



UNCOVERING THE TRENDS AND CHALLENGES
SHAPING TODAY'S HEALTH IT LANDSCAPE



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INTRODUCTION

With COVID-19 vaccine distribution still underway, the emergence of a new Delta variant and telehealth services continuing to expand, healthcare in America looks a lot different than it did even just a few years ago. The past year and a half has proved challenging, but it has presented a window of opportunity for federal health agencies to reimagine and rethink how they operate. For instance, the transition to telework led to an acceleration of the adoption of modern technologies, such as cloud and automation. Moreover, health IT organizations have embraced this changing health landscape with emerging data analytics tools and new ways to manage this wealth of information.

As agencies enter this brave new world of health IT, they face a number of key decisions. It won't be easy, but with the proper tools at their fingertips, organizations will be equipped with the expertise and confidence to address the evolving needs of customers and stakeholders.





A HEIGHTENED FOCUS ON DEMOCRATIZING DATA

The world of federal health IT comprises many moving parts. Agencies across the public sector are working hard to achieve better health outcomes for patients and providers alike. The Centers for Medicare and Medicaid Services (CMS), for example, manages massive amounts of data from various stakeholders. Agencies and organizations that support CMS' mission, in addition to internal staff, all require visibility into this data. However, this information flows from various directions — and can be difficult for some to access it in a timely manner. For example, customer service representatives must quickly and efficiently answer questions from patients on access to care and benefits for beneficiaries and consumers, but they don't always have the insights required to do so.

Changing these processes is no easy task. Health agencies must work alongside commercial partners to streamline their data for operational efficiencies.

"We have to be stewards of the government," says Jane Hite-Syed, chief information officer at National Government Services. "The question we need to ask ourselves is, how do we best manage and protect the data to make it most useful to our users and stakeholders?"

It's a question she and her team at National Government Services have been working hard to answer over the past several years. The organization has contributed to CMS data integration efforts by integrating data across disparate government systems to provide secure, accurate and up-to-date

information that allows Medicare beneficiaries to access their personal health information.

Interoperability is a critical piece of the health IT puzzle — and application programming interfaces, or APIs, help bring that reality to fruition.

“Over the last year, we’ve significantly increased our creation and consumption of APIs in the work that we’re doing with CMS in the Medicare space,” Hite-Syed says. “This means that our users, our providers and all the other stakeholders from the Medicare program now have the ability to obtain secure and accurate data much faster and when they need it.”

So much faster that, in many cases, Medicare providers saw response times of five or six seconds reduced to one-fourth of a second, Hite-Syed added.

It’s all part of a larger move toward data democratization — that is, making data more discoverable, accessible and actionable for the end user.

“We need to be assessing the amount of data we have and the pain points of access and use for our users,” Hite-Syed says. “What data is most useful to our stakeholders and what is the best way to organize, manage and make that data available? For our internal teams, how do we provide secure self-service capabilities? Externally, how do we securely provide quick and accurate data access? These are all critical questions when it comes to democratizing and managing health data.”

As a crucial member of the CMS ecosystem, National Government Services continues to evolve and experiment. That means adopting



innovative technologies and piloting new approaches to modernize and solve agency problems.

“We’ve been on a transformational journey over the last several years and have focused on areas that drive customer satisfaction through modernizing legacy applications and process automation to improve quality and efficiency, while reducing costs for the federal agencies we serve and enabling the missions they provide,” Hite-Syed says.

CMS has witnessed this transformation firsthand. Once upon a time, beneficiaries had to jump through a number of hoops to submit a customer care request. Now, in partnership with National Government Services, CMS provides beneficiaries with an omnichannel customer care experience, which allows them to access their information through a centralized data platform and provides information quickly and easily.

DRIVING BETTER HEALTH OUTCOMES STARTS AND ENDS WITH THE HUMAN

Of course, it will take more than shiny new technology to change these processes for the better. According to Hite-Syed, people are at the center of improving health outcomes.

“I’m a firm believer that it’s the people and not the technology,” she says. “I think the culture that you create with the right model and the right technology is what makes an organization successful.”

But even before these tools and technologies reach the user, the human is a critical component of the design and development process.

“Human-centered design practices are the key to all of our projects. We put the human first. We engage our providers to understand their journey and pain points and how that impacts the use of our tools,” Hite-Syed explains.

In one project, Hite-Syed and her team at National Government Services helped improve the provider experience regarding receipt validation of the Credit Balance Report by employing human-centered design principles and design methods. They interviewed key stakeholders, reviewed call center data, assessed the challenges and then worked through design solutions. Through this process, they discovered that there was an urgent need for a central communication channel for the Credit Balance Report process. In June 2021, NGS implemented an updated design that enabled users to confirm receipt of Credit Balance Reports. This updated solution paid off: The call center experienced a 71% decrease in calls related to the Credit Balance Report after the new design was implemented.



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PUTTING COMMUNITY FIRST

This people-first approach also extends to the local community. As the health care landscape rapidly evolves, it's more important now than ever to ensure every community has equal access to quality health care services.

National Government Services is working with CMS on several care deficit initiatives aimed at mitigating health disparities in local jurisdictions. In an effort to combat diabetes in New York City, and specifically the borough of Brooklyn, National Government Services works alongside primary care doctors to promote Medicare services, including nutrition therapies and diabetes self-management training. Meanwhile, in the state of Massachusetts, National Government Services is researching whether patients with depression — and the providers who treat them — could benefit from a collaborative care model.

PAVING A PATH FORWARD IN HEALTH IT

All of these initiatives, of course, require collaboration between health agencies, as well as stakeholders. Hite-Syed says she's humbled to see so many organizations prioritizing health IT programs today — and she's optimistic about the future.

“We are seeing widespread adoption of new technologies across all agencies within the Department of Health and Human Services,” she says. “We have seen particular interest and action from CMS, Centers for Disease Control, Health Resources and Services Administration, National Institutes of Health and the Department of Veterans Affairs.”

For those organizations who may find themselves a bit below the maturity curve, Hite-Syed offers a few pieces of advice:

- Identify business pain points and uncover solutions by leveraging human-centered design.
- Develop a business case and assess the risks and rewards of adopting new technology.
- Collaborate with industry and academia to develop pilot programs and proofs of concept.
- Measure results and impact before, during and after implementing the technology. Where necessary, make course corrections to achieve desired outcomes.

Indeed, the future of health IT in the U.S. isn't entirely clear. New health challenges may arise and emerging technologies will continue to enter the market. While agencies can't predict the future, they can begin taking steps to set themselves up for success moving forward.

“Follow the market and know that many technologies are still revealing themselves,” Hite-Syed says. “Looking at people, process and technology through a flexible, adaptable lens will help agencies prepare for the future.”



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