

POPULATION HEALTH MANAGEMENT

In 2015, the Centers for Medicare & Medicaid Services (“CMS”) announced its goal to transition the way the government (and, consequently, the industry) pays for health care, moving from the traditional facility-oriented fee-for-service model to more cost-effective, value-based care (“VBC”) models. As CMS and commercial payors accelerate the use of these models, providers are increasingly becoming risk-bearing organizations who are shifting their focus from episodic care to longitudinal care. Further, patients are becoming active consumers who demand price transparency and convenient access to health care services.

Studies have consistently shown that “community vital signs” such as environmental, social and support factors have a critical impact on a patient’s expected compliance and post-discharge outcome projection. In 2014, both CMS and the National Quality Forum recommended that these community vital signs be included in patient data collection and analysis. Stakeholders are beginning to use available data concerning neighborhoods and social settings to better identify and understand at-risk populations and to tailor health care delivery to them through disease management initiatives, referral management, risk stratification and preventive medicine (“Population Health Management”).

Payors and providers are focusing increasing attention on populations who use the most health care resources – the elderly, those with chronic conditions, those with severe acute conditions and those in the last year of life. According to the Agency for Healthcare Research and Quality, the top 5 percent of these populations consume nearly 50 percent of health care costs. Therefore, health care organizations are collaborating with payors, technology vendors, data analysts, community services organizations and other stakeholders to provide more continuous monitoring, coaching and early interventions to these populations.

Hall Render attorneys regularly assist clients in the development and implementation of Population Health Management initiatives. We have experience in all aspects of VBC models, including [Accountable Care Organizations](#), patient-centered medical homes and other models developed under the CMS Innovation Center and by commercial health plans. Further, our attorneys have experience in telemedicine and the privacy, security and procurement of technology, data (including electronic health records) and digital devices that typically play an integral role in Population Health Management initiatives.

AREAS OF FOCUS

- Clinical Integration & Managed Care
- Health IT
- Privacy
- Reimbursement