13th World Congress on

Healthcare & Technologies

June 14-15, 2018 | Dublin, Ireland

RE-DEFINING QUALITY DATA AND OUTCOMES FOR HEALTH SYSTEMS WITH BLOCK CHAIN TECHNOLOGY

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Ha ealth systems are perplexed by the constant changes in quality data. First, the ACA required health systems to change from a quantity based system to a quality based system which demanded redefining metrics and measures for each hospital department. Now, blockchain is changing the entire healthcare business model and making quality changes seem obsolete while bringing transparent, immutable, and trustworthy data in the control of providers and patients. Data has emerged as the most valuable asset in healthcare. As blockchain is redefining these standards, how do we approach data and improve outcomes while creating synergy between technologists and clinicians? What are changes that we will encounter as internists? What are changes with the C-CDA, patient charts, SOAP and REST notes that we are to anticipate? This system eliminates information silos by creating a unifying backend that can be shared by the healthcare ecosystem. Blockchain redefines data provided to health consortiums leading to real-time access of metrics and measures. Blockchain technology cycles transactions on the Ethereum network leading to savings for health organizations, clinicians, and patients. But, what does that mean for providers today and how do health systems achieve such savings? The biggest challenge in healthcare IT is the legacy systems that have become a standard part of operations for providers. How can a health system adopt blockchain technology in the most resilient manner? What is the best approach to bridge the gap between health systems that are still adopting ACA standards to adopting an entirely new healthcare model?