



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 #13: I can't register for the Medicaid EHR Incentive Program since my State Medicaid office has not opened its registration for the EHR Incentive Program.

Whether the registration is for Medicare or Medicaid (or both for eligible hospitals) EHR Incentive Program, the first step for everyone is to register with CMS. If the registration is for the Medicare EHR Incentive Program, registering with CMS completes your registration step. If the registration is for the Medicaid EHR Incentive Program, registering with CMS is only the first step. Final step is completed when you register with your State Medicaid office. If you have not registered with CMS because you are waiting for your State Medicaid office to open its registration, go to CMS as soon as you can and register. Without registering with CMS, you cannot complete the registration with your State Medicaid office for the Medicaid EHR Incentive Program. For additional information about registration, please visit this [web site](#).

Dr. David Blumenthal to leave his post as the National Coordinator for Health Information Technology. Dr. Blumenthal, appointed by President Obama to lead the Office of the National Coordinator (ONC), has announced that he is stepping down this spring to return to his teaching post at Harvard University. Dr. Blumenthal, though not praised by everyone, is viewed positively for the work he has done as the head of the ONC. His presence will be missed as we head into the core of the Stage 1 Meaningful Use process and as the requirements for Stages 2 and 3 are being discussed and finalized. We at eRECORDS want to extend Dr. Blumenthal deepest appreciation for his leadership and hard (& smart) work. We wish him the best and well deserved rest! For the full article, please click [here](#).

Will there be cuts to HITECH Act funding? A lot of noise has been made on this topic and Healthcare Reform since the change of majority in the House. We believe the funding for HITECH will remain but the current positioning and bickering will definitely add to the confusion about the program and even hinder the momentum being built up. Here's the summary of [H.R. 408](#), [stakeholder reactions](#) and [links](#) to HIMSS action center if you want to let your representative know what you think.

ONC EHR Certification update. No new ATCBs have been authorized by ONC thus far in 2011. The ATCB list remains at 6.

As each week goes by, ONC-ATCBs are certifying more and more EHR systems. As of February 14, 2011, there were 269 ONC certified Ambulatory EHR systems with 192 receiving "Complete EHR" certification and 77 receiving "Modular EHR" certification. To view the official ONC Certified EHR list, go

to this [link](#). Keep in mind that list is only updated once a week so check the list at least once a week.

Preliminary Recommendations for Stages 2 and 3 of Meaningful Use have been released for public comment. The Health Information Technology (HIT) Policy Committee published a [Request for Comments \(RFC\)](#) on their initial stage 2 meaningful use recommendations on January 12, 2011. The public comment period is open until February 25, 2011. The focus of the RFC is on Stage 2 but potential Stage 3 objectives and measures are included as well for context. Highlights include;

- Some measures remain same. E.g. > 80% having active problem list.
- Some measure goals are increased. E.g. CPOE expanded to include lab or radiology and measure increased to > 60% from > 30%.
- Optional items are required. E.g. Drug formulary check is proposed to be required.
- Expansion of Hospital only measures to EP. E.g. Reporting of certain lab results to public health agencies.
- New measures. E.g. Access of patient information via web portal.
- CQM measures and security recommendations for Stage 2 were not included in the preliminary recommendations.

One cannot ignore the “theme” being proposed for Stage 2 – Get Connected! A movement toward coordinated care (with peers and agencies) and more fluid interaction between the patients and care providers (web portals, PHRs...).

It is important that these recommendations for Stage 2 are reviewed now for any impacts to your current Stage 1 plans. Stage 2 requirements should be tracked until final rule is published sometime in 2012 to ensure smooth transition to the next stage of reporting. For a good summary of the proposed changes produced by CSC, click [here](#).

Workgroup describes obstacles to complying with Meaningful Use. The Health IT Policy Committee’s adoption and certification work group recently reported to the Committee about the challenges encountered by healthcare providers seeing to meet Meaningful Use. Some key challenges reported were:

- Confusion with the EHR Certification. More specifically, changes in interpretation that is both perceived and real by healthcare professionals.
- HIT workforce shortage. There is an increase in demand but not matching increase in supply. As a result, existing HIT workforce is not only hard to find but costs much more than previous years.
- Compliance timelines. Not only do providers have to meet Meaningful Use requirements but they have to meet additional federal requirements for quality reporting, privacy and security. In addition, providers are challenged with the move to ICD10 coding standards.
- Increase in malpractice insurance for providers who adopted EMRs. This was opposite of what was assumed. Committee decided to have a separate hearing on this topic.

For full article, please click [here](#). In a related note, AHRQ [announced](#) that they are embarking on a program to identify barriers to Meaningful Use program as well.

Insurance companies offering data breach policies for providers. Under the HITECH Act, privacy and security rules are being strengthened and any breach involving 500 patients or more must be notified to HHS. As more and more practices move to implementing and using EHRs, data breach and associated potential financial losses become a real concern – especially for small practices. Data breach insurance is fairly common for hospitals and large clinics. However, as more and more small practices adopt EHRs, data breach insurance may become a common place at small practices as well. For full article, click [here](#).

Interesting Facts and Figures

+19%. Percent increase in venture investments in Health IT, according to the Dow Jones VentureSource [report](#).

90%. Percent of hospitals that will need to install or upgrade EHR to meet Meaningful Use requirements in next 3 years according to a [survey](#) conducted by Accenture.

78%. Percentage of respondents who supported the use of electronic health records, according to a recent [study](#) published in the journal, Health Services Research.

50%, 64%. In the same [study](#), 50% of respondents who had concerns about the privacy of EHRs yet 64% of the same respondents said the benefits of EHR outweighs such concerns.

Latest Meaningful News

National

ONC accepting applications for ONC-Application Accreditor (ONC-AA). As part of the permanent EHR certification program, a single organization will be authorized by the ONC to be the ONC-Approved Accreditor (ONC-AA). ONC-AA will then take over the job of authorizing ONC-Authorized Certification Bodies (ONC-ACBs) for the permanent EHR certification program. ONC-ACBs will then provide certification of EHRs. ONC has opened a 30 day window to accept applications for the ONC-AA selection. For the full article, click [here](#).

US Health and Human Services (HHS) has submitted to the Office of Management and Budget for review of proposed rule regarding disclosure of electronic health record information under the HIPAA privacy rules. The proposed rule would implement disclosure provisions called for in the HITECH Act. This is one of the final steps before the proposed rule is published in the Federal Register. Some healthcare providers have raised concerns that the expanded disclosure rights could present challenges because these added disclosure requests may not be easily produced. For the full article, please click [here](#).

CMS launches Listserv to efficiently share information about the EHR Incentive Payment program. Subscribers to this Listserv will receive information about registration and attestation updates, payment process and other related information. Subscribers can also submit comment and questions through this Listserv. To sign up or view additional information about the Listserv, please visit CMS's [website](#).

National CMS Call on Registration for the Medicaid EHR Incentive Program. The Centers for Medicare & Medicaid Services (CMS) has scheduled a call to address how Eligible Professionals can register for the Medicaid EHR Incentive Program. This call is scheduled for Friday, February 18, 2011 from 1:00 – 2:30 p.m. ET. To register for this call, please click [here](#).

New Videos from the ONC. ONC has put up two videos to share updates about the Beacon Community Program and why eligible health providers and hospitals should register for the CMS EHR Incentive Program.

- This [video](#) gives an overview of the Beacon Communities, who serve as examples of health IT in action.
- This [video](#) shows Dr. Blumenthal sharing why eligible professionals and hospitals should register for the CMS EHR Incentive Program.

Additional funding announcements from ONC. In support of Regional Extension Centers (REC) and other Health IT programs, ONC has [announced](#) additional \$12M for RECs in support of Critical Access and Rural Hospitals; [\\$80M](#) for work force, RECs and HIE; and most importantly announced that federal government will [cover 90%](#) of REC's cost for 4 years instead of previously announced 2 years.

California

California Human and Health Services (CA HHS) held its monthly webinar on February 10, 2011.

This is a monthly webinar held by CA HHS to provide updates related Health IT related activities in California. Key highlights of the webinar are listed below. eRECORDS is also supplementing CA REC updates in this section with updates provided directly by the RECs:

- **Federal update given by Linette Scott, Interim Deputy Director of HIT for California.**
 - Reiterated the opening of registration for the EHR Incentive Program by CMS.
 - Important dates for Eligible Hospitals and CAHs.
 - September 30, 2011 – Last day of the federal fiscal year. Reporting period ends.
 - November 30, 2011 – Last day to register and attest to receive an Incentive Payment for Federal fiscal year 2011.
 - Important dates for Eligible Professionals.
 - December 31, 2011 – Reporting period ends for 2011.
 - February 29, 2012 – Last day to register and attest to receive an Incentive Payment for calendar year 2011.
 - Discussed the availability of a Listserv people can join to receive the latest updates from CMS regarding EHR Incentive Program. To sign up for this Listserv, go to this CMS's [website](#).
 - The Health Information Technology Policy Committee (HITPC) has developed a preliminary set of recommendations specifically designed to solicit additional public feedback. These set of recommendations are surrounding Stage 2 and 3 requirements with a focus on Stage 2. Public comments are due by 5 p.m. on February 25, 2011
- **Medi-Cal update given by Raul Ramirez.** Key highlights are:
 - State Medicaid HIT Plan (SMHP) is still with ONC for approval. SMHP must be approved before California can open registration for Medi-Cal EHR Incentive Program. California is still hoping for approval in time for March 1st registration launch date.
 - For latest information, go to Medi-Cal EHR Provider Incentive Portal (ePIP) at <http://medi-cal.ehr.ca.gov/>.
- **Cal eConnect update given by Carladenise Edwards.** Key highlights are:
 - Received 7 proposals for the HIE Expansion Grant Program. These proposals will be reviewed by Monday, February 14th. Notice of Intent to Award will be posted by Friday, February 25th.
 - Direct Implementation Grants are also available. These grants will fund projects to demonstrate the viability of secure, standards-based direct messaging over the Internet between trusted exchange partners, while testing specific priority information exchange scenarios.
 - Applications are due by 3 p.m. on Friday, February 18.
 - Notice of Intent to Award will be posted by Monday, February 28.
 - ONC Challenge Grant outcome.
 - California did not get any grant under the five possible categories.

- However, California stakeholders will meet sometime in February and see if the proposed projects can still be funded with resources available within California.
 - Continuing regular eHealth Stakeholder Summit Planning Workgroup meetings to raise awareness about the value of HIT/HIE among stakeholders.
 - First meeting for eHealth Evaluation Workgroup was held on February 4, 2011. This workgroup's focus is to coordinate statewide strategy for tracking and evaluating HIT and HIE adoption, use and outcomes in California.

- **CalHIPSO (Regional Extension Center for all of California except Orange and Los Angeles counties) update given by Speranza Avram which included some updates related to HITEC-LA and COREC.**
 - CalHIPSO has extended its membership fee waiver for Priority Primary Care Providers (PPCPs). PPCPs practicing in small private practices, nonprofit primary care clinics, and ambulatory facilities at public, critical access or rural hospitals will not have to pay membership fees until January of 2012 if they enroll by June 30, 2011.
 - Signed up over 3,500 providers to date. Most number amongst all RECs.
 - 4 hospitals have enrolled in rural hospital supplemental funding program.
 - Outreach Partner Program is up and running. Featured by ONC as a model outreach strategy.
 - Continuing to partner with HITEC-LA and COREC to contract with selected EHR vendors.
 - All selected EHR vendors are on the ONC certified list.
 - Leveraging scale to negotiate favorable terms for the providers.
 - Scheduled to be completed by mid February.
 - Attended ONC EHR Implementation Boot Camp in Los Angeles. There were 21 attendees from all 3 California RECs. Focus of the boot camp was to learn and share how to support small practices through EHR implementation process.
 - Working with Community College Health IT Workforce Training program to assist with the placement of first graduating class coming out in March 2011.
 - First Physician Advisory Council meeting is scheduled for February 25. Will focus on assisting with physician enrollment.
 - Workforce meeting scheduled for March 30-31 in Sacramento.
 - Led by Community College network, will discuss alignment of training curriculum with the needs of the REC members.
 - EHR vendors are also attending.

- **COREC (CalOptima Regional Extension Center, REC for Orange County) update given by Eileen Moscaritolo.** COREC continues to make strong progress as it goes from start-up phase to executing on its strategy.
 - RFP for Service Partners will be issued the week of 2/14/2011.
 - RFPs are being sent to entities that have completed the interest form.
 - Parties interested in obtaining copy of this RFP may do so by downloading the document from the COREC [website](#) beginning 2/14/2011 or emailing their request to both COREC@caloptima.org and mfinch@caloptima.org.
 - ONC must approve all Service Partners.
 - COREC budget is still under ONC review.
 - Provider enrollment to date is 80. Outreach efforts will increase in the near future.

- **HITEC-LA (Regional Extension Center for Los Angeles County) update given by Mary Franz.** HITEC-LA is continuing its efforts in meeting providers and increasing membership base. Some key updates are:
 - Nationally, all the RECs have signed up 42,000 providers.
 - Continuing to enroll providers and help them with their EHR needs; as of this newsletter, provider sign-ups have surpassed the 1,500 member mark and have already started providing services to over 800 of them.
 - Current membership base is using 42 different EHRs.
 - Upcoming free webinars are:
 - 2/15/2011: How to Achieve Meaningful Use State 1 and Get Your Incentive

- Payments.
 - 2/17/2011: EHR Selection and Implementation Tips.
- Some Outreach activities are:
 - Utilizing 25 organizations focused on IPAs and hospitals.
 - Sending out direct mails.
 - Ten sales reps visiting providers door to door.
- EHR Loan program – 500 providers already took advantage of this program.
- **Public Health update given by Linette Scott.**
 - Updates for Public Health capabilities to receive Meaningful Use reporting will be posted to the CDPH eHealth web site at:
<http://www.cdph.ca.gov/data/informatics/Pages/eHealth.aspx>
 - New CDC website with information about Meaningful Use being developed:
<http://www.cdc.gov/osels/phitpo/mu/>
- **Community College Health IT Workforce Training Program update given by Linda Zorne.**
 - First graduates coming out in March 2011. Second class started in January 2011.

Other News

Drug maker and insurance company join forces to mind EHR data. [AstraZeneca and WellPoint](#) will conduct a real-world study based on data from EHR, claims and patient surveys. We expect to see more of these partnerships across the industry as Meaningful Use requirements drive more standardized data being “freed” and available. The balancing act is to ensure security and privacy considerations are always part of the progress we are making.

Guaranteed spot in Emergency Room? An interesting [article](#) about how some hospitals in Southern California are offering guaranteed spot in Emergency Room... for a fee. Having firsthand experience of waiting over 4 hours to see a Doctor for a crying 8 year-old, \$14.99 to \$24.99 fee that’s being charged for this service seems well worth it.

To access previous newsletters, visit eRECORDS [newsletter page](#).

For additional resources, visit eRECORDS [resources page](#).

For questions or comments, please [email us](#).

Sincerely yours,

eRECORDS HITECH Advisors

About eRECORDS, Inc.

eRECORDS was founded with the vision to power innovations in access, efficiency and quality of healthcare delivery through connected technologies and intelligence. Our Mission is to be the trusted expert, guide and partner in achieving meaningful use.

which it is addressed and may contain information that is privileged and/or confidential belonging to eRECORDS, Inc. If you are not the intended recipient, or have received this message in error you are hereby notified that any disclosure, copying, distribution or use of its content is strictly prohibited and illegal. If you have received this transmission in error, please immediately notify the above sender and permanently destroy all copies of this message.

