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# medicine, allowing for be harvested and used

patient’s experience,” Dr. Sybert said. Modern physicians have to develop expertise in areas that previous generations of physicians never had to learn, primarily revolving around technology and data.

“At one of my previous jobs, which is no different than a lot of healthcare systems, we were tracking a minimum of 69 different quality metrics on a micro level. That was only scratching the surface of things that healthcare systems at a macro level are accountable for and currently should be tracking,” Dr. Sybert explains. “It is increasingly common for physicians to spend a lot of their time just keeping up with health IT, tracking clinical regulatory guidelines, new pay-for-performance programs, and even new laws and regulations such as narcotic databases.”

“It has become a huge learning curve in our field, even a monumental hurdle for smaller practices,” he adds. On a micro level for any physician, things like hypertensive medications are always changing from year to year. Throw in narcotic databases for physicians who have little expertise in technology, and “it becomes a real incompetence with physicians who have not been computer savvy to utilize technologies like EMRs and information exchanges that require them to access portals from other databases,” Dr. Sybert said.

In short, it becomes overwhelming.

### PAYERS

Big data affects Tennessee physicians not just in their clinical decision making and day-to-day business practices; it is also directly tied to their reimbursement. Healthcare payers store and analyze a significant portion of data not only relevant to claims, but also data based on population and services rendered. Data-driven ACOs and other coordinated care payment models enable payers to group patient populations of care into specific categories, evaluate providers on quality and value, and further transition from traditional fee-for-service payment models.

“As we transition from fee-for-service to value-based purchasing

models, the payment models begin to get very difficult to understand,” Dr. Sybert said, “Providers and payers have to agree on the data, and it has to be filled with integrity, both at the macro and micro levels.” Some physicians complain that new payer requirements take time away from patient care, and they are spending too much time on administrative tasks when they should be interacting with patients. “Physicians went into practice to treat patients. Now they get caught up in the middle. It becomes incumbent upon healthcare leadership and administration to understand how to facilitate that patient-clinical experience with physicians.”

As fee-for-service and reward for productivity becomes less important and reward for delivering the right kind of care becomes more important, “the challenge becomes how we reward positive behavior from a capitalistic mindset. Healthcare systems and physicians alike will have to shift not only behaviors, but thinking,” he explained. “It is not about how many patients a physician sees in a day anymore, but how well that physician delivers care to the patients who are seen.”

The big stumbling block for many payers will be the inability to harness and cost-effectively analyze these vast data stores. Payers need solutions to mine the data and use it to reduce fraud, manage care for their covered lives, and continue engaging consumers to take more responsibility for their own healthcare choices, and payment.

The data available to physicians, hospitals, and health plans in a sense is forcing much-needed care coordination, greater transparency and accountability. It creates opportunities for physicians to deliver evidence-based medicine to drive efficiency and, most importantly, better patient outcomes. “Mining the data in the way that it needs to be mined for improving quality-care is just around the corner,” Sybert concluded. “We are obligated to evolve our healthcare systems to be better (not necessarily more profitable) so our kids can have longer and healthier lives. An unwillingness to adapt and a short-sighted vision will surely derail that goal.” +