Evaluate your value-based care technology readiness

Succeeding with VBC models

Home health, hospice and senior care organizations will need to be in the best financial and clinical standing possible to succeed with value-based care (VBC) models. This means organizations must make better use of their data through digital technology solutions that are easily incorporated into workflows.

Does your technology support your needs in each critical area?
Use this checklist to evaluate your organization's technology readiness for the shift of payments from volume to value.

1

ACCESS, SHARE AND INTEGRATE DATA

Care teams should be able to access data at the point of care to make the most informed decisions. Check for these capabilities:

- ☐ Must be able to send data back and forth in real time inside and outside your organization

- ☐ Must be able to aggregate multiple types of data to create full patient picture

- ☐ Access to the right data so you can measure cost and utilization against the populations you serve

- ☐ Enables providers to create fully integrated treatment plans

2

MANAGE PATIENT POPULATIONS

Success under VBC will require technology and tools that help you reduce hospitalizations and unnecessary ED visits. Check for these capabilities:

- ☐ Stratify high-risk patients, recommend proper interventions and track patient health

- ☐ Identify in real-time who is at most risk for readmission or an adverse event

- ☐ A platform that integrates with disparate systems to eliminate double entry of clinical data and errors during transitions of care

- ☐ Create patient triggers to identify patients at risk of poor outcomes

- ☐ Alerts staff in real time when patients present in ED

- ☐ Ready access to analytics that allows staff to flag and develop more efficient protocols for specific conditions

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DRIVE AND MEASURE PERFORMANCE

A hallmark of value-based programs is the ability to demonstrate your value to payers and referral partners. Check for these capabilities:

- ☐ Simplifies data discovery so you get answers faster
- ☐ Eliminates manual collection of EHR data
- ☐ Links operational, clinical and financial data to reveal complex cause-and-effect relationships
- ☐ Enables you to track and measure outcomes at a program/population level
- ☐ Enables you to customize and configure your own metrics

4

BUILD STRONG REFERRAL PARTNERSHIPS

In a risk-bearing arrangement, strong referral partnerships are critical. And that starts with a fast and efficient referral process. Check for these capabilities:

- ☐ A fully digitized, closed-loop referral and intake process that eliminates spreadsheets
- ☐ A shared documentation platform that enables collaboration between intake and clinical teams
- ☐ Electronically aggregates multiple referral networks into a single portal, expediting the acceptance/ rejection process
- ☐ Dashboards that help you gauge referral sources, patient risk and program performance

Adapting to value-based care models will mean a greater need for data sharing, new workflows and the ability to measure and drive performance, among others.

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