The Mysteries of Meaningful Use

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David Hunt has no real or apparent conflicts of interest to report
Learning Objectives:

• Understand the larger framework and timelines for becoming a meaningful user of electronic health records.

• Identify the national programs and local resources that are available to help become meaningful users of electronic health records.

• Describe how the meaningful use of an electronic health record will help improve the quality, safety, and value of the care they provide.
ONC: Office of the National Coordinator for Health IT

- Resource for the entire U.S. health system
- Supports and coordinates efforts to improve health care through:
  - Adoption of Health IT
  - Nationwide health information exchange
- Created in 2004 by Executive Order and codified into HHS in the Health Information Technology for Economic & Clinical Health Act
Section 3001: The National Coordinator shall develop infrastructure that ...

(1) **ensures** that each patient's health information is **secure** …

(2) **improves** health care **quality** reduces medical errors, reduces health disparities…

(3) **reduces** health care **costs** …

(4) **provides** appropriate information…

(5) **ensures** the inclusion of meaningful **public input**…

(6) **improves** the **coordination** of care…

(7) **improves** public health activities…

(8) **facilitates health** and clinical **research** and health care **quality** ;…”

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Department of Health & Human Services
Office of the National Coordinator for Health Information Technology
Cont’d…

improve, ensure, reduce, protect, facilitate, promote, improve…

(9) promotes early detection prevention, and management of chronic diseases;

(10) promotes a more effective marketplace, greater competition greater systems analysis, increased consumer choice, and improved outcomes in health care services; and

(11) improves efforts to reduce health disparities.
ONC Aims

- Define Meaningful Use
- Support Attainment of Meaningful Use
- Establish Public Trust
- Foster Health IT Innovation
Sir Cyril Chantler

Medicine used to be simple, ineffective and relatively safe.

Now it is complex, effective and potentially dangerous.

EHR Use in U.S. Office-based Physicians

Source: CDC/NCHS National Ambulatory Medical Care Survey
http://www.cdc.gov/nchs/data/hestat/emr_ehr/emr_ehr.htm
Major Barriers to Adoption of Electronic Health Records

Capacity to select contract, install, implement: 39%

Transition productivity loss: 41%

Concerns about system obsolescence: 44%

Finding an EHR to meet needs: 54%

Uncertainty of return on investment (ROI): 50%

Amount of capital needed: 66%

Why Providers Should Implement EHRs?

- Quality and Efficiency of care that is delivered
- Meaningful Use EHR Incentive Program
  - Many private plans are now aligning their existing quality improvement programs around meaningful use
- Health care reform programs: e.g. Accountable Care Organizations (ACOs)
- EHRs can assist with reporting grant requirements
How Physicians Can Change the Future of Health Care

Michael E. Porter, PhD, MBA
Elizabeth Olmsted Teisberg, PhD, MEngr, MS

“…health care reform must focus on improving health and health care value for patients…”

…Physicians can lead this change and return the practice of medicine to its appropriate focus: enabling health and effective care.”
• Improved individual and population health outcomes
• Increased transparency and efficiency
• Improved ability to study and improve care delivery
Meaningful Use of EHRs

- Improved individual and population health outcomes
- Increased transparency and efficiency
- Improved ability to study and improve care delivery
Stage 1 MU Requirements

**CORE**
- Use CPOE
- e-Prescribing
- Drug-drug & drug allergy checks
- Medication list
- Allergy list
- Problem list
- Decision support
- Record demographics
- Smoking Status
- Vital Signs
- Clinical summaries to patient
  - Electronic exchange
  - Health info to patients
- Quality Measures
- Protect health information

**MENU**
- Incorporate clinical labs
- Medication reconciliation
- Implement drug-formulary checks
- Generate patient list
- Patient electronic access
  - Send reminder
- Patient-specific education
- Clinical summaries to provider
  - Immunization registry
  - Biosurveillance
  - 1 of 5 must be one of these

**Must Do All**
- 80%

**Must Do Five**
- 50%

- 40%

- 30%

- 10%
“No one would remember the Good Samaritan if he only had good intentions. He had money as well.”

Margaret Thatcher
# How Much Are the Incentives?

- Medicaid Incentive Payments Detail
  - Columns = first calendar year EP receives a payment
  - Rows = Amount of payment each year if continue to meet requirements

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Improved individual and population health outcomes

Increased transparency and efficiency

Improved ability to study and improve care delivery
Regional extension centers

Workforce training

Adoption of EHRs
Why should providers work with an REC?

• Adoption and EHR System isn’t easy and providers often don’t have necessary resources
• RECs can provide use economies of scale to ensure that practices get the support/attention they need from vendors
• RECs are partnering with hospitals and other programs in your area to maximize the support you receive
State grants for health Information exchange

Standards & certification framework

Privacy & Security framework

Exchange of health information
HITECH Act

- Regional extension centers
- Workforce training
- CMS Incentives and penalties
- State grants for health Information exchange
- Standards & certification framework
- Privacy & Security framework

Adoption of EHRs

Meaningful Use of EHRs

Exchange of health information

- Improved individual and population health outcomes
- Increased transparency and efficiency
- Improved ability to study and improve care delivery

Research to enhance HIT

“A man who carries a cat by the tail learns something he can learn in no other way.”
http://cms.gov/EHRIncentivePrograms

http://healthit.hhs.gov

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## Resources

### Office of the National Coordinator for HIT
http://www.hhs.gov/healthit/
Provides leadership for the development and nationwide implementation of an interoperable health information technology infrastructure.

### Agency for Health Research & Quality
http://www.healthit.ahrq.gov
Under Health IT Tools, find:
- Privacy & security toolkit
- Costs & benefits database (searchable)
- Evaluation toolkits

### American Academy of Family Physicians Center for Health Information Technology
http://www.centerforhit.org
Includes tutorials on EMR basics, opportunities to talk with peers in similar practices, and practice and clinical improvement tools.

### Healthcare Information and Management Systems Society
http://www.himss.org
HIMSS provides leadership for optimal use of healthcare information technology for betterment of healthcare

### Patient Centered Primary Care Collaborative
Meaningful Connections Guide
http://www.pcpcc.net/content/health-information-exchangehit
Guide for using Health IT to support PCMH

### Medicare and Medicaid Electronic Health Records (EHR) Incentive Programs
http://www.cms.gov/EHRIncentivePrograms/

### AHIMA My Personal Health Record
http://www.myphr.com/
Information about Personal Health Records sponsored by AHIMA

### Safety Net Medical Home Initiative
http://www.qhmedicalhome.org/safety-net/about.cfm
Development of a replicable and sustainable implementation model for PCMH transformation in safety net primary care clinics.

### eHealth Initiative Connecting Communities
http://www.toolkit.ehealthinitiative.org

### HITSP (Health Information Technology Standards Panel)
http://www.hitsp.org
A cooperative public and private sectors partnership formed for the purpose of harmonizing and integrating standards that will meet clinical and business needs for electronically sharing health information among organizations and systems.
Questions & Answers

Anna Gard, FNP-BC

- Health Disparities Consultant for ACU
- HIT workforce development committee member of National Health IT Collaborative for the Underserved
- Special populations clinical consultant

Helen Figge, R.Ph, PharmD, MBA

- HIMSS NY Chapter board member
- Chair of the Ambulatory Care Informatics Section of the American Society of Health System Pharmacists
- Works in the Client Office of Allscripts

David Hunt, MD FACS

- Chief Medical Officer and Acting Director in the Office of Health IT Adoption for the Office of the National Coordinator (ONC) for HIT in the Department of Health and Human Services