Health IT Policy Committee
A Public Advisory Body on Health Information Technology to the National Coordinator for Health IT

Accountable Care Workgroup Hearing

January 14, 2014

Accountable Care Workgroup Charge

Make recommendations to the Health IT Policy Committee on how HHS policies and programs can advance the evolution of a health IT infrastructure that enables providers to improve care and population health while reducing costs under accountable care arrangements.

Hearing Objectives

1. Consider input on health IT capabilities needed to drive payment reform from various sources, e.g. input from workgroup members, joint CMS/ONC Request for Information, IT framework for Accountable Care developed by CCHIT, etc.

2. Understand how the current ONC EHR certification program addresses capabilities necessary for accountable care and where gaps remain.

3. Identify priority health IT capabilities needed to drive business and quality success within accountable care arrangements.

4. Develop recommendations to advance these capabilities using HHS policy and program levers, with consideration of the potential cost and business impacts on stakeholders participating in different accountable care arrangements.

Agenda Overview

- Overview of the landscape for Accountable Care organizations, Clif Gaus, NAACOS
- Panel 1: Physician-Led Accountable Care Arrangements
- Panel 2: Hospital and Health System-led Accountable Care Arrangements
- Panel 3: State Community-based Accountable Care Arrangements
- Panel 4: Vendors/Service Providers Enabling Accountable Care

1. Data integration across EHR systems and with population health platforms is a major challenge for providers collaborating under accountable care arrangements.

2. Technical, strategic, and financial considerations continue to inhibit providers from exchanging information to support care coordination.

3. While providers in accountable care arrangements are acutely experiencing these challenges today, they do not have the leverage to drive solutions alone.

4. HIEs are facilitating exchange for accountable care in select markets, but sustainability and spread are still a major concern.

5. There is lack of clarity and consensus around the key quality measures that are needed to effectively drive care improvement within ACOs.

6. While some providers are using Meaningful Use requirements as a platform for care transformation, many are still focused on simple reporting compliance.

7. ACOs need to do more to prioritize a patient-centered approach to care.

8. Smaller organizations are facing challenges in meeting the IT investments and administrative burden associated with value-based payment models.

9. Providers under accountable care arrangements face barriers to obtaining critical information around behavioral health and other sensitive information to inform care.

Selected Discussion Areas for Forthcoming Recommendations

- Additional mechanisms to ensure certified EHR products effectively implement exchange.

- Strategies to support seamless integration between EHRs and other applications supporting population health and care coordination, e.g. analytics tools.

- Opportunities to incentivize health information exchange through federal programs focused on accountable care.

- Increasing provider access to comprehensive cost and utilization data.

- Facilitating integration with LTPAC, behavioral health, social and community services, and other providers serving high-risk/high-cost patients.

- Encouraging the availability and adoption of tools and data that support care management for high-risk/high-cost patients.