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CtHIMA  
EDUCATIONAL MEETING  
OCT. 23rd  
SHERATON HARTFORD SOUTH HOTEL

8:00 - 8:30 Registration

8:30 - 9:30 Artificial Intelligence and Computer-Assisted Physician  
Documentation: An Overview of the Technology and  
Proposed Benefits

Speaker: Matt Turner, National Account Manager  
Dolby Systems

9:30 - 10:30 Achieving Population Health Through Valued-Guided Care

Speaker: Moshe Starkman, Senior Director, Advisory  
Solutions at nThrive

10:30 - 11:30 Alternative Payment Models: Finding Success with an Episode of Care/  
Bundled Payments

Speaker: Speaker: Moshe Starkman, Senior Director, Advisory  
Solutions at nThrive

11:30 - 12:30 Overview Of the ONC's Information Blocking Final Rule

Speaker: Stephanie Sprague Sobkowiak, JD,  
Murtha Cullina LLP

## AI and CAPD: An Overview of the Technology and Proposed Benefits

Artificial intelligence (AI) is playing an increasingly vital role in healthcare and will continue to dramatically influence clinical documentation improvement, quality scores and reimbursement.

This session will explore some of the ways AI is being infused into our daily workflow, allowing organizations to improve documentation at the point of capture.

Computer-Assisted Physician Documentation (CAPD) with AI offers many features to help physicians reduce the time it takes to create documentation that provides the specificity needed downstream for appropriate reimbursement. Productivity gains come from real-time identification of documentation lacking specificity, auto-abstraction of abnormal lab values, possible medication interaction identification and overall reduction in queries from CDI and coders. In addition, the ability to connect CAPD and traditional back-end CDI for additional efficiencies will allow for greater future development. Finally, you will hear outcomes of success from early adopters and learn that as this technology continues to mature, the possibilities are endless.

**What attendees will learn:** This session will teach you how embedding CAPD with AI into the daily workflow will allow your organization to improve documentation at the point of care, increase physician productivity and reduce overall physician query fatigue.

## **Presentation Summary**

“Population Health” has remained an enigmatic term often used to create intrigue but lacking the substance necessary to command true meaning. In this session we will contrast two popular interpretations of the term and establish an operating definition that incorporates the many considerations necessary to reduce the cost of care in the United States while increasing access to the appropriate care at the best time. We will likewise explore Value in the context of health care and what it means to operate from a patient-centric, outcomes-driven orientation.

From an established definition of both Population Health and Value we will discuss the impact Population Health Management (PHM) programs have on the future state of health care and what organizations are doing today to promote quality, reduce preventable care, and manage the overall cost of care through better technology, analytics, and service orientation. The success of these programs is directly correlated to the effective transition from fee-for-service (by volume) payment models to fee-for-value, i.e. cost and quality accountable, models.

To transition to Value-based Care and navigate the challenges of concurrently supporting two payment models, health care systems must have meaningful and actionable analytics along with population health management tools to highlight descriptive data (what was) and predictive data (a range of what is expected) to help optimize future information capture and clinical practices. Health care systems need to evolve to take advantage of the rapidly accelerating use of better data and develop improved health care quality practices at a greater value for their patients.

## **Objectives**

- Command a working definition of Population Health and Value
- Understand the evolving role of Population Health Management (PHM) programs
- Understand risk-based contracting and the utilization of strong analytics
- Highlight some of the real-world challenges facing organizations in the transition process from fee-for-service reimbursement models to Alternative Payment Models (APMs.)
- Lessons learned from COVID-19

## **Presentation Outline**

- The objectives of Population Health Management (PHM) programs
- The evolving role of the HIM professional in PHM and the power of the data
- Skills needed to excel in PHM
- The difference between descriptive and predictive analytics as it pertains to the transition from fee-for-service reimbursement models to fee-for-value.
- Lessons learned from COVID-19

## **References**

- CDC: Centers for Disease Control and Prevention
- CDC, “What is Population Health,” July 2019
- Harvard Business School, “Strategy and Competitiveness”
- CMS, “National Health Expend Data”

## Overview Information Blocking

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This seminar will provide a high-level overview of the Office of National Coordinator's ("ONC") Information Blocking Final Rule, which implemented provisions of the 21<sup>st</sup> Century Cures Act. The Information Blocking Final Rule is designed to provide individuals with easy access to their health information by prohibiting practices that are likely to interfere with such access. In this seminar we will discuss some of the provisions that are applicable to health care providers as well as the intersection of the Information Blocking Final Rule and other federal and state privacy laws