
What's taking so long? Smashing population health silos



Healthcare has been historically mired in siloed thinking, with providers operating independent of each other and rarely sharing patient information.

"More recently, this mindset is starting to change as emerging reimbursement models and evolving regulations urge providers to work together to achieve better clinical and financial outcomes. Unfortunately, even though the desire to share information may be growing, the logistics of enabling this work continues to thwart cross-continuum communication," according to Jessica Robinson, Chief Platform Officer for The Garage.

She cites a number of reasons why data exchange between hospitals and physicians remains limited. For instance, organisations were quick to adopt systems to meet federal meaningful use requirements that they did not stop to develop a consensus on how to effectively share highly-regulated protected health information (PHI). Also, amidst stiff competition, some EHR vendors eager to protect their market share offered systems that weren't capable of sharing data with other platforms. Other vendors even blocked information sharing unless organisations paid extra fees.

"These policies, as well as the proliferation of platforms and wide variety of data sources within healthcare organisations, create barriers to interoperability," Robinson explains. Since the desired information exchange via the EHR has never been fully realised, she says organisations are forced to use multiple tools and reports, severely limiting their ability to understand the holistic state of their data and operations.

The good news is that there are new solutions available. Intelligent, highly-automated population health management platforms can provide greater transparency into the healthcare ecosystem by easing access to relevant knowledge. These solutions, Robinson notes, enable smooth data sharing between providers, ancillary organisations (e.g., nursing facilities and pharmacies) and other IT vendors to create a complete and fully collaborative medical record.

"When the technology is used to link all providers and facilities within a preferred network, information can be shared automatically no matter what the underlying EHR. After the patient completes an appointment with a preferred provider, for example, the system notifies the network that care was completed and data from the appointment is electronically transferred. This alleviates care managers from manual follow-up by phone and/or fax," she explains.

Next-generation population health management tools not only enable stronger cross-continuum communication, but they leverage artificial intelligence to deliver information — such as spending, cost, and care quality data — within existing workflows, so providers don't have to hunt for it.

While cultural and industry changes are prompting greater data sharing, the work is still in its infancy, according to Robinson, adding that all stakeholders — providers, patients, vendors, and so on — must continuously work to shift the paradigm of siloed thinking and promote greater collaboration in healthcare.

Source: [Becker's Hospital Review](#)

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Published on : Wed, 7 Nov 2018