

POPULATION HEALTH NEWS

Data Management Improves Care Quality, Reduces Health Disparities

Health Center Partners look to improve their care quality and eliminate health disparities through effective data management.



Source: Getty Images



By Erin McNemar, MPA



September 20, 2021 - To improve their care quality and eliminate health disparities, Health Center Partners (HCP) explored different data management tools to meet the needs of their patient population.

After identifying the needs of health center providers, clinicians, and administrative staff, HCP evaluated different **population health** tools, ultimately choosing Arcadia.

Sarah Cho, vice president of clinical transformation and health informatics for Integrated Health Partners, a subsidiary of HCP, explained the tool works by taking different data connectors and putting them into a data repository. The tool aggregates the data leading to one record per patient in the master patient index.

Part of the problem with data management is that data will often be scattered across different systems but needs a mechanism to bring it all together. Enter the master patient index.

“You can see which patients have true quality gaps, and that’s where we would act on that data, and healthcare providers would reach out and make sure that the patient has all of their quality measure interventions and gaps closed,” Cho told *HealthITAnalytics*.

Currently, HCP has its nine-member health center, electronic health records (**EHR**) data, clinical data, and a few health plan level files flowing into Arcadia’s platform.

According to Cho, the tool’s ability to create a singular place for shared data assets can improve the quality of patient care at a network level.

“We want to have this network-level shared data asset where we can provide technical support for custom reporting analytics and performance improvement plans to help us either identify root causes for some of those performance opportunities or use that data to create standard clinical protocols that we would implement across the health centers based on actual data,” Cho said.

To better serve their population, HCP is looking to make the move toward risk-based contracts — another area where Arcadia services can provide support.

“Arcadia will be able to house claims data so that we can pull together the electronic medical record plus cost of care. That’s a value that we as a network can begin to analyze trends of not just quality outcomes and utilization but also cost of care so that we can look for disparities, be it quality outcome disparities or access disparities,” added Amanda Simmons, executive vice president for Integrated Health Partners.

As a group of FQHCs (federally qualified health centers), the network focuses its efforts on **health equality** and serving the most vulnerable populations.

“We’re 99% Medicaid in California. We have to do a really good job at trying to analyze trends of patient behaviors to help the communities,” Simmons continued.

“Our health centers range from one health center that focuses on American Indian populations to one health center that focuses on housing insecurity, homeless populations, pace programs for aged adults, and you name it, they’re currently the safety net providers.”

Simmons explained that with the tool, there is no wrong door policy. Patients have access to 81 clinical sites through the network and will not get turned away if they go to a center that’s not their primary care provider. Arcadia then gives the network the tool to see longitudinal records and the patient’s activity across all the health centers.

The tool also helps staff target the right patients for interventions at the right time, reducing duplication of outreach activities and testing. This targeting method assists in cutting the **costs of care** for patients and unnecessary testing.

“We’ve heard so far from the health center staff that they’ve used the tool to look at coding gaps at the point of care. All this information is pushed out to them, so they don’t have to dig for it. Right then and there, when they’re working with patients or they’re planning in the morning for that day’s appointments, they can quickly highlight the patients needing to be seen,” Cho continued.

“They have these kinds of gaps. Here’s the patient’s risk score, which is also calculated in the tool based on all the data that they have available. There have been situations where the risk score was high because of the events that happened years ago. But in daily operations, when the patient’s there, you don’t have time to sift through the entire EHR and medical record to look at everything for that patient,” Cho said.

With the tool, HCP now can focus on advancing their business intelligence support strategy to provide better health centers that meet custom data and analytic needs.

“It’s one thing to have data and have it compiled, but if you can’t analyze it and use it to drive change, then it’s not as helpful. The other piece would be the importance of having EMR data with cost data plus social determinant data,” Simmons said.

“Some of the things that we’re, as a network, focused to this next year, is, do we do a good job as a network with trending social determinants of health or multiple determinants of health? Do we truly know that patient through the story it tells in Arcadia? Right now, I think we still have that gap of what are the social challenges of our environment or communities.”

<https://healthitanalytics.com/news/data-management-improves-care-quality-reduces-health-disparities>