



eRECORDS, Inc.'s HITECH Meaningful News is a medium to share the latest news, updates and analysis in the world of ARRA, HITECH Act and "meaningful use". eRECORDS advisors collate, review and assess mountain of data down to the most relevant information so that you can focus your time in delivering the highest quality of healthcare.

eRECORDS Perspectives

eRECORDS Myth Buster - Ongoing look at the HITECH related myths:

Myth #6: EHR vendor can “guarantee” providers in meeting meaningful use.

“Meaningful Use” guarantees by EHR vendors are not unique today. These guarantees are offered by both large and small EHR vendors alike. But be very wary of these claims and promises.

When an EHR vendor says that they guarantee you meeting meaningful use, what they are really saying is that they guarantee their EHR product will be **ONC certified to qualify for the EHR incentive payments**. No EHR vendor can deliver on meaningful use guarantee because the EHR product (even when it is ONC certified) is only the tool for you to use to meet the meaningful use requirements. It is still up to YOU to meaningfully use the EHR! So why are the EHR vendors making these guarantees? I won't go as far as being deceptive but most are using the stimulus money as a way of getting you excited and motivated to buy the EHR product. Be sure to read the fine prints (or better yet, ask the sales rep to clarify) and you will see that the guarantee is simply being certified by the ONC.

Let me leave you with a statement made by a CEO of an EHR vendor in a press release: "I guarantee that [EMR vendor name] users will be able to meet the "meaningful use" requirements needed to receive the stimulus money".

If it sounds too good to be true, it probably is.

Current landscape of Meaningful Use:

It's been 16 months since the HITECH Act was signed in (as part of the 2009 ARRA) and I think is a great time to take account of where we are. Let's start with some obvious challenges that still remain.

- Timeline for meeting meaningful use very aggressive. Regional Extension Centers (RECs), for example, have the goal of assisting 100,000 Priority Primary Care Providers (PPCPs) to meaningful use either by January 2012 (19 months left) or March 2012 (21 months) depending on which round they were funded.
- Meaningful Use criteria for Stage 1 may be too ambitious. First, meaningful use is all or nothing proposition. Either you meet all the requirements or you don't qualify. Second, some of the measurements (metrics) currently defined for meeting meaningful use is too high. Let's hope that when the final ruling is released later this month or early July, ONC addresses these challenges.

- Even with the recent announcement of how the temporary certification program will work, it will be late summer before any EHR is officially certified thus continuing the confusion surrounding certification and meaningful use a little further.
- More importantly, current EHR pricing models employed by EHR vendors are not conducive to solos and small practices. Sooner than later, the pricing structure of EHR products need to be modified to meet the financial challenges of the solo and small practices.

Even with these and other challenges left to overcome, I think the accomplishments of the first 16 months have been tremendous. What the HITECH Act is trying to achieve is nothing short of a total transformation of healthcare in the United States. To have any chance of succeeding in this transformation, everyone involved must have complete commitment including the government, vendors, providers and consumers. As we are going through the pains of the “start-up” phase, I think the first 16 months have been quite successful with achievements such as:

- Definition of policies, rules and requirements of Meaningful Use
 - “Meaningful Use” requirements are in its final review stage. It is expected that the final rule will be released end of June or early July (as of this newsletter, it has not been released). This final rule defines what the providers (and hospitals) must do to achieve meaningful use (and receive Medicare and/or Medicaid incentive payments).
 - Interim Final Rule for EHR certification requirement was released in March 2010. This rule defines what a “Certified EHR” is within the Meaningful Use EHR requirement. Through this rule, EHR vendors can make necessary product changes to be certified by the ONC.
 - Final rule for the Temporary EHR certification program has been released on June 18, 2010. This rule defines who does the certification of EHRs and what the process is for performing the certification. Here’s an [article](#) that gives a good summary about the program and the latest timelines.
- Support infrastructure for providers
 - 60 Regional Extension Centers (RECs) have been funded (\$642M) across the nation. RECs provide technical assistance to Priority Primary Care Physicians (PPCPs) in adopting certified EHRs and meeting meaningful use requirements. RECs will play an important role in assisting small practices, Health Centers and Public Hospitals to meaningful use.
- Resources and Information Exchange
 - State designated HIEs are being funded and setup to create the “highways” and standards for health information exchange.
 - Workforce grants have been made to create certifications for skills needed to support and implement EHRs.
- Funding commitment and disbursement
 - Over \$1.97B have been allocated for providing technical assistance and support (Regional Extension Centers), HIE, workforce training, research and beacon communities.

HITECH Act has the lofty goals of improving healthcare quality, reducing costs, improving public health and ensuring privacy and security of health information within the next 5 to 10 years. We are still at the beginning of this healthcare transformation but we should give credit to the government, providers, healthcare entities and vendors for giving their full attention. Each stakeholder may have different reasons for supporting the HITECH Act but the end result will be achieving the goals of the HITECH Act.

Rest of 2010 will be spent in finalizing policies, establishing support organizations (e.g. RECs) and producing certified list of EHR vendors. 2011 and 2012 will be the critical years as the providers who are “early adopters” achieve meaningful use. How efficient and effective we are in 2011 and 2012 will determine how quickly the HITECH Act goals will be achieved. For now, I think we have had a good start.

Interesting Facts and Figures:

According to Center for Disease Control and Prevention's [recent study](#) of office-based physicians, 43.9% of physicians reported using EHR systems. Given this percentage, why all the fuss with the CMS/ONC trying to incentivize physicians to adopt and use EHR systems? The answer is very simple. Even though 43.9% of physicians reported using EHR systems, ONLY 6.3% reported using a "fully functional" system that could qualify under the meaningful use requirements as defined by the CMS/ONC.

In [another study](#), it was found that fatal medication errors increase by 10% during the month of July – when new medical students arrive at your local hospitals.

Latest Meaningful News

Federal

On Friday, June 18, 2010, ONC issued [Final Rule](#) to establish the temporary certification program for Electronic Health Record technology. In its final rule, ONC did not designate Certification Commission and Health IT (CCHIT) as a temporary certification entity as some have expected. CCHIT will need to apply for the status along with other interested organizations. The temporary certification program allows entities to both test and certified EHR products. A permanent certification, planned to be released later this fall, separates the certification and testing responsibilities. Our friend [The Healthcare IT Guy's](#) Shahid Shah was at the HHS ONC press conference and reported some interesting "timelines" from HHS. Timelines including:

- As of today if you're interested in being a certification body you must request the HHS Certifying Body application in writing.
- On July 1, ONC will start accepting applications.
- By the "end of the summer" (HHS's words) there will be one or more certifying bodies open for business (accepting products).
- By "this fall" (again, their words) there will be fully HHS certified products available.

If these timelines hold true, HHS has delivered on their promise to have the EHR certification part done in time for 2011 EHR incentive payments. Given the motivations of HHS, Certification body applicants (e.g. CCHIT and Drummond) and EHR vendors, I think we may just see certified EHRs being announced this "fall".

CMS launches a new [web site](#) dedicated to EHR Incentive program. This is an important resource for any healthcare professionals interested in the EHR Incentive program.

CMS held a call on June 15th to share information about ICD-10. Some important items were discussed including:

- Starting October 1, 2013, all providers must use ICD-10-CM (diagnosis) and ICD-10-PCS (procedures). ICD-10 cannot be used prior to October 1, 2013 and ICD-10 must be used starting October 1, 2013. Absolutely no transition or grace periods.
- For continuing updates and availability of tools (e.g. CD-9 to ICD-10 conversions), refer to the [website](#) setup by the CMS.

HHS [awards \\$83.9M](#) grants to 45 Health Center Controlled Networks. This is part of \$2 billion allocated to HRSA to support expansion of service for its health center program.

California

Cal eConnect Appoints Carladenise Edwards as New Chief Executive Officer. Cal eConnect is the California designated entity for managing and implementing the Health Information Exchange. Edwards will be responsible for managing the \$38.8 million federal grant California received under the American Recovery and Reinvestment Act to implement health information exchange (HIE) services and policies. Click [here](#) for the full press release from Cal eConnect.

California Health and Human Services Agency (CHHS), the lead agency on HIE and HIT issues for California, held their monthly stake holder call on June 10th. Key highlights from the call are:

- MediCal will be ready to sign-up providers and hospitals for the EHR Incentive payment program starting January 1, 2011. The sign-up will be available at the recently created CA Medical Office of Health Information Technology website (<http://www.dhcs.ca.gov/pages/dhcsokit.aspx>).
- Existing Immunization Registry and Laboratory Reporting are being evaluated to ensure interoperability with EHRs and comply with the meaningful use requirements.
- As part of the HITECH Act funding for workforce, Western Regional Health Information Technology Consortium (led by Los Rios) was awarded \$5.4M workforce grant from the ONC to establish non-degree training programs for four western states including California.

HITEC-LA (www.hitec-la.org), the Regional Extension Center (REC) for Los Angeles County, held an in person session at their LA Care office in Los Angeles on June 11th. Prospective service partners (consultants and vendors who will deliver services to providers with HITEC-LA) were invited to learn more about HITEC-LA and the draft service partner program. Over 60 service partners were in attendance. Sajid Ahmed (interim Executive Director of HITEC-LA) did a great job of giving an overview of HITEC-LA. Sajid also went through the draft service partner program which included who can qualify, what the program is, when the program is planned to start and the cost associated to join the service partner program. It was obvious that CalHIPSO (REC for all of CA except LA and Orange counties) and HITEC-LA are sharing their plans given the similarities. Although HITEC-LA is few months behind CalHIPSO, it has several advantages over CalHIPSO that should help ease some of the pains and challenges including:

- Targeted providers within a concentrated and small geography.
- Being part of LA Care, HITEC-LA can leverage its infrastructure and resources to lessen the start-up challenges.
- Ability to hold face to face meetings with service partners, providers and other stakeholders.

Second session was held on June 21st for IPAs in Los Angeles. Sajid went over similar materials as the first session but the Q&As were obviously more focused around how IPAs can play an important role. Added bonus for this meeting was the presence of HITEC-LA program manager from the ONC.

Both sessions were very positive and I believe the support from service partners and IPAs will be strong in LA County.

CalHIPSO (www.calhipso.org), Regional Extension Center for all of California except for Orange and LA counties, held its update call on June 17th. Sperenza Avram, Executive Director, gave several key updates:

- Second round of LEC (Local Extension Center) applications have been received. Out of the 10 that applied, 7 passed the initial qualifications for further review.
- Based on the first two rounds of LEC applications, several white spaces (areas not covered by any LEC) will exist with the most prominent being in the Bay area. \$9.7M of the ONC subsidy for direct assistance will be used by CalHIPSO to provide coverage in these white space areas.
- Online provider sign-up is planned to be launched by end of June.

