The Ways To Improve Health Care System

Ireson et al. (2002) mentioned that measuring value (quality and cost) continues to be a major challenge in health care as providers respond to societal pressures (primarily from the payer) to standardize processes and patients assume the role of consumer. Survey results indicate high levels of public distrust in report cards. The information that patients desire often is not what is reported because traditional indicators of quality often serve institutional needs rather than patient needs (Ireson et al., 2002). According to McGlynn and Adams (2014), as the amount of information collected on quality performance expands attention shifts to how this information can be meaningfully transmitted to consumers. Both methodological and communications issues arise and interact. They suggested that minimizing the amount of information on a report card facilitates use by the intended audience. They mentioned that it is a continuous debate among those producing report cards to balance between offering enough information but not too much. Also. They suggested that the available information on the Internet offers an opportunity for individuals to tailor results to their decision. Report card with same basic data source has the potential to produce different results and may contribute to consumers' confusion and subsequent unwillingness to use this information to guide choices. There is no unambiguously correct way to produce public information, since the methodological choices may affect the results, transparency of method should be highly valued (McGlynn & Adams, 2014). I think it is important for the report card to be transparent to bring awareness and emphasize quality measures. The information should be basic, concise, and easily understandable for the consumer to easily comprehend. The use of report cards is a good tool to guide and assist consumers in decision making and the transparency will continuously stimulate organizations or healthcare providers to meet the standards and be accountable to improve the quality of care.

The article written by Findlay (2016) stated that an important way to enhance patient or consumers engagement and improve the quality of care is by encouraging them to make use of performance, quality, and patient experience information in choosing health care providers. The growing trend of consumers' interest in rating and use of smartphones, tablets, and the internet to access websites provides the consumers the report assessments and ratings of providers, primarily physicians and hospitals. New laws and marketplace dynamics are laying the foundation for enhanced transparency, greater provider accountability, and consumer engagement. These laws are : (1) The Affordable Care Act (ACA), mandating the public posting of performance information on Physician Compare managed by the Department of Health and Human Services to collect provider quality ratings and report them to consumers; (2) the Medicare Access and CHIP Reauthorization Act of 2015 created a new quality measurement and payment system for physicians who treat Medicare patients. The author concluded that a joined effort of the public and private sectors could accelerate movement toward the “tipping point” and lead to much greater use of meaningful provider report cards in a truly patient-centered system (Findlay, 2016). I think the use of health care report cards will improve health outcomes by encouraging the continuous participation of the consumers to include their ratings and preferences using advanced technology. The collaborative method of the creator of the report card and the input from consumers will provide immediate feedback on the quality of the health care provider. The use of advanced technology to collect, store, analyze, transfer and retrieve information will facilitate ease, convenience for the report card developer, and more chances to motivate or convince consumers who are technology-oriented to participate but

limits those who are technology challenged. The immediate collection of data thru advanced technology will facilitate efficiency, immediate response, and the possible creation of a plan of action to improve the quality of care that is patient-centered. It is therefore hoped that health information technology can also improve the performance of the U.S. health care system, by improving quality and patient safety, reducing costs and potentially enhancing access (Luck, Vriesman & Fu, 2014).

The implementation of information technology affects the structure of the health care financing system by increasing the strategic budgets as it requires a larger investment due to hardware, software, training, support costs, and readjustment of workflow, possible increase in manpower and labor cost. The human organizational factors often dominate technical challenges. Healthcare providers and personnel need to take time to learn the system efficiently. According to Luck, Vriesman & Fu (2014), large initial capital investment is required not only for hardware and software but also for planning, project management, training, and lost efficiency during startup; offsetting financial returns may take years to accrue.

The Veterans Health Administration (VHA) is more likely to implement comprehensive clinical information technology solutions because it serves a large number of rural patients and has established clinician relationships and technical infrastructure, has perhaps the nation's largest-scale implementations of telemedicine (Hill et al., 2010). Baker et al.(2008) stated that the VHA has focused on standardization and systemization, developing a systems view of the network to improve patient access and flow. Also, they noted that VHA can see a return on investment more clearly because the long-term quality and efficiency benefits accrue to them (Baker et al., 2008).