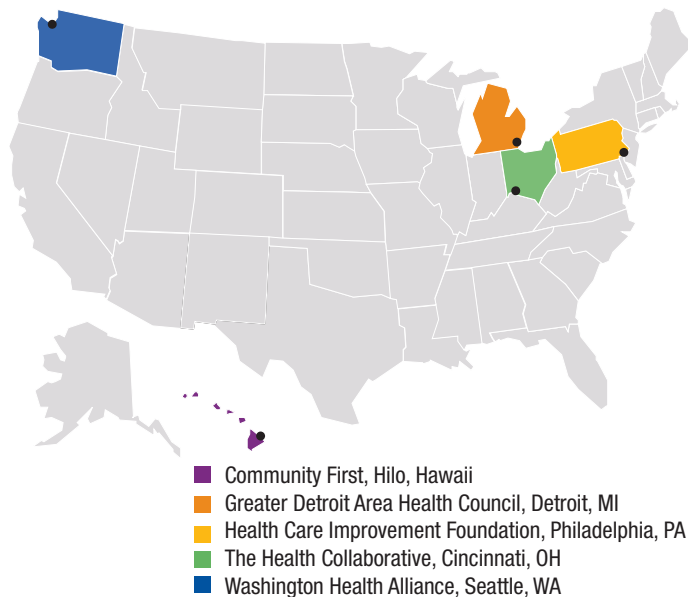


Striving Toward a Culture of Health: How Do Non-Medical Needs Factor into Alternative Payment Models?

Topic Profile: Data and Population Metrics

AcademyHealth and the Network for Regional Healthcare Improvement hosted a two-day workshop, “Striving Toward a Culture of Health: How Do Non-Medical Needs Factor into Alternative Payment Models?”, which convened five multi-sector teams, comprised of health care sector and non-health care sector partners, and led by regional health improvement collaboratives. The workshop provided information from content experts and fostered shared learning across communities to inform next steps in their own specific community-based collaborative projects. The workshop focused on four key topic areas and the related barriers that potentially influence the conditions and collaborations necessary to support non-clinical community-wide population health services.

This profile highlights one of these topic areas, the issue of data and population metrics related to measuring non-clinical interventions, along with the barriers and lessons learned from the workshop.



Emerging Issues

Workshop participants discussed what to consider when addressing the data and population metrics needed by organizations seeking to support improvements in population health. Recognizing the importance of data in their collaborative efforts, health care systems and community social service organizations cited an interest in understanding best practices for establishing, governing, and evaluating successful data sharing partnerships across sectors. In particular, the central issues in this area raised by meeting participants included:

- How should health systems and community social service providers begin the process of collecting, sharing, and analyzing data?
- What are the key components of a successful data sharing partnership?
- What entity is the most suitable to receive, analyze, house and report out data/information?
- What problems are communities trying to solve using the data?
- When should organizations “build versus buy” their own tools and platforms for data integration?

Key Barriers Identified

- Data Measures
 - Data collection and analysis efforts within the health care system often focus solely on measures of cost and utilization rather than social determinants of health, making it difficult to identify population needs and measure progress. Clinical-community collaborations need to supplement administrative and clinical data with non-clinical data to better understand population health.
- Data Sharing

Health systems and their community-based partners often:

 - Hesitate to share data across sectors due to lack of trust, which limits collaboration opportunities;
 - Lack common data definitions for specific measures; and
 - Face technical interoperability as well as legal/privacy challenges when attempting to integrate data sets such as electronic health records and claims data which collectively limits the ability to share, integrate, and analyze data for a common purpose.
- Data Infrastructure

Health systems and their community-based partners often:

 - Lack the financial resources necessary to make investments in the health information technology and workforce needed to build and maintain collaborative data efforts;
 - Are resistant to being the primary investor in these efforts and assume a majority of the costs; and
 - Lack knowledge regarding the selection of adequate data sharing platforms to support collaborative efforts.

Lessons Learned

- Ground efforts to collect and use data within a shared understanding across partners of what fundamental goals all are trying to achieve and why.
- Use available data as an acceptable starting point in order to set the stage for larger-scale projects (e.g., if you have claims data, start with that; if you have clinical data, start with that).
- Stay pragmatic and realistic when establishing expectations between partners.
- Identify the most effective data platform for collective use that includes key elements such as identity management between partners, a shared set of data definitions, and a user-friendly interface.
- Establish a governance process for data collection, sharing, and analysis between partners.
- Identify a target population that lends to short-term results (i.e., low-hanging fruit) in order to build momentum.

These five regions will use the information, along with additional briefs on other topics discussed, and work collaboratively within their communities to apply them to their individual situations.

To learn more about these projects, visit www.academyhealth.org/p4ph

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About NRHI

The Network for Regional Healthcare Improvement is a national organization representing regional multi-stakeholder groups working towards achieving better health, better care, and reduced costs through continuous improvement. NRHI and all of its members are non-profit organizations, separate from state government, working directly with physicians, hospitals, employers, health plans, and patients using data to improve health care.