

What Is Population Health Management? Exploring This Data-Driven Health Care Method

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It's easy to think about medical care from a narrow perspective. You go to the hospital or clinic for an issue that might be addressed with medication, a procedure, or another type of treatment. But some experts recognize there's potential to create solutions that can improve outcomes for a larger group of people.

Given the rise in chronic conditions like heart disease and increasing health care costs, there's clearly room for improvement. Many professionals in the health care industry believe population health management could be a good solution. The only problem is, there seem to be competing ideas about what that term actually means.

WHAT IS POPULATION HEALTH MANAGEMENT, EXACTLY?

Though you'd be hard-pressed to find a consensus on the definition of this term, most experts agree on a pretty clear explanation – Population health management is the proactive application of strategies and interventions to a defined group of individuals in order to improve the health of those in the group at the lowest cost.

Based on this definition, you can see that there are a few primary goals. The first is to yield a healthier population. The second is to reduce the overall cost of care. This should also help drive efficiency. It sounds simple enough, so you might wonder why you stumble across so many definitions that say something different. A lot of this has to do with the sheer volume of companies trying to thrive in a competitive market.

Population health gets confusing because it's a name being used by a lot of vendors and service companies that want to work with or provide solutions to hospital systems, large physician groups, and insurance companies. Some people tend to confuse population health management with value-based care. They're related, but actually quite different. The second term is a compensation model that pays providers based on successful outcomes rather than the number of services provided. Value-based payment models are used as a mechanism to reward successful population health management.

HOW DOES POPULATION HEALTH MANAGEMENT WORK?

It's obviously appealing to help improve the health of a large group of people. But how do you actually do that? It starts with targeting a specific population.

Most health systems look at people within a defined geographic area. What they then try to do is look at the specific diseases that those people have a propensity to develop throughout their life, starting with paediatrics and going all the way through geriatrics. This differs from one region to another.

The next step is to segment that population into different groups based on their risk for developing those health issues. In the most basic sense, you would identify individuals who already have a diagnosis and those who are likely to have those same issues later on. This requires data analysis.

Once you have the population divided into different segments, you can develop interventions for individuals at every point along the care spectrum. According to the Centers for Disease Control and Prevention (CDC), it requires an all-hands-on-deck approach that would require partnerships from professionals in numerous disciplines.

Theoretically, population health management would prevent people at risk for certain conditions from progressing to the next stage that would require even more intensive care. We can illustrate this using people predisposed to developing type 2 diabetes as an example.

Those in this category can be managed fairly easily by 'prescribing' 30 minutes of walking per day—a very inexpensive intervention. If those people never progress to type 2 diabetes, they won't need more costly treatments associated with the condition.

IS POPULATION HEALTH MANAGEMENT POSSIBLE?

Achieving both lower costs and better health outcomes simultaneously would obviously be a win-win scenario. Whether population health management is actually feasible is up for debate, though. One major obstacle is that information isn't standardized.

The biggest issue is that of data analysis and ensuring the various electronic medical record systems have the ability to talk to each other and share data. Unless data can be aggregated, using it for population health management is a pipe dream.

This type of fragmentation is by design in some ways. There are big vendors that are in competition with each other, so it's not in their best interest to create an environment that allows the exchange of data for customers in their ecosystem with customers outside their ecosystem.

There clearly need to be changes to achieve widespread population health management. That said, there's already evidence this type of method can work. One study reported success improving health outcomes for children in North Carolina by implementing multi-tiered interventions. And that's not the only example. There are parts of the country right now where Medicare admissions per 1,000 are going down.

WORK TOWARD A HEALTHIER WORLD

Perhaps you now have enough information to chime in the next time you hear someone ask, "What is population health management?" Engaging in these types of discussions is a good way to get more individuals thinking about how we can improve health outcomes for everyone. One thing is for certain, prevention needs to play a role in helping foster a healthier world. Providing appropriate interventions to high-risk individuals can help prevent common issues.

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