to add connectivity to each site
- Each site will be an additional interface



Repeat costs per implementation

Usually no economies of scale







PATIENT MATCHING

- Lack of unique identifier
- Demographic matching alone = duplicates
- MPI systems are expensive



VARIABILITY IN DATA

- Each EHR's structured data is different
- Variability in EHRs implementation of CCDAs





HEALTH INFORMATION EXCHANGE



PROS

- Single access to a lot of data
- Meets exchange of data MIPS/MU measure



 Searching for data needed for your patient visit





DIRECT TRUST

- ? Has the patient seen another provider?
- ? Which provider?
- ? Where and when?







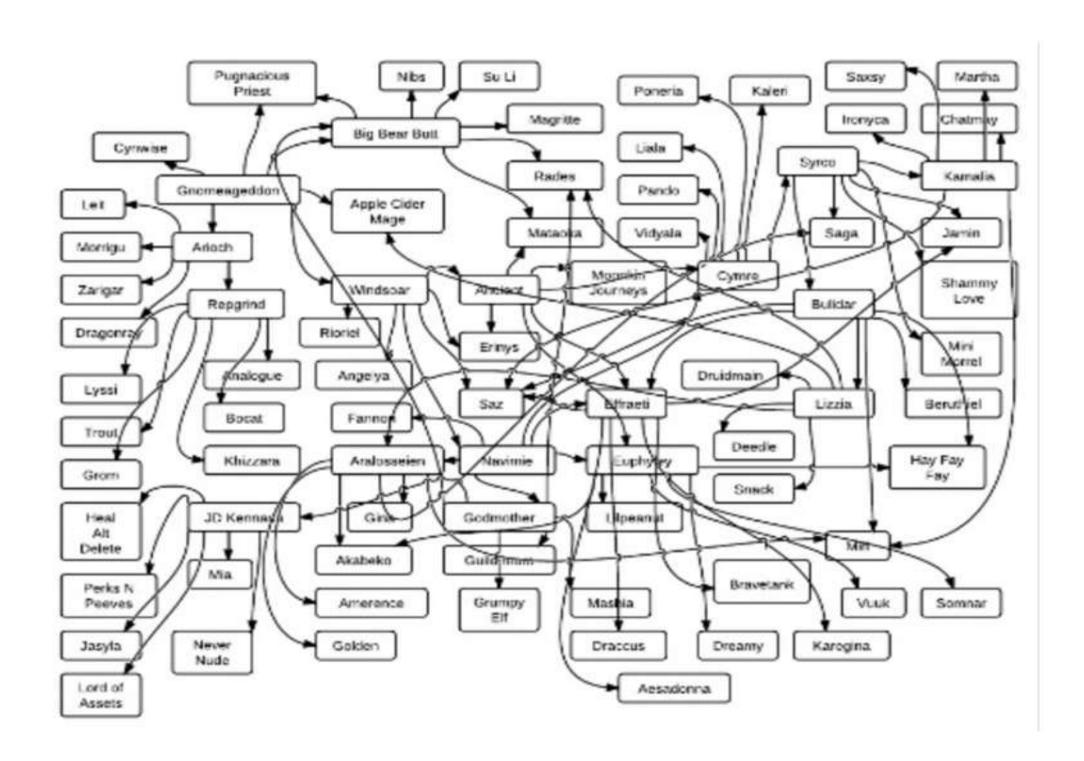
No implicit consent



Difficult to track & update consent



Aligning consents for each data source





ORGANIZATIONAL CHALLENGES

DAILY NEWS

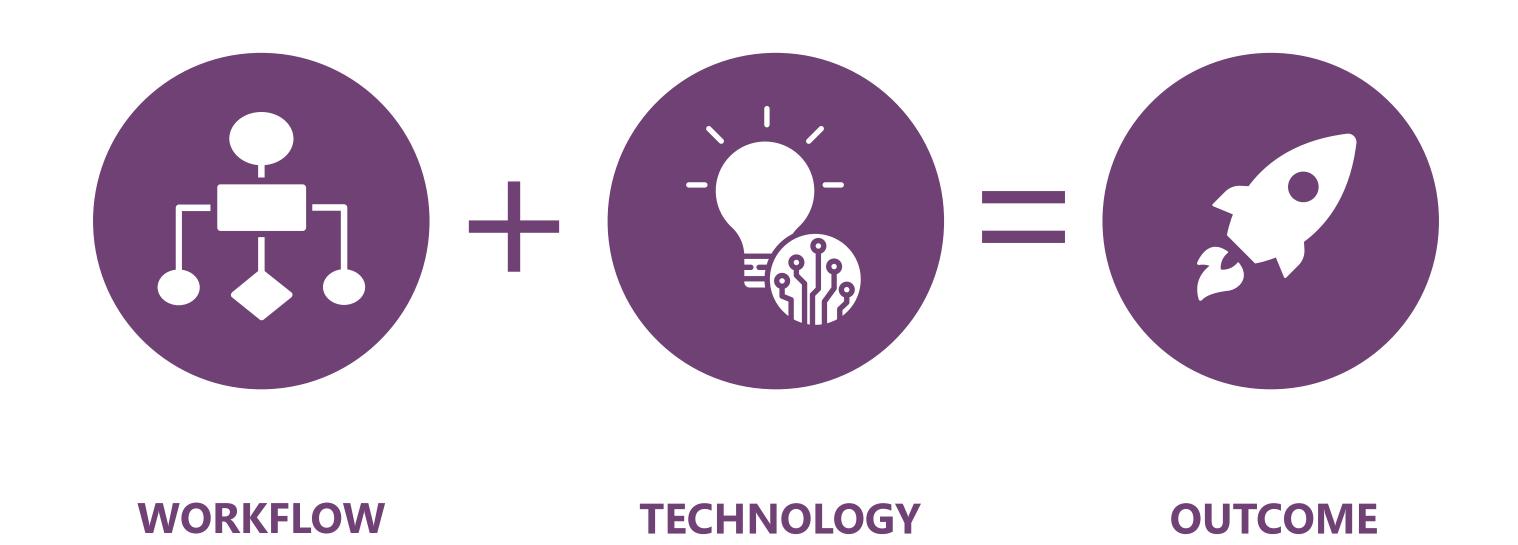
Doctors affiliated with health systems have much higher MIPS scores, JAMA study finds

Dive Brief:

- Clinicians who were affiliated with a health system had "significantly better" performance scores under the Merit-based Incentive Payment System than those who were unaffiliated, according to a <u>JAMA study</u> <u>published Tuesday</u>. The researchers noted, however, that the study does not determine whether affiliated physicians were providing better quality care, raising questions about the program's efficacy that need further research.
- The differences were especially stark for technology-dependent measures like giving patients access to health records and electronic prescribing, which could be due to the technology and infrastructure a system can provide, the authors said.
- <u>A separate study</u>, also published Tuesday in JAMA, found that physicians
 who had the highest proportion of patients dually eligible for Medicare and
 Medicaid had significantly lowers MIPS scores than other doctors.



OVERCOMING THE CHALLENGES- OUR APPROACH







IT'S NOT JUST ABOUT THE TECHNOLOGY





We Studied

- How practices work / interact with data
- How they compensate for missing data





Then We Created

Technology that complements the workflow





DO YOU HAVE ACCESS TO ALL DATA NEEDED?

Clinical data from all providers involved in the patient's care

- Regardless of practice size
- All EHR systems
- Comprehensive data

Other data important to patient care

- Skilled Nursing Facilities
- Home Health
- **Behavior Health Services**
- **Social Services**
- Paramedic Services

Real time data- ability to get ahead of patient acuity

- ADTs
- Patient Appointments
- Messages with Clinical Data



Patient is steward of their data and controls consent with various consent options

Eliminates need for patient search since data is attached to schedule prior to visit

Real-time aggregated data from all practices and organizations displayed in timeline & longitudinal record view

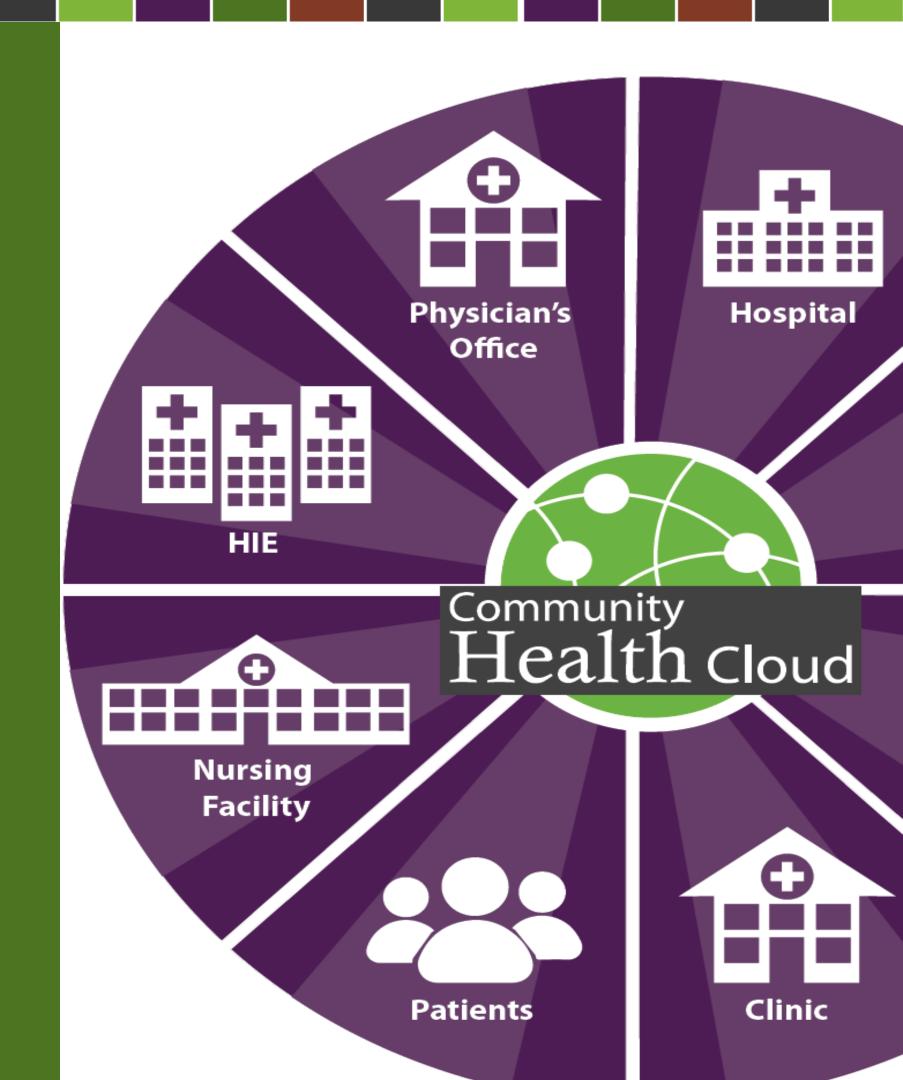
Ability to send
messages with attached
data to groups &
individuals of care team
and create actions for
non-patient related
notifications

ADT notifications when patients are seen in ER or hospital and patient appointment info with providers outside of the practice





LET'S SEE HOW IT WORKS





COMMUNITY HEALTH CLOUD CLIENT

1

Physician Organization with PCP & Specialists

6

Different EHR Vendors

245

Organizations including 33 Physician Practices

546

Clinical Users - 74 Provider Users & 472 Clinical Support Staff Users 16000+

Patient Users

2M+
CCDAs

eMedApps.com





Comprehensive consolidated community wide patient record

Awarded \$250,000 grant



Reduced emergency visits
Identified missed interventions



Reduced costs

Reduced duplicate diagnostic efforts



Streamlined workflowEliminating manual processes



CASE STUDY

"CHC takes ADTs a step farther by allowing us to dive further into the patient's record. Some services offer alerts, but CHC offers more robust data behind the alerts."



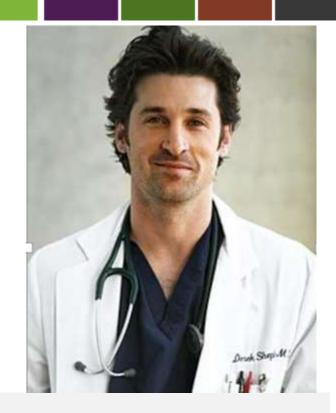
BENEFITS







HOW PROVIDERS BENEFIT





Support for optimal delivery of care

- Aggregated clinical data- more holistic view of patient
- Actionable insights to clinicians at the point of care



Better chronic care management

Unified record shared by patient's care team



Streamlined visitsallows provider to see more patients per day

Prep for visit by reviewing information prior to appointment











Improved patientdoctor communications

Provider has access to whole patient story, eliminates need for patient to retell story or bring meds to visit



Effortless control of consent/access of records

Able to view all their data and who has accessed It



Improved Quality of Life

Proactive care avoids hospitalizations, ER visits, medication complications







HOW CARE MANAGERS BENEFIT



Consent becomes patient engagement opportunity





Practice at the top of their license

More time available to focus on care since time consuming processes are automated i.e. obtaining records



Identify gaps in care and improved care coordination

Access aggregated real time data - not at time of next encounter



LEADS TO

GREATER SHARED SAVINGS & IMPROVED PATIENT OUTCOMES

Improved Care Management - Care Coordination

- Messaging w/attached clinical data
- Real-time ADT notifications
- Ability to view patient appointments outside of practice
- More accurately diagnosis patients & reduce test duplication
- Timely access to information
- o Data from all providers regardless of EHR system
- Consent management
- Automated processes to reduce provider/staff efforts
- Automated patient data collection
- Data available prior to the patient's appointment





Thanks for your time-QUESTIONS?

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