

# Consumers @ the Center:

How Open Data, Health IT and Value-Based Payment Can Fuel a Better Delivery System for Us

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@aneeshchopra



# My Journey from U.S. CTO to CareJourney

## Open Medicare Data

Medicare FFS + Part D

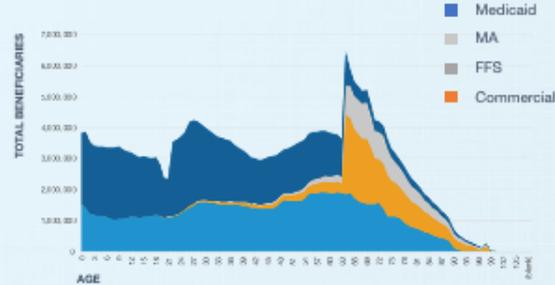
Commercial Data

TMSIS/Max  
Medicaid/CHIP

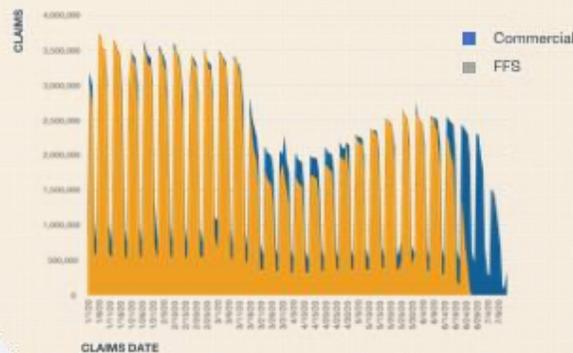
Medicare Advantage  
Encounters

MDS/OASIS  
Assessments

Over 275M Patients  
across multiple age range



Up-to-date  
claims within 1 month on 170M lives



## Internet-Based Interop Standards

2009

NEJM: *No Small Change for the Health Information Economy* – introduces the API

White Paper: "... Fostering Development of an "iPhone-like" Platform..."

iTDotHealth meeting with government, vendors, academia

2011

SMART Apps Contest on Challenge.gov, promoted by White House. First health-related apps challenge

SMART Sandbox launched

The NEW ENGLAND JOURNAL of MEDICINE  
**No Small Change for the Health Information Economy**

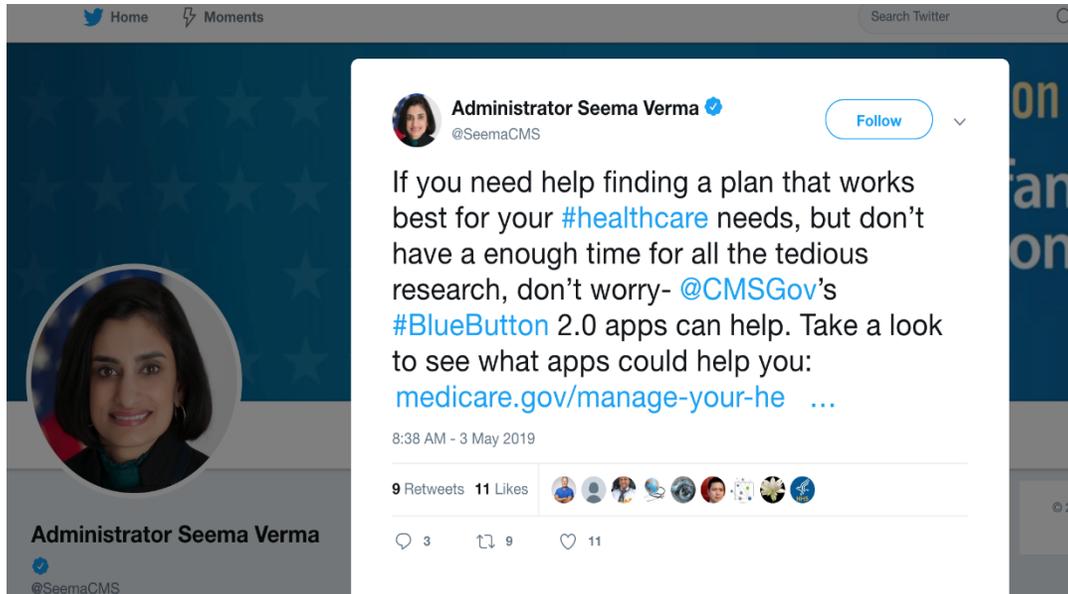
Healthcare information technology is essential to the success of the health care system. As the industry system matures, it will need to be able to integrate and share data across different systems and devices. This is a challenge that will require a new approach to the design and development of health information systems. The industry must focus on creating a platform that allows for the development of new applications and services that can be used across different systems and devices. This is a challenge that will require a new approach to the design and development of health information systems. The industry must focus on creating a platform that allows for the development of new applications and services that can be used across different systems and devices.



\$15M SHARP grant to the SMART Team  
Draft SMART API released (RDF data models)

BP Cer App in Boston

# The “Consumer-First” Delivery Reform Era



**Empowering Patients to Make Decisions About Their Healthcare: Register for MyMedicare.gov and Select Your Primary Clinician**

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For assistance selecting your primary clinician on MyMedicare.gov, call 1-800-MEDICARE or visit the MyMedicare.gov Help page. If you don't have access to the Internet, we encourage you to work with family and friends to get assistance. You can also check with your local State Health Insurance Program (SHIP) office, library, places of worship, or community centers for help.

redbirdagents.com START HERE

To make the deal even sweeter, we have an awesome bonus program available.

- \$50 for every application submitted using the Ascend application
- \$30 for every Blue Button application
- First 5 Apps – AHIP costs are reimbursed
- First 10 Apps – E&O reimbursement
- First 20 Apps – \$1,000 in Lead Credits
- First 50 Apps – \$5,000 in lead credits or Marketing reimbursement.
- 100 Apps – \$7,500 in lead credits or marketing reimbursement.

bloom healthcare

**confirmation of main doctor or other healthcare professional form**

**CONFIRM**  
By signing this form, I am confirming that my main doctor or other healthcare professional I receive routine medical care from is BLOOM HEALTHCARE

**Are you the patient? \***

Yes  
 No

# Price of Information Failure



## Episode Resources

### Articles discussed in the episode:

**Managing Intelligence: Skilled Experts and AI in Markets for Complex Products** (Jonathan Gruber, Benjamin R. Handel, Samuel H. Kina, Jonathan T. Kolstad; NBER; 05/2020)

**The Role of Behavioral Frictions in Health Insurance Marketplace Enrollment and Risk: Evidence from a Field Experiment** (Richard Domurat, Isaac Menashe, Wesley Yin; American Economic Review; scheduled to appear early 2021)

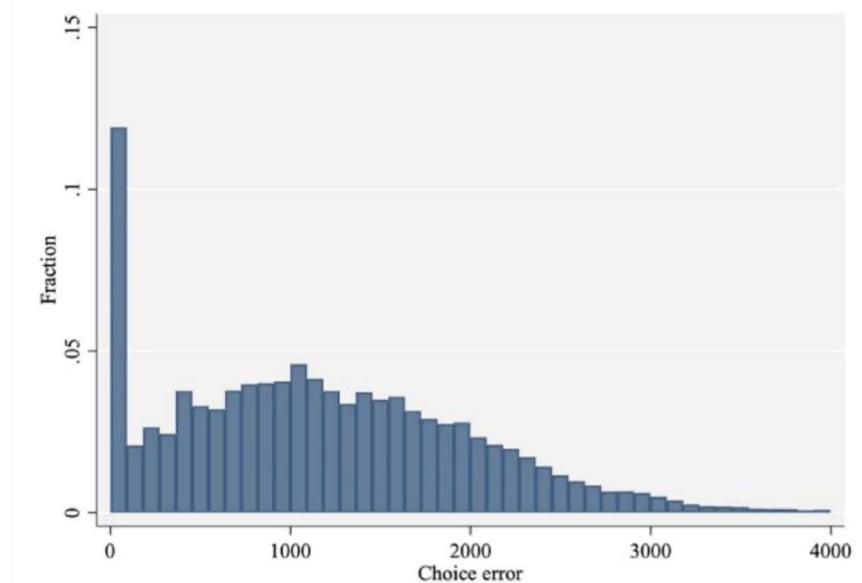


Figure 1: Histogram of observed 2015 money left on the table (financial choice error).

“We find that, prior to AI-based technology, skilled experts in this market exhibit the same type of inconsistent behavior found in previous studies of individual choices, costing consumers \$1260 on average. The addition of AI-based decision support improves outcomes by \$278 on average and substantially reduces heterogeneity in broker performance.”

# Atop the Agenda: Supplier or Fiduciary?



CMS proposes to include consumer “gainsharing” payments in MLR calculations for smarter shopping as part of price transparency regs; CMS pre-defines 500+ “shoppable services;” Brandeis launches “PACES” as an open-source grouper

## Knee Replacement

CARE BUNDLE OVERVIEW **CARE BUNDLE DETAILS** WHAT TO EXPECT QUESTIONS TO ASK HOW TO PREPARE RELATED CARE BUNDLES

### Cost Breakdowns

Please check the boxes below to view the available prices you're interested in. Our estimated cost information is not a guarantee of payment or benefits. Your actual costs may be higher or lower than the estimate for a number of reasons you can view [here](#).

What level would you like to view cost information from?

- National: see average costs across the nation
- State (FL): see average costs across Florida
- County: see average costs across Hillsborough County
- County Facility: TAMPA GENERAL HOSPITAL \$32,896

Show cost ranges

### Your Care Bundle

The care bundle includes the steps and procedures that are part of a typical treatment plan for that care bundle. Costs are broken out by step.

STEP 1

#### Office Visit with Specialist for Evaluation

A visit with a specialist for a detailed evaluation and treatment of your symptoms

State (FL)	\$159
Hillsborough County	\$173
TAMPA GENERAL HOSPITAL	N/A

STEP 2

#### Total Knee Replacement (TKR)

Surgery to replace a diseased or damaged knee joint with manmade parts

State (FL)	\$36,010
Hillsborough County	\$41,894
TAMPA GENERAL HOSPITAL	\$31,920

# Care Navigation Apps @ Pace of Trust

**Google removes 3 Android apps for children, with 20M+ downloads between them, over data collection violations**

Ingrid Lunden @ingridlunden / 9:00 am EDT • October 23, 2020

Comment

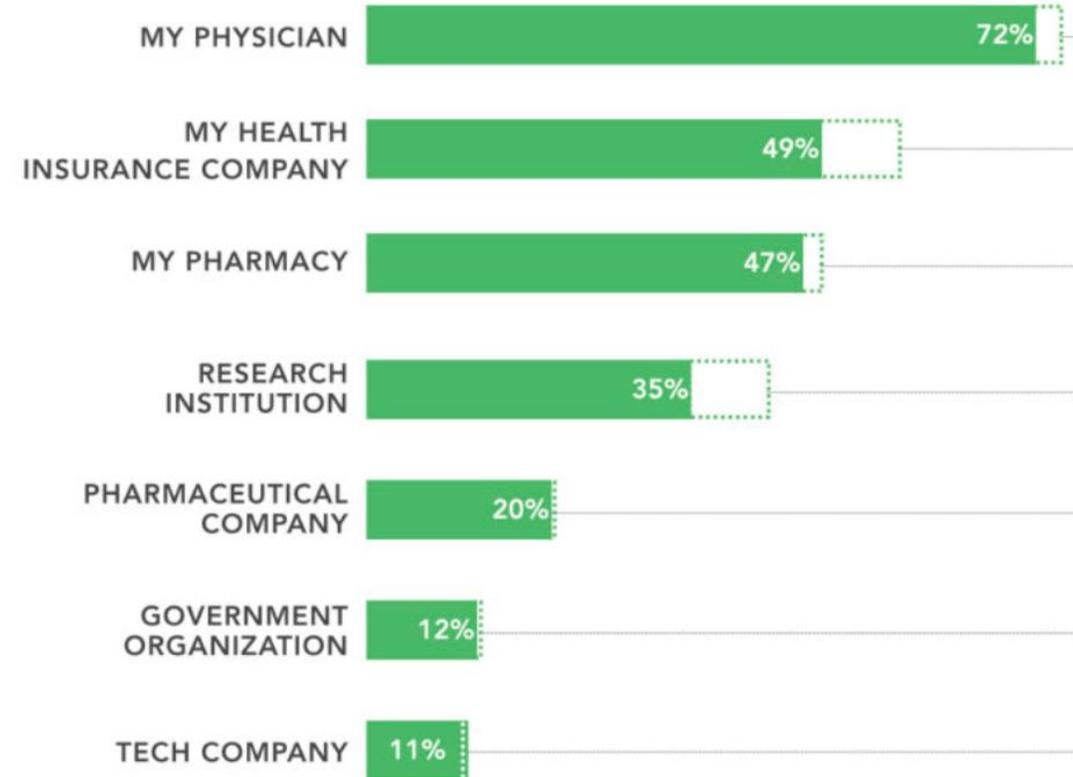


CARIN Alliance "Code of Conduct:" Contractually bind third-party vendors and contractors to our privacy policies and prohibit use or disclosure of user information (including de-identified) for any undisclosed purposes without express consent from the user.

## CONSUMER SENTIMENT ON DATA SHARING AND SECURITY

By entity, 2017-2018

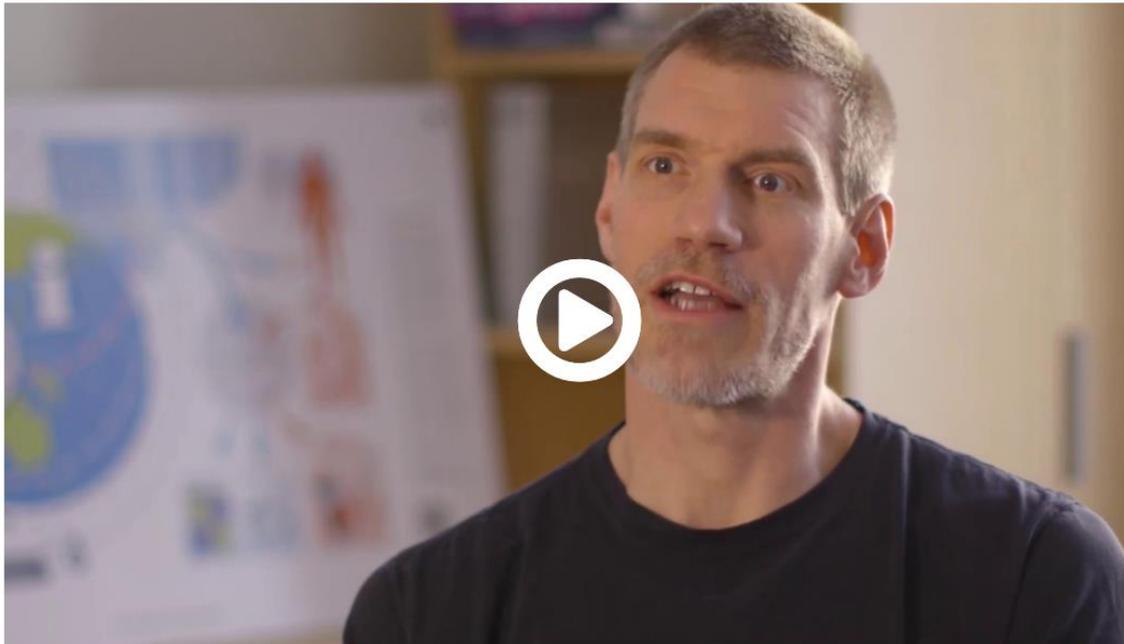
### WILLINGNESS TO SHARE HEALTH DATA WITH ENTITY\*



# Exploring the Business Case

## A Leadership Moment

Mount Sinai Accelerates Data-driven Discovery and Patient Care with New Chief Data Officer Role



Mount Sinai Accelerates Data-driven Discovery and Patient Care with New Chief Data Officer Role

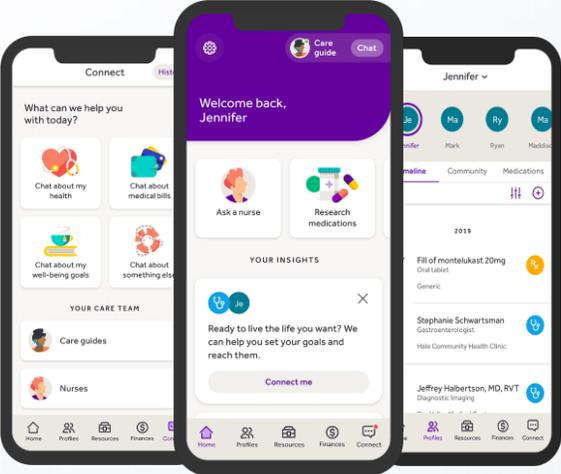
## An Economic Argument

DCE Type Alignment Option <sup>1</sup>	Standard		New Entrant <sup>2</sup>	High Needs Population <sup>2</sup>
	Claims-Based Alignment	Voluntary Alignment	Both Options	Both Options
PY1	<b>Standard Benchmarking Approach</b> using a blend of historical expenditures and the regional rate based on the DC/KCC Rate Book	<b>Regional Benchmarking Approach</b> composed entirely of the regional rate based on the DC/KCC Rate Book for the PY		
PY2				
PY3				
PY4		<b>Modified Standard Benchmarking Approach</b> using a blend of recent historical expenditures and the regional rate based on the DC/KCC Rate Book		
PY5				
PY6				

Table A1. Cross of Index Encounter CC/MCC to Historical CC/MCC (Percent Within Rows)

Index Encounter DRG CC/MCC Category	No Diagnosis On Qualifying List	Historical Diagnosis Code CC/MCC Category‡		
		Non-CC/MCC	CC	MCC
Not Promotable	24%	17%	44%	15%
Base	44%	27%	24%	5%
CC	30%	24%	35%	10%
CC/MCC	*	*	*	*
MCC	21%	20%	34%	25%

# Build on “Must Share” Application Access



## Patients

### Consumer Application Access (Must Share)

Evaluate rendering providers using a comprehensive cost and quality score to understand effectiveness of patient care

### Improve Performance and Patient Satisfaction

Patient-specific educational resources in a consumer-friendly location

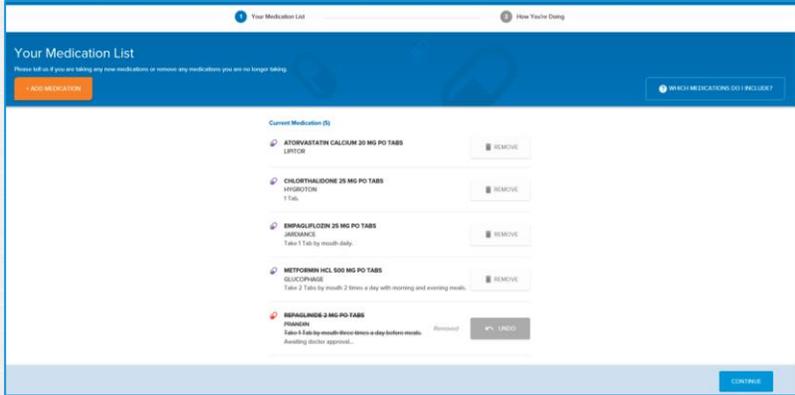


## Providers

### Provider Apps utilizing 2015 EHR CEHRT technology (Must Connect)

### Inform Decisions at the Point of Care and Reduce Administrative Burden (Must Share)

Provider-facing apps to reduce burden, such as ADT notifications, prior authorization, denial management, and chart retrieval



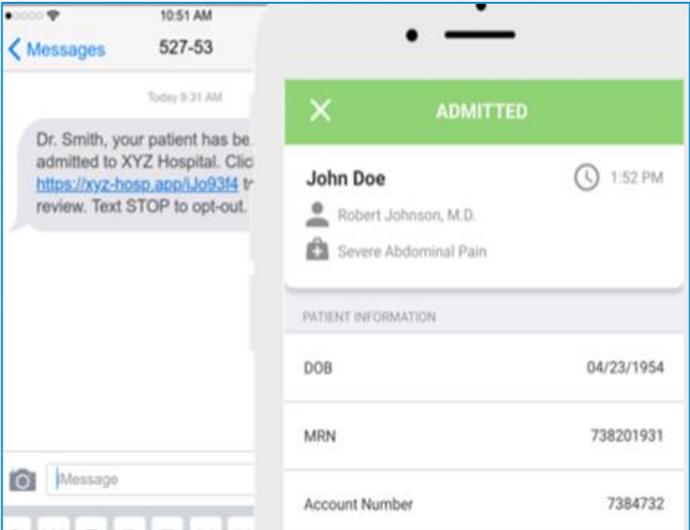
## Payers

### Payer-Designated Apps (May Connect)

Payers can reduce burden for providers via clinical data information retrieval for RA coding and Care Gaps as well as prior auth and denial management

### Care Coordination Apps

Apps built and shared with all network providers in value-based care arrangements, such as performing med rec post-discharge





# More Data, Less Friction - Starting Now

FOR IMMEDIATE RELEASE  
October 29, 2020

Contact: HHS Press Office  
202-690-6343  
[media@hhs.gov](mailto:media@hhs.gov)

## HHS Extends Compliance Dates for Information Blocking and Health IT Certification Requirements in 21st Century Cures Act Final Rule

*Interim Final Rule with Comment Period Responds to COVID-19 Pandemic*

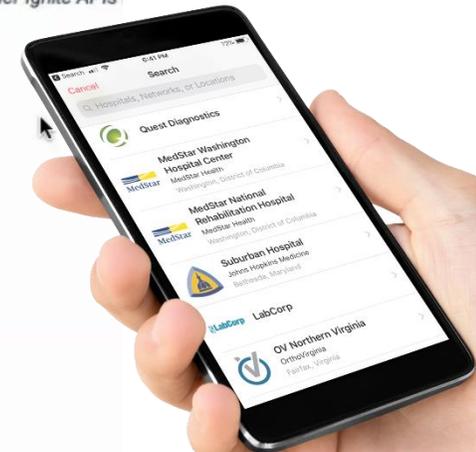
- **Content Condition:** Establishes the content an actor must provide in response to a request to access, exchange, or use EHI in order to satisfy the exception.
  1. Up to 24 months after the publication date of the Cures Act final rule, an actor must respond to a request to access, exchange, or use EHI with, at a minimum, the EHI identified by the data elements represented in the United States Core Data for Interoperability (USCDI) standard.
  2. On and after 24 months after the publication date of the Cures Act final rule, an actor must respond to a request to access, exchange, or use EHI with EHI as defined in § 171.102.
- **Manner Condition:** Establishes the manner in which an actor must fulfill a request to access, exchange, or use EHI in order to satisfy this exception.
  - » An actor may need to fulfill a request in an **alternative manner** when the actor is:
    - Technically unable to fulfill the request in any manner requested; **or**
    - Cannot reach agreeable terms with the requestor to fulfill the request.
  - » If an actor fulfills a request in an alternative manner, such fulfillment must comply with the order of priority described in the manner condition and must satisfy the Fees Exception and Licensing Exception, as applicable.

ONC embraces “de-coupling” data access from 2015 CEHRT 11/20; “Certified API Developers must grant API Information Sources (providers) the independent ability to permit API Users to interact with the certified API technology deployed by the API Information Source.”

## Connected Applications

Your site can use the following applications to connect to Cerner Ignite APIs

Application	Developer Information
1upHealth	<a href="#">1upHealth Patient Application</a> After Cerner provisions the application, email <a href="mailto:hello@1up.health">hello@1up.health</a> to complete registration.
Apple Health	<a href="#">Apple Health Records</a>
CareEvolution (also known as MyFHR)	<a href="#">CareEvolution</a>
Coral Health Records	<a href="#">Coral Health</a>
Medlio	<a href="#">Medlio</a>
MyChart (Epic)	<a href="#">MyChart</a>
MyLinks	<a href="#">PatientLink</a>



# Vision: Health Information Fiduciaries

## Upcoming appointment data:

- Scheduling data from provider
- Physician order data from physicians
- Scheduling data from outside providers

## Access to historical information:

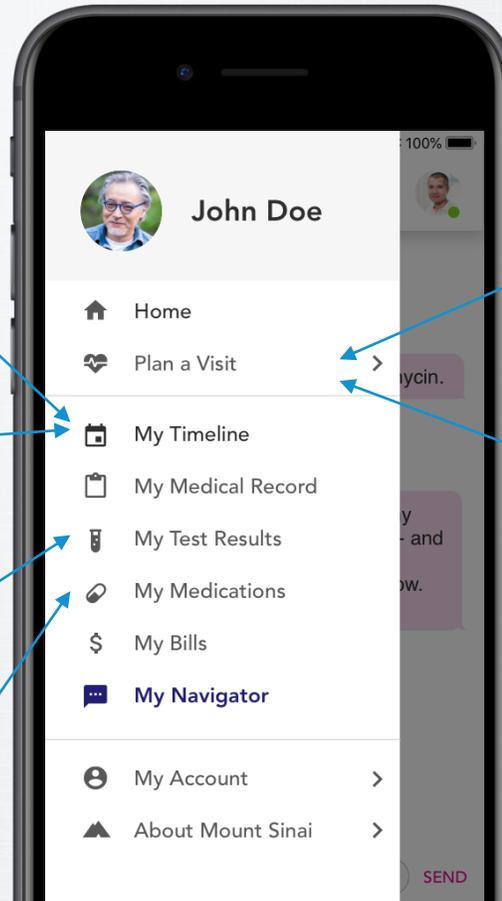
- EMR data from provider
- EMR data from outside providers
- Claims history from health plan
- Integrated into timeline

## Labs

- EMR data from provider
- EMR data from outside providers
- Outside lab data directly from labs
- Health risk assessment data from employer

## Medications

- EMR data from provider



## Appointment scheduling:

- Scheduling interface to ACO providers
- Scheduling interface to outside providers
- Self-scheduling for common ancillaries (lab, imaging, etc.)

## Price transparency for common services:

- Eligibility information from health plan
- Pricing information from ACO
- Pricing information for outside providers

- 450K lives in ACO models
- \$2BN of premium under mgmt.
- 13 ACO contracts
- 13 unique data feeds
- 78 quality measures



CMS proposes to include consumer “gainsharing” payments in MLR calculations for smarter shopping as part of price transparency regs; CMS awardee Brandeis launches “PACES” as an open-source grouper, pre-defining 200+ “shoppable services”