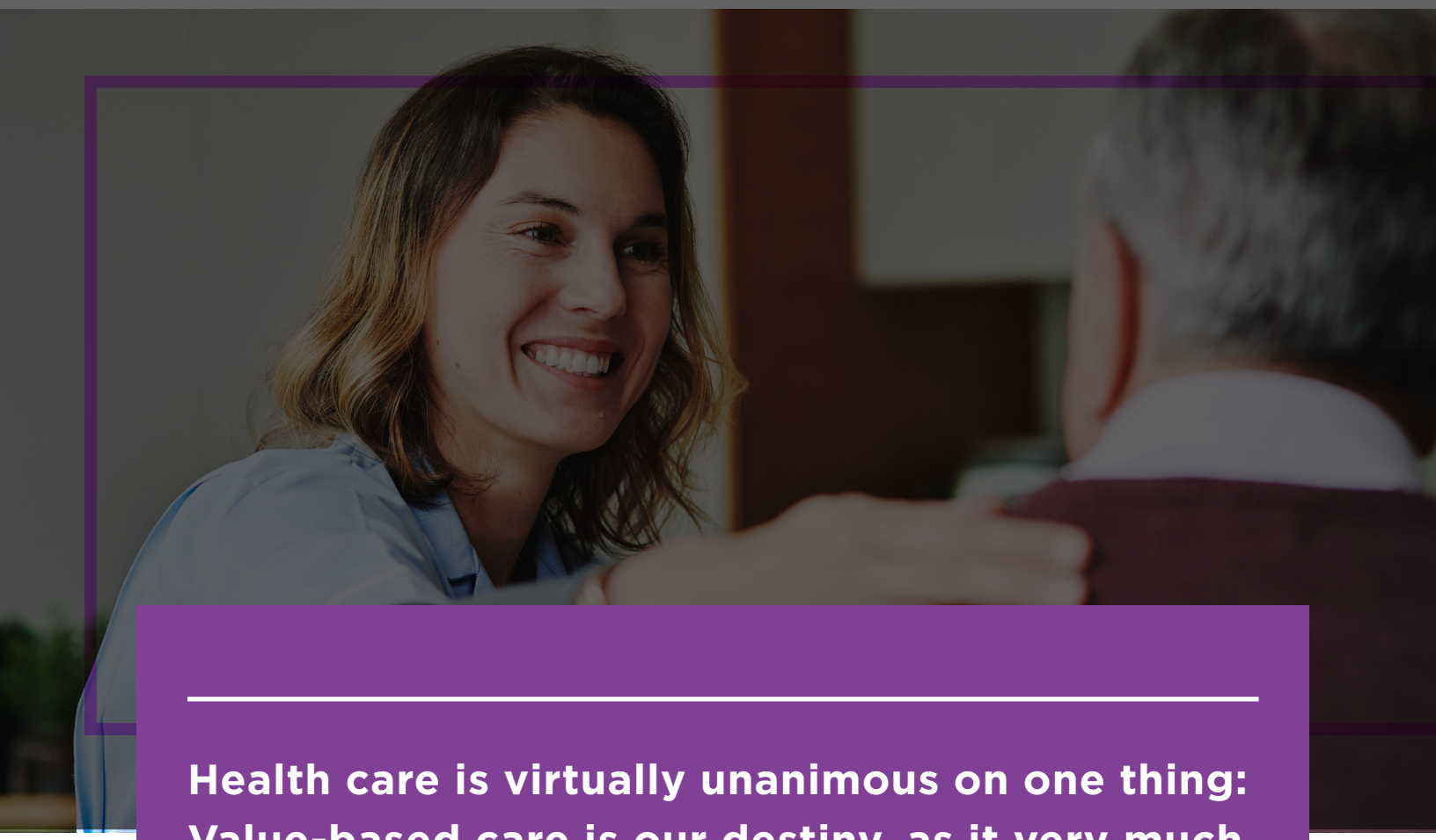
# NINE WAYS MOBILE DEVICES DRIVE VALUE-BASED CARE

HIMS Health Information Management Systems



**Health care is virtually unanimous on one thing: Value-based care is our destiny, as it very much should be. But the journey toward that destiny has been challenging, and we are far from arrival yet.**

Since the term was coined nearly two decades ago, the value-based care policy pendulum has frequently swung between efficiency and outcomes. This dichotomy makes sense because value and outcomes are not at all synonymous. Value is a balance between low costs (efficiency) and maximum outcomes. High-quality health care that people can't afford is worthless – so is efficient "care" with poor outcomes.

# VALUE-BASED CARE


Fortunately, a strategy comes along every so often that simultaneously delivers both new efficiency and improved outcomes – without tradeoffs. The only cost is an openness to delivering health care in new and better ways

That's where we are with mobile devices today.

**Best of all worlds**

Everyone – patients, clinicians, and health care executives – has smartphones and tablets that they constantly use for work, family, and entertainment. Why not make them a standard health care platform in cases where we can save money and improve outcomes? We absolutely should.

Mobile devices empower users with instant access to new information. Patients yearn to be informed, and medical experts encourage that. Smartphones and tablets for the first time give patients direct, convenient access to resources in and beyond electronic health records.

Clinicians, too, yearn to be empowered, and nothing is less empowering than spending time toggling among devices, apps, platforms, channels, and screens to coordinate care, document patient, encounters, manage prescriptions, etc.


*SMARTPHONES, TABLETS POWER VALUE-BASED CARE, WITH NO TRADEOFFS*

# NINE MOBILE USE CASES

Here are nine ways mobile devices can, do, and will empower patients and providers while cutting costs and, in every case, improving the odds of better outcomes. That's the definition of value.

**Diagnosis** – In one study, patients in a U.S. clinic used interactive symptom-checkers in potential emergencies. Evidence showed the app triaged as effectively as junior doctors and senior nurses. Smartphone sensors have also helped patients screen for melanomas and distinguish tremors. Apps that detect signs of cancer recurrence have improved median survival rates when compared to optimized standard imaging follow-up.

**Behavior change** – Walking is great exercise, and step counters encourage it. They are the simplest example of mobile-based goal setting, gamification, and social competition to foster healthy behaviors (as well as BMI and heart health). Other apps can help patients better adhere to their treatments and medication regimes.

**Digital therapeutics** – Mobile apps for cognitive behavioral therapy have significantly improved patients' management of depression, anxiety, and stress – outcomes equivalent to those achieved via face-to-face therapy. Other potential applications include substance abuse, acrophobia, insomnia, and migraines.

**Disease-related education** – App-delivered content can help patients better manage their conditions, answer their questions, and make shared decisions with clinicians. Knee patients have benefitted, and preliminary evidence shows promise for patients with heart disease, inflammatory bowel disease, broken bones, and several cancers.

**Closing care gaps** – Consumers are accustomed to alerts and notifications on their phone. Progressive health care systems are using them to remind patients of the need for, say, colonoscopies. In these cases, the alerts are driven by an automatic review of the health care systems' electronic health records (EHRs), which can pinpoint patients who have fallen behind schedule. Catching up on the screenings drives new revenue while improving prevention and early detection.

**Appointments** – Empowering patients to schedule their own appointments relieves administrative staff of tedious yet costly busy work. If patients schedule their appointments via a mobile self-service app, automated reminders are typically part of the package. Sharing lab results, refilling prescriptions, and downloading EHR data can also be online and automated.

**Forms** – New patient enrollment forms, insurance forms, patient health questionnaires – why should patients be forced to do them on clipboards in the clinic office? And why should administrative staff be forced to decrypt handwritten responses, then manually enter data that should have automatically been captured? No good reason.

**Care coordination** – Value-based care is particularly difficult when integrated care teams aren't truly integrated. Smartphones and tablets can improve care coordination by enabling geographically dispersed clinicians (and patients) to come together by text, voice, video chat, links, and notifications. Clinicians can share patient histories and treatment plans among multiple care teams, including primary and secondary care, emergency and outpatient care, behavioral and primary care, and teams treating disparate comorbidities.

**Clinician notes** – Consumers are already talking to their smartphones and tablets (and speakers, for that matter) to dictate notes and operate apps. Clinicians, too, should be able to speak into their mobile device and have specially trained, AI-powered voice recognition capture notes them with accuracy. It saves time and labor, gets the notes documented much earlier, and lets clinicians be more attentive during the patient visit.

As you can see, there are many ways that mobile devices can drive value-based care, both from the efficiency and outcomes sides. Although integrated health care practices are sometimes tempted to implement all of these new capabilities at once, we'd recommend you pick three or five to start.

Implement them, bring everyone on board, manage the change, and spend a solid year institutionalizing these wonderful new tools. Soon, you'll find yourself much further along your value-based care journey than you expected. And the pendulum, swinging or not, will be irrelevant.

Source: Rowland, S.P., Fitzgerald, J.E., Holme, T. et al. What is the clinical value of mHealth for patients?. npj Digit. Med. 3, 4 (2020). https://doi.org/10.1038/s41746-019-0206-x