



Going At-Risk

A Vision for Connected Care

BY FARON THOMPSON

The nation's healthcare system has reached a critical moment in its evolution. Healthcare organizations across the United States are investing significant resources in re-architecting care delivery infrastructures to adapt successfully to new value-based models.

As we go “at risk” and accept outcome-based payments, we face a broad set of challenges—one of the most critical being development of the right IT infrastructure. This infrastructure must enable both clinicians and administrators to access and share the clinical and financial information they need while streamlining and automating processes to ensure efficient clinical and administrative workflows. This challenge is coupled with the fact that the technology must now span and be accessible at multiple facilities where health care is delivered.

As Scottsdale Health Partners began to accept outcome-based payments, they needed to develop the right IT infrastructure.

Scottsdale Health Partners (SHP), a physician-led Clinical Integration Network (CIN) and accountable care organization (ACO), was founded to help pioneer this new value-based model of care. With a

mission to transform healthcare delivery in the greater Scottsdale, Arizona, community, we are a 50/50 joint venture between HonorHealth and Scottsdale Physician Organization, representing a world-class health system coupled with a broad spectrum of medical specialties in a pluralistic model, allowing providers to remain independent and entrepreneurial. Our focus is on achieving the coveted “Triple Aim” of health care: improving the health of our patient population, improving the patient experience, and reducing costs.

Needs Assessment

During the two-year planning process which preceded our July 2012 launch, our executive team determined that to meet our goals, we needed to build a new IT infrastructure with some very specific requirements:

- We wanted an easy-to-use solution that would make complete and accurate patient and clinical data available to our providers across all practices and all locations in real-time.
- We wanted to streamline workflows wherever we could for maximum efficiency.

Allowing our 190 practices to continue to use over 40 electronic medical records (EMR) systems was another requirement, one requiring a robust underlying health information exchange (HIE) technology to

handle translation across platforms. We also understood that we needed to ensure we could meet evolving regulatory requirements imposed on ACOs. Finally, preparing for the future was a paramount concern, biasing toward a standards-based platform with open application programming interfaces (APIs) to support a wide range of applications and a very modern, scalable database at the heart of the system.

After a thorough review of our options, we decided to work with Orion Health, which offered deep healthcare industry strength and HIE, a modern open platform, and extensive service capabilities. Our partnership is ongoing, and the results to date have been very impressive. We have already successfully trained over 300 physicians and over 800 clinical support staff to use the platform, and because the new system is so easy to use, they were basically up and running immediately following training.

Future-Proofing

One result of building our new system on an open platform with a built-in integration engine, Fast Healthcare Interoperability Resource (FHIR) support, and a cutting-edge open-source NoSQL database, Cassandra, under the hood is that we have a very future-proof and cost effective model. Open APIs enable us to develop or acquire niche applications that boost engagement and target specific patient conditions. They also expose rich patient data to other business services, enhancing workflow efficiency. So, we now have the flexibility and scalability to support new forms and quantities of data expected in the future, positioning us well to meet known and unknown future requirements.

As a result of this initiative, we have seen significant improvements in quality, patient satisfaction, and cost savings across the organization. Our Medicare Advantage Plan star ratings improved from 2.65 to 3.94 in one year, and we now boast readmission rates of less than 4%, among the lowest in the Arizona market. In terms of cost savings results, we have lowered costs by 10% for both Medicare Advantage and commercial payers.

Going forward, we are working with our partner to build and evolve a robust ACO reporting solution. As part of the federal Medicare Shared Savings Program (MSSP), we face stringent process and administrative requirements from the Centers for Medicare and Medicaid Services (CMS), and many details of

these ACO requirements have yet to be revealed. Keeping up with these requirements is very time-consuming, so we will co-develop our own tool to manage our ACO administrative, compliance, and reporting processes. Working closely with our technology partner, we expect this new MSSP reporting product to be in user acceptance testing later this year.

A Big Picture

Another big focus for the next phase of this project is transition of care and care coordination. These two functions, more than anything else, correlate to positive outcomes for patients and efficient ACO operation. We've already built census reporting and real-time alerting for care transitions and care coordinators, demonstrating ease of development with our platform, and we're working closely with our partner to design and test an expanded care coordination solution. Implementation started in July 2015, and SHP care coordinators are building custom assessments, communicating with the patient's care team, recording and tracking patient goals, creating care-team tasks, and documenting efficiently—all within a single platform that integrates all patient data.

Overseeing patient care at both the community and individual patient levels is challenging, and the right technology can make all that collaboration and communication easy and precise. It is imperative that the entire organization is communicating and constantly up-to-date with the latest patient information—giving the patient confidence that everyone is working together on their behalf.

From Vision to Action

We're giving our providers the tools and information they need to allow doctors and clinical staff to work together, on behalf of the patient, a critical component in achieving the Triple Aim.

With such effectively coordinated care, patients can expect improved outcomes, and physicians will have peace of mind. Implementing the right IT infrastructure is a key enabler for embracing the ACO vision. We have the opportunity to learn much more rapidly from all the data we are gathering, to put our insights into action, and actively start to measure the impacts for continuous improvement of care.

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