

## Characteristics of Home-Based Care Provided by Accountable Care Organizations

The aim of this study was to describe the use of home-based services in accountable care organizations (ACOs). Many ACOs provide home-based care to high-need patients, including primary care, acute care, support for care transitions, and interventions to address social determinants of health. However, many services are not well reimbursed, limiting program growth. Expanding Medicare ACO home-visit waivers to all risk-bearing ACOs and covering integrated telehealth services would improve the financial viability of these programs.

*\*Mechanic RE, et al. American Journal of Managed Care. 2022; 28 (5).*

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## The Use of Blockchain Technology in the Health Care Sector: Systematic Review

The aim of this study was to systematically review studies on the use of blockchain technology in health care and to analyze the characteristics of the studies that have implemented blockchain technology. The findings could help the scientific community to understand the implementation aspect of blockchain technology. The results from this study help in recognizing the accessibility and use of blockchain technology in the health care sector.

*\*Elangovan D, et al. JMIR medical informatics. 2022; 10(1): e17278.*

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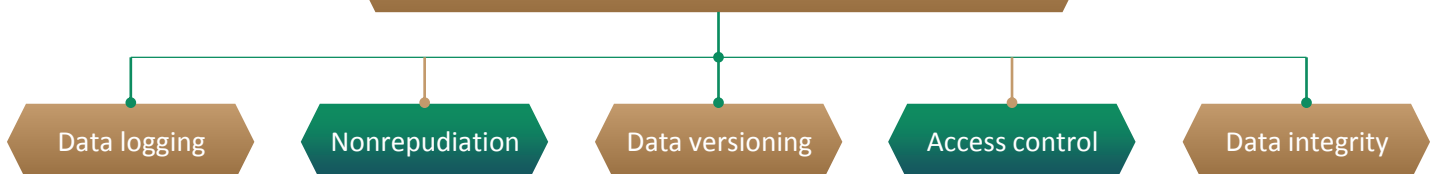


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## USABILITY



## REASON FOR AND APPROACH OF BLOCKCHAIN TECHNOLOGY APPLICATION



## Advancing digital health applications: priorities for innovation in real- world evidence generation

Within the sense of intelligent health, Blockchain could have distinctive benefits from a context-aware viewpoint. In this paper, the author discussed numerous use cases of Blockchain in the healthcare industry. The symbiotic relationship between Blockchain and intelligent health was discussed. Additionally, the author addressed many obstacles for integrating Blockchain-based applications in the health sector and several future research prospects.

*\*Stern AD, et al. The Lancet Digital Health. 2022; 4( 3): e200-206.*

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### Missing data

Handling and understanding the implications of missing data during study design and evaluation.

### Study endpoints

Selecting, defining, validating, and establishing both clinical and non-clinical endpoints.

### Comparator group

Identifying whether application plus standard of care versus standard of care alone is sufficient and whether washout periods are indicated.

### Multimodal interventions

Testing individual modules or components of digital health applications alone: when, why, and how?

### Study question

Understanding and standardizing hypothesis testing around whether digital health products are complements or substitutes to existing standards of care.

### Equity

Disambiguating digital application use from phone ownership in the evaluation of safety and effectiveness.

### Generalizability

Characterizing the generalizability and transportability of findings to broad populations.

### Confounders

Controlling for clinical professionals who play a critical role in deploying digital tools, and might be differentially supportive of the product in the clinical study context compared with the real world.

### Fit for purpose

Generating a clear, broadly accepted conceptual framework for when certain approaches are acceptable with respect to data, study design, analytical methods, etc.

**Topic areas where precompetitive collaboration, research, and the development of best practices will speed broad acceptance of high-quality evidence to support digital health applications**