

Healthcare ecosystems critique essay

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There are a number of federal government programs that utilize technologies to accomplish the seamless exchange of health information. The reasoning behind this is to provide consumers with a higher quality of care. I will be discussing three such programs in order to analyze each program's use of health informatics to include licensure, certification and accreditation, along with how each program impacts clinical quality, reimbursement and patient access to care.

Other areas of discussion will involve the Nationwide health Information Network (NHIN) and how each program discussed below relate, along with the evaluation of the roles health informatics professionals play in each mentioned program. The three programs that will be discussed are the following, the National Council for Prescription Drug Programs (NCPDP), Health Level 7 (HL7), the Healthcare Information Technology Standards Panel (HITSP). The National Council for Prescription Drug Programs (NCPDP) is a non-profit organization with 1600 members strong that represent almost every sector of the pharmacy industry.

The NCPDP is accredited by the American National Standards Institute (ANSI), which is the institute that oversees the use of norms and guidelines that impact businesses in almost every sector (ANSI, 2012). With ANSI accreditation, the NCPDP provides leadership and healthcare business solutions through education standards and has been named in federal legislation including, HIPPA and Medicare Part D. Overall, the NCPDP focuses on pharmacy services and has the highest member representation from the pharmacy services sector of healthcare.

The main focus of pharmacy services include, the sharing of patient medications, supplies and services within the healthcare systems electronically. The NCPDP has and will continue to have an impact on clinical quality for several reasons by creating the standards by which a pharmacy operates. Without these standards, for example, physicians would still be handwriting prescriptions that the patient would hand deliver. The patient would be required to pay cash and then hope to be reimbursed by their insurance providers.

There would be numerous types of claim forms to work through, and Medicare Part D would be difficult to administer. The NCPDP, however provides harmony across the pharmacy industry through proper use of healthcare technology. One such technology is the way patient prescriptions are exchanged. The NCPDP has created a Script standard that allows proper exchange of prescription information between prescribers, pharmacies, intermediaries, and payers. The overall impact to this type of standard is the reduction manual errors.

Another standard is the Structured and Codified Sig Standard that allows better communication between prescribers and pharmacists which improves the efficiency of the prescribing and dispensing activities again reducing any chance of manual error. An additional standard is the Formulary and Benefit standard that provides information to the prescriber to consider the most appropriate drug choice for the patient, such as insurance limitations on coverage, costs to the patient, and any alternative generic medications on the formulary.

There are a few more standards that the NCPDP has developed to ultimately improve services for all parties involved in the pharmacy industry, the most important of these services is overall patient care and clinical quality. Among the standards previously mentioned there are two more standards provided by the NCPDP that are directly related to reimbursement for services. The first is the Medicaid Subrogation Standard and the second is the Billing Unit Standard, both of which are designed to provide consistent and better defined billing for pharmacy transactions for accurate reimbursement.

Patient access to care becomes a better experience through the standards developed by the NCPDP. By implementing these standards, as mentioned before, unnecessary error is avoided. The primary goal of standardization is to better enable interoperability within a multi-vendor, multi-network, multi-disciplinary healthcare system (Ashton, Gilbertson, & Mullenix, 2012). With a system of standards in place, the patient is able to receive services needed without delay, error, and complication. In addition to the NCPDP as mentioned previously, another federal government program related to health informatics is Health Level 7 (HL7).

HL7 was founded in 1987 as a not-for-profit organization and is accredited with the ANSI-accredited standards. As an international organization, HL7 is composed of nearly 2300 members, of which 500 are corporate representatives accounting for roughly 90% of the information systems vendors servicing the healthcare industry (Health Level Seven International, 2007-2012). HL7 is an ANSI-accredited Standards Developing Organization, or SDO, that focuses on one particular domain within the healthcare industry. HL7's domain is clinical and administrative data.

One main goal of HL7 is to produce a messaging standard for healthcare information systems. This standard will improve clinical quality in several ways. First, it paves the way for better sharing, retrieval, integration, and the exchanging of health information and data. This type of healthcare technology is now found in the form of the Electronic Health Record, or EHR. As the healthcare industry moves towards complete EHR, there must be flexibility, and cost effective ways to allow the proper integration and development of systems.

This integration will allow the sharing of health records from all industries in the healthcare arena. This integration will standardize the patient medical record and allow seamless communication between hospitals, clinics, physician offices, dental offices, and pharmacies within the health system. This seamless communication between healthcare providers will allow caregivers to provide better service by making more informed decisions regarding their care. One way HL7 provides a better patient experience is the processing of patient claims and medical reimbursement for services.

With healthcare information systems communicating more efficiently, and the development of the EHR, patient's claims are submitted more correctly with minimal error thus allowing the patient to be given access to affordable healthcare without the hassle of issues caused by incorrect claims submitted on the patient's behalf. With these standards in place, providers can submit more detailed and accurate information to insurance providers, which includes Medicare and Medicaid services. This will provide a more secure, faster, and accurate way for reimbursement for health related services.

HL7 provides patient access to care with the development and implementation of the EHR. With the EHR, a patient can receive a broad range of services such as ER, clinic, urgent care, dentist office, specialist, and pharmacy all in the same day allowing for access to all providers the same information regarding patient history and services received. This type of service would not be possible without a standard developed for the streamlining and electronic organization and storing of patient record.

Along with the NCPDP and HL7, the Healthcare Information Technology Standards Panel (HITSP) is an organization with a set of standards to support the healthcare industry. Specifically, the HITSP is focused to enable and support widespread interoperability among healthcare software applications as they interact within the National Health Information Network (NHIN). The HITSP is funded through contracts under the U. S. Department of Health and Human Services and is ANSI-accredited. One main goal of the HITDP is the widespread adoption of the EHR among all healthcare industries within 10 years.

Another goal of the HITSP is to “ harmonize relevant standards in the healthcare industry to enable and advance interoperability of healthcare applications, and the interchange of healthcare data, to assure accurate use, access, privacy and security, both for supporting the delivery of care and public health (American National Standards Institute, 2009). ” One way the HITSP is harmonizing relevant standards through clinical quality is by developing a standards-based network that will allow and support the exchange of healthcare data nationwide.

Clinical quality is created through making EHR's more accessible and transferable all the while protecting the security and privacy of personal information. Healthcare professionals and providers can then partner with their patients to make better informed decisions about treatments, prescriptions and healthcare or lifestyle choices moving forward. This system is better shaped and organized as all providers, doctor's nurses, and technician's voice issues, concerns and successes that healthcare data distribution.

The HITSP plays a large role in the reimbursement for services by making the process as streamline as possible. For example, as the world moves forward with technology, everything from movies, music, information, and games are at the individual fingertips. People can manage finances, pay bills, and communicate in real time. An individual's personal health information, however, has seemed to lag in this area. When it comes to reimbursement for services, the patients records exist, but doctors, pharmacies and insurance providers are using diverse and various systems that make the exchange of information slow and difficult.

By creating a standards-based network that will support the exchange of healthcare data, the HITSP has made personal health information and data more easily accessible and manageable, specifically when it comes to the reimbursement of services rendered. Another way the HITSP is supporting the healthcare industry is by providing patients better access to patient care. One specific way is by allowing patients to manage and control access to their registration and medication histories. This consumer empowerment is known as IS 03 (American National Standards Institute, 2009).

IS 03 enables better patient access to care by allowing point of care data to the provider, reduction of errors and unneeded treatments, accurate diagnosis and treatments, alert to subsequent written prescriptions, reduction of redundant information, to encouraging consumers to be more active in managing their own healthcare, among several other points. The HITSP also concerned in implementing other standards not mentioned here. All of these programs are common to one goal, and that is the development and functionality of a network that will enable better patient care through streamlining patient electronic record.

Each of them together and individually supports the Nationwide Health Information Network (NHIN) through creation and delivery of networks utilizing health informatics in the exchange of data. Each of them was created with the idea and goal to standardize and integrate health systems that will provide the ability for healthcare providers to securely share patient data and information between those systems. Overall, the NCPDP, HL7 and HITSP all have the systems or networks in place that allow delivery and organization of the Electronic Health Record into the network of networks, which is NHIN.