



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

In this section, we share what's been the most exciting, scary or intriguing for us in the areas of HITECH Act, Meaningful Use and Health IT.

Future funding for HITECH Act in jeopardy or is the funding actually going up?

With the federal budget crisis looming over our nation, future funding for the HITECH Act has become an uneasy topic for many. The twist in all this is that there's also the push to spend more rather than less under the HITECH Act. In fact several bills have been introduced recently that may actually increase the planned funding. Two bills in particular stand out. First is the [bill](#) that would allow multi-campus hospitals to qualify for and receive EHR Incentive payments at each campus level rather than at the Medicare provider number (Each Medicare provider number, in most cases, include all the campuses for the qualified hospitals). The second is the [bill](#) that would allow Physician Assistants to qualify for Medicaid EHR Incentive payments without the current limitations (e.g. must provide service in a FQHC or RHC that is led by a Physician Assistant). If these bills pass, the increase in funding to support these bills is sizable. Do the introduction of these bills further support the "safety" of the HITECH Act funding for future years? There are several reasons why we believe the funds are safe. First, even if the Republicans in the House pass a law to cut the funding from the HITECH Act, the Senate will most likely not pass the law. And even if the law gets through the Senate, President Obama will most likely veto it. Second, there is a general bi-partisan support for what the HITECH Act is funding to achieve: Technology could go a long way to better care and lowering of healthcare costs. And for what it's worth, based on our own experiences and expertise surrounding the current state of healthcare in the U.S., we believe the HITECH Act funding is safe – at least for now.

Interesting Facts and Figures

77,549. Total number of eligible professionals and eligible hospitals registered for the EHR Incentive Program as of July.

2,246 and 100. Total number of eligible professionals and eligible hospitals who successfully attested for the EHR Incentive Program so far.

1,078 and 3,334. Total number of eligible professionals who have been paid under the Medicare and Medicaid EHR Incentive Programs.

\$149M and \$248M. Total Medicare and Medicaid EHR Incentive payments distributed as of July 31st.

Drug formulary, incorporating lab test results, patient list. Most popular menu objectives being selected for attestation.

Medication reconciliation, summary of care record. Least popular menu objectives being selected for attestation.

23. Number of States that have launched the EHR Incentive Program as of August 1, 2011.

433 and 236. Number of Complete and Modular certified EHRs as of August 9, 2011.

65%. Percentage of CIOs who said their staffs are under “excessive strain” due to Meaningful Use related work, according to a healthsystemCIO.com [survey](#).

27% and 5x. What [percentage](#) of U.S. doctors have tablets and how much more prevalent this is compared to the general population. Somewhat related news, University of California, Irvine Medical Students all [received](#) iPad during orientation.

\$44B and 40%. GAO’s [estimate](#) of improper payments under Medicare program and what percentage this represents against overall government waste.

64% and 32%. Percentage of physicians who felt the meaningful use incentives are still one of the strongest driver and that insufficient funds are still a key challenge to EHR adoption, according to a recent [survey](#).

Latest Meaningful News

National

Kansas to return \$31.5M “Early Innovator” grant for HIE IT Infrastructure. Kansas Governor Sam Brownback announced that his state will return the \$31.5M HIE grant from HHS. This is the 2nd state (first being Oklahoma) to announce such action. For the announcement, please click [here](#).

A five year health IT demonstration project that helped shaped accountable care organization (ACO) model has shown significant improvement in care while saving Medicare millions of dollars. As part of the demonstration project, 10 physician groups participated in the 5 year long demonstration project. The results were impressive. All 10 physician groups achieved benchmark performance on 30 of 32 reported measures and 7 physician groups achieved benchmark performance on all 32 reported measures. Over the 5 year demonstration period, Medicare has paid \$110 million in incentives based on meeting performance measures and savings to Medicare. This result is another support to ACO model. For more information, click [here](#).

ONC seeks public comment on use of metadata standards to support exchange of electronic health information. Metadata, which describes the attributes, source, and security and privacy protections of the data being exchanged, is a key step in development and implementation of health information exchange network using a “universal” data language. For more information, please click [here](#).

According to a report, conversion to ICD-10 has concerns with readiness and costs. According to a report conducted by HealthLeaders, there are real concerns around the readiness and costs associated with ICD-10 conversion. Some key findings include 49% of the respondents had not completed an initial readiness assessment and 25% had not conducted a financial assessment. For more information, click [here](#).

Two more States live on Medicaid EHR Incentive Program. New Mexico and Wisconsin have joined 21 existing states in going live with their Medicaid EHR Incentive Program. For additional information about States participating in the Medicaid EHR Incentive Program, click [here](#).

Health IT Training Program graduates struggle to find jobs. With the federal grants provided to 23 colleges across the US, over 3,000 students have graduated through the Health IT Training Program. However, even with the increase in demand for Health IT resources, these graduates are having difficult time finding a job. For example, a college program in Connecticut, only 4 out of 33 graduates have secured jobs in the health IT field. According to the article (and our own exposure to the people in the Health IT Training Program), the problem is not demand. Demand is there for “experienced” health IT candidates. However, with no or limited previous Health IT experience, finding a health IT related job continues to be challenging. For additional information, click [here](#).

Office of Civil Right’s contracted HIPAA Auditor, KPMG, [reported](#) its own data breach involving more than 4,500 patient records.

California

L.A. Care Health Plan announces eConsult, a physician to physician consultation and referral network. L.A. Care Health Plan, the largest public health plan in LA County, is spending \$1.5 million to implement eConsult at 47 safety-net healthcare facilities. The eConsult system is a peer to peer communication platform that allows primary care physicians and practice staff to correspond with specialists in three ways:

- Allow specialists to respond to questions
- Ask for clinical advice
- Allow to make referrals

The decision to implement the eConsult system was made after a success pilot among 40 small and solo practices in its provider network. For more information, please click [here](#).

California Human and Health Services (CA HHS) held its monthly webinar on August 11, 2011. This is a monthly webinar held by CA HHS to provide updates related to Health IT 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:

- **California update.**
 - California is hosting the ONC Regional Meeting in Los Angeles on August 10-11. Many of the California HIT stake holders are attending.
 - 4th Regional Extension Center for California has been designated - National Indian Regional Extension Center – California.
 - Will provide technical assistance to tribal and urban health care providers.
 - Will provide \$4,500 of technical assistants per eligible professionals.

- **Medi-Cal update.**
 - As shared in previous months, Medi-Cal is still planning to launch attestation for eligible hospitals first then eligible providers. Target launch date is now October 1st for hospitals, then group in November and finally for eligible professionals in December.
 - CMS has approved “pre-qualification” proposal that will streamline Medi-Cal EHR Incentive Program qualification process.
 - A workbook for hospitals to capture and submit qualification and payment data before attestation opens in October 1 is available. In doing so, hospitals can more quickly qualify and receive payments when the attestation is open on October 1.
 - Definition of a “Group”
 - CMS has no definition and looks to states to define this.
 - Current definition:
 - Must have an NPI
 - Must be present in Medi-Cal Provider Master File
 - OHIT is convening a committee to define the final definition of “Group” by October.
 - CMS will allow tribal clinics to be treated as FQHCs for purposes of including needy individual encounters for the Medicaid EHR Incentive Program.

- **Cal eConnect update.**
 - Stakeholder summit is scheduled for November 8th in Sacramento. Registration opens after August 19th.
 - Provider Directory Update.
 - Currently in interview stage with 3 finalists. Interviews will be conducted the week of 8/15/2011.
 - Seeking HIEs, Providers and other entities to participate in the pilot and testing phase.
 - Listening Tour Update
 - Final results of the listening tours will be shared on September 20th.
 - First draft of the Business plan will be discussed at the August board meeting.

- **California Telehealth Network (CTN) update.**
 - CTN is now a separate 501 c3 non-profit corporation.
 - Physically moved to a new location in mid town Sacramento.
 - Over 75 sites connected and growing.
 - In discussions with several multiple site healthcare organizations to receive CTN services.
 - Providing services to non FCC RHCPP sites.
 - Announced the plans to distribute \$6 million grant to 15 Model Communities to be used for Telehealth/eHealth equipment acquisition.
 - CTN business plan is being worked on with the help of BoozAllenHamilton. Focuses on sustainability and expanding services that are currently provided by CTN.

- **CalHIPSO (Regional Extension Center for all of California except Orange and Los Angeles counties) update.**
 - Over 6,000 providers enrolled (4,500 at Milestone 1).
 - Over 1,000 providers achieved “Go-live” (948 at Milestone 2).
 - 6 providers attested to Meaningful Use. Small number but it’s a start.
 - 20 hospitals enrolled in the rural hospital supplemental funding program.
 - Launched technology bundle portal through CDW and PC Connection to provide discounted equipment purchases for CalHIPSO members.
 - Launching membership campaign to acquire the remaining 1,500 subsidized slots, focusing on small and solo providers.
 - Added a password protected Service Partner Portal to the website.
 - Planning to expand educational resources with partnership with HIMSS for CalHIPSO members. Also, each CalHIPSO member will receive complimentary membership to HIMSS.

- **COREC (CalOptima Regional Extension Center, REC for Orange County) update.**
 - COREC did not provide update for this month.
- **HITEC-LA (Regional Extension Center for Los Angeles County) update.**
 - 2,500 providers have joined HITEC-LA to date.
 - 2150 providers have been delivered services.
 - Recognized the first physician to receive Medicare incentive payment by attesting to meaningful use.
- **Public Health update.**
 - CMS approved that CA providers can meet the Tobacco Use Cessation CQM measure (NQF #0027) by referring patients to CDPH's California Smoking Helpline.
- **Redwood MedNet HIE Update.**
 - HIE in Northern California started by \$2M grant in 2005.
 - Current participants in the HIE are 3 hospitals, 5 community clinics, 3 private practices, 1 group practice, 1 long term care, 2 independent laboratories and 2 imaging centers.
 - Through Cal eConnect HIE Expansion Grant, additional hospitals, practices and public health departments will receive Redwood MedNet services.
 - Current supported clinical data types are laboratory test results, radiology report narrative and ePrescribing. More data type support is planned.
 - Working towards self sustainability by early 2013.

Other News

Medent, Amazing Charts, e-MDs and Praxis EHR systems rated top for small practices. According to a survey conducted by the American Academy of Family Physicians, Medent, Amazing Charts, e-MDs and Praxis EHR systems were rated top among 30 systems. For more information, click [here](#).

Greenway Medical files to go public. Greenway Medical, which has seen healthy revenue growth during the past 3 years, files for \$100 million initial public offering. For the full story, click [here](#).

NextGen and Dell. NextGen [announced](#) the partnership with Dell which includes Dell selling of NextGen applications, providing cloud based hosting and becoming the prefer hardware platform for NextGen.

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Sincerely yours,

eRECORDS HITECH Advisors

About eRECORDS, Inc.

eRECORDS was founded with the vision to power innovations in healthcare delivery through connected technologies and intelligence. We support this vision through Health IT consulting services and our web-based product called Worry Free™ Dashboard. Worry Free™ Dashboard provides Meaningful Use administration, planning and performance management solutions to organizations including Regional Extension Centers, IPAs and medical groups.

Our Mission is to be the trusted expert, guide and partner in achieving meaningful use to make healthcare better, cheaper and measurable.

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