

Exceeding Expectations

The ACR's Population Health Management Committee is helping radiologists improve patient health while contributing to downstream savings.

he goal of population health management (PHM) is to proactively keep a patient population as healthy as possible, minimizing the need for expensive interventions such as ED visits, hospitalizations, imaging tests, and procedures. To accomplish this, PHM requires healthcare providers to develop new skill sets and infrastructures for delivering care more efficiently — and in a more highly coordinated manner. As this new approach to healthcare delivery develops, the field of radiology is uniquely positioned to play a crucial role.

To better understand what PHM is and where radiology fits within the wider conversation, the continuum of PHM can be divided into three major portions: surveillance/prevention, acute care, and chronic disease management. The surveillance and prevention aspects of PHM can include interventions such as cancer screening, the use of AI tools, or predictive analytics to anticipate medical issues before they progress to an acute stage. This approach involves stratifying risk between discreet patient populations and mitigating that risk in a proactive manner.

For instance, in the near future, patients at risk for heart disease could benefit from predictive analytics that guide which patients would benefit from having a coronary CT and, in turn, who should seek guidance from their PCP. In conjunction with



clinical interventions, management solutions could shore up missed care opportunities and other gaps in a patient's care by identifying and mitigating social determinants of health.

Even with the most robust surveillance and preventative initiatives aimed at keeping patients healthy, there will be instances in which their condition will progress to acute care status. This is traditionally where radiology plays a central role in healthcare, and radiologists can optimize their involvement in patient care by adhering to Choosing Wisely[®] guidelines, clinical decision support, Imaging 3.0[®] case studies, and following best practices when it comes to inpatient care coordination.

Finally, despite our best efforts, acute health issues can become chronic health problems. In this case, patients in a PHM framework are further subdivided into populations that follow appropriate chronic disease-management care pathways. PHM tools used to optimize care for this group include follow-up programs, oncology interventions, and remediating findings that predispose patients to chronic diseases such as fatty liver and metabolic syndrome.

Although the above three-part framework presupposes scenarios in which radiologists are deeply embedded in care coordination, in the current climate, radiologists often find themselves on the periphery when it comes to direct patient care. As such, contributing to continuity of care often presents a challenge. Some specialties, however, can take advantage of opportunities to consistently engage directly with patients and manage their care. Screening for breast cancer, virtual colonoscopy, and lung cancer screening are just three instances where radiologists play a central role in coordinated patient care, and other subspecialties can learn from these examples. Instead of simply sitting in a dark room reading images, radiologists should find ways to become involved in managing patients to make themselves indispensable to quality care.

By employing image-based screening and other technologies to enhance the health of discreet patient populations, radiologists can meet and exceed strategic health system needs. Further, by working with payers and health systems, radiologists can leverage their expertise to participate in alternative payment models and risk-sharing arrangements. By partnering with the ACR, members also have the opportunity to help develop quality metrics that can lead to tighter care integration. Ultimately, our field should aim to be recognized by referring clinicians, the healthcare enterprise, and patients, as providing high-quality and cost-effective care.

By Syed F. Zaidi, MD, MBA, chair of the PHM Committee of the ACR Commission on Patient- and Family-Centered Care and associate chief medical officer of integrations with Radiology Partners, and Ryan K. Lee, MD, MBA, co-chair of the ACR's PHM Committee and chair of the department of radiology at Einstein Healthcare in Philadelphia

To learn more about how radiology can position itself to help health systems realize downstream savings by improving patient health, watch a recent PHM Committee webinar at acr.org/screening-webinar featuring Cecelia C. Brewington, MD, FACR; Lauren P. Golding, MD; Debra S. Dyer, MD, FACR; Ryan K. Lee, MD, MBA; and Syed F. Zaidi, MD, MBA. During the webinar, the panelists dive deeper into how radiology's central role in patient screening is one of the key foundations of successful PHM.