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A Frost & Sullivan Case Study

Benefits of Health Data Interoperability Will Impact All Stakeholders

*One in a series of discussions with healthcare leaders regarding
healthcare data challenges and solutions*

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Introduction

With the passage of the 21st Century Cures Act, the US government established requirements for healthcare organizations to enable interoperability. Healthcare insurers lead in implementing these requirements, honoring the deadline of July 1, 2021 to make their provider directory downloadable and to give individuals the option of downloading their healthcare data (via an application programming interface [API]).

Given the broad push for interoperability across the healthcare landscape, interest in following the progress toward these deadlines remains high. To learn more about the challenges, lessons learned, and best practices in these data exchange efforts, Frost & Sullivan recently spoke with IT and business leaders about their organizations' experiences in addressing interoperability requirements.



The following insights come from conversations with Dr. James Colbert, Senior Medical Director for Delivery System Innovation and Analytics at Blue Cross Blue Shield of Massachusetts, and Jay Sultan, VP of Healthcare Strategy at LexisNexis.

As a medical provider and Harvard Medical School faculty member, Dr. James Colbert brings the dual perspective of a practitioner and academic to his role at Blue Cross Blue Shield of Massachusetts, where he leads provider analytics and performance support. Here he talks about healthcare IT's unique challenges and solutions.

With extensive experience in payer data exchange technology, Jay Sultan is a healthcare IT expert on interoperability regulations and their impact on payers, providers, and other healthcare entities. During the last 20 years, Mr. Sultan has advised more than 180 health plans and 50 delivery systems regarding value-based care, provider data management, healthcare analytics, clinical data use, and interoperability. At LexisNexis Risk Solutions, Sultan leads strategy development, innovation, market planning, and strategic partnership initiatives for the healthcare sector.

Widespread Negative Impacts of Lack of Data Interoperability

Colbert identifies data flow as the signature obstacle for healthcare IT. Compartmented data impedes providers' ability to fully understand their patients, making it difficult to discover a patient's medical history, medicines, and status. Many times, providers cannot access a patient's current medical history from care delivered outside their own medical practice. This lack of access keeps important inputs from consideration during diagnosis and treatment—which may result in poor patient outcomes. Conversely, access to a longitudinal record gives providers more information from which to draw insights that will undoubtedly improve care decisions and result in better utilization of healthcare expenditures.

Limited data sharing also affects payers. In Sultan's experience, health plans make assumptions mostly based on meager claims data. He mentions related issues: "A lot of data has significant quality problems, and its usability is really, really suspect." Access to better, more granular data would give payers insights on members' health, including their conditions, severity, and quality of care, and it could help insurance companies predict costs.

"On the care-management side," Colbert says, "[improved data sharing] can help us better understand which members would benefit from some of the clinical programs we have. That could include palliative and hospice-type interventions and managing patients with chronic kidney disease to help anticipate the transition to dialysis or kidney transplant." It can also empower users to explore social determinants of health issues, helping to understand the links between food and housing insecurity and, for example, ER visits.

"We spend a lot of time chasing charts from providers to track down information about members," Colbert admits. It can be a painstaking, manual process to get blood pressures, hemoglobin A1c values, immunization records, and other baseline information. "Unfortunately," he adds, "changing providers or healthcare plans results in significant amounts of patient data that does not carry across."

“A lot of data has significant quality problems, and its usability is really, really suspect.”

—Jay Sultan, VP of Healthcare Strategy at LexisNexis



Systematic Gains From More Open Data Flow

Colbert says Blue Cross Blue Shield of Massachusetts works hard to get baseline information for its members, often contacting providers directly. Many medical offices transmit patient records by fax. Others allow access to electronic medical records (EMRs) but still require a time-intensive data scrub.

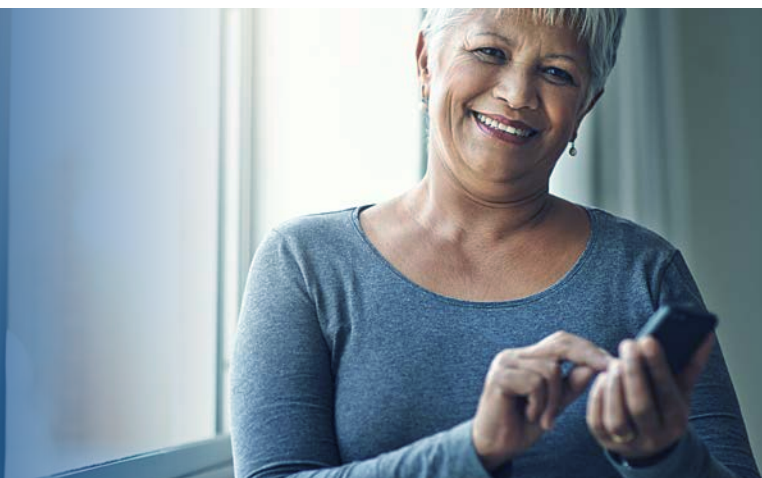
A data exchange that allows providers to send certain inputs monthly improves on these time-consuming processes. “That helps with our quality reporting,” says Colbert, “and the providers find it valuable, too.”

Sultan predicts significant positive outcomes for patients with multiple chronic conditions: “Older polychronic patients might have difficulty making their own healthcare decisions, so they really could use some help. Healthcare systems will give the best help if they have access to entire patient records—all the scans, test results, provider visits, and so on.”

Colbert envisions data from wellness smartphone apps, connected monitors and medical devices, and wearables. “I certainly see a time where powerful computing and partnering with certain technology vendors will allow us to extract some really meaningful signals.”

“In the not too distant future, it will be a lot easier for patients to really feel empowered.”

—Dr. James Colbert, Senior Medical Director
for Delivery System Innovation and Analytics
at Blue Cross Blue Shield of Massachusetts



Empowering Patients Through Data Sharing

Colbert is optimistic about data sharing and artificial intelligence: “I think there’s real hope that we can someday get to a point where there’s something like an internet of healthcare...where innovation and development are happening at a local level with each provider organization, each insurance plan.”

Patients will benefit measurably. Colbert expects them to “get information in a readily consumable format, such that they can see their doctors’ notes, lab results, blood pressure values, and also their insurance information, their EOBs [explanations of benefits], deductibles, and copays all in one place.”

He concludes, “In the not too distant future, it will be a lot easier for patients to really feel empowered.”



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