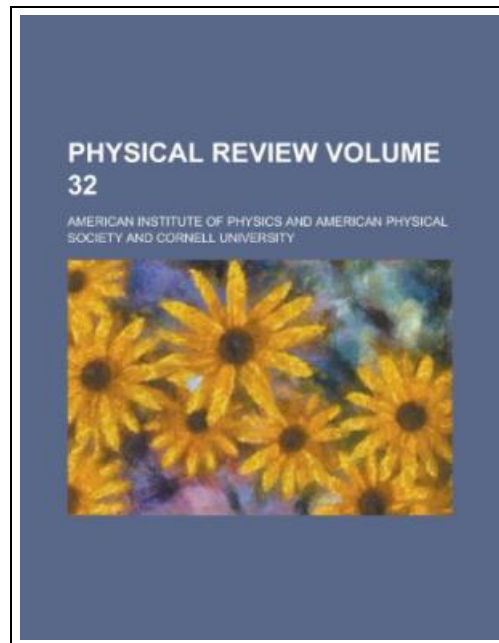


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RareBooksClub. Paperback. Book Condition: New. This item is printed on demand. Paperback. 62 pages. Original publisher: Washington : U. S. G. P. O. , 2009. LC Number: KF26 . L27 2009d OCLC Number: (OCoLC)642326273 Subject: Health services administration -- Information technology -- United States. Excerpt: . . . 11 bust Federal commitment to comparative effectiveness research so that health pro-fessionals can ensure that each individual patient gets the care that is right for him or her. Reforms must also ensure that patient information can be used not only to optimize care for one specific patient but also to improve care for all patients through, for example, the development of clinical care guidelines and disease management protocols. These goals require the use of patient information and appro-priate access to patient records, with privacy safeguards as currently required under HIPAA rules. Ultimately, however, to effect real change, provider payment systems should be based on value rather than the number of procedures, drugs, tests one orders - re-gardless of whether the best evidence calls for such action. To keep coverage afford-able and to really fix our broken health care system, we must change the way we deliver and pay for health care. Financial incentives must be changed so that plans compete on quality and efficiency, providers are rewarded for quality and keeping their patients healthy rather than for the volume of services delivered, and individ-uals are encouraged to seek high-quality care and to be more actively involved in maintaining their own health. We believe a computerized care support system that is well-designed and imple-mented appropriately can help restore and enhance the physicians healing mission. Maximizing information available to the clinician means optimizing care for the pa-tient. The right systems will yield more time with patients, better information about care, and less time with...



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