Special Topics in Vendor-Specific Systems

Unit 2
Quality Certification of Commercial EHRs
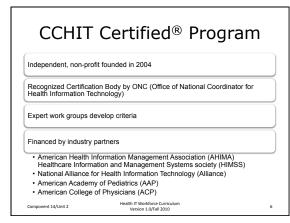

Overview

Introduction to certification	Certification Commission for Health Information Technology (CCHIT)	Meaningful Use
Joint Commission	National Patient Safety Goals	Safety and FDA oversight

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Why Certify?

To evaluate if a specific EHR meets criteria to help …
- Foster collaboration, communication, information exchange
- Support high quality patient care and clinical decision making
- Support quality assurance and efficiency measures

EHR Development:
- Expanding rapidly
- Many stakeholders
- Scientific studies to real life applications

Quality of an EHR impacts:
- Patient safety
- Clinician workflow
- Acceptance and adoption by clinicians
- Information reuse
- Health information exchange
- Return on investment

Why Certification Is Important

Role of Computerized Physician Order Entry Systems in Facilitating Medication Errors
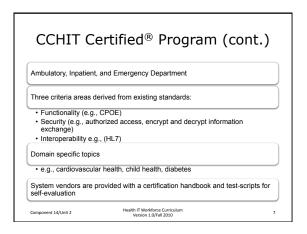
Ross Koppel, PhD
Joshua P. Metlay, MD, PhD
Abigail Cohen, PhD
Brian Abaluck, BS

Context Hospital computerized physician order entry (CPOE) systems are widely regarded as the technical solution to medication ordering errors, the largest identified source of preventable hospital medical error. Published studies report that CPOE reduces medication errors up to 81%. Few researchers, however, have focused on existence or types of medication errors facilitated by CPOE.

Koppel R, Metlay JP, Cohen A, Abaluck B, Localio AR, Kimmel SE, et al. Role of Computerized Physician Order Entry Systems in Facilitating Medication Errors. JAMA. 2005 Mar 9;293(10):1197-1203.

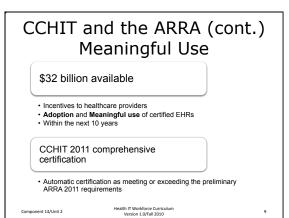## Who Certifies?

Volunteer certifications

Certification Commission for Health Information Technology (CCHIT)
- Verifies EHR system meets requirements for managing patient information

Joint Commission
- Verifies health care organization is using EHR correctly in providing patient care

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CCHIT Certified® Program

Independent, non-profit founded in 2004

Recognized Certification Body by ONC (Office of National Coordinator for Health Information Technology)

Expert work groups develop criteria

Financed by industry partners

- American Health Information Management Association (AHIMA) Healthcare Information and Management Systems society (HIMSS)
- National Alliance for Health Information Technology (Alliance)
- American Academy of Pediatrics (AAP)
- American College of Physicians (ACP)

CCHIT Certified® Program (cont.)

Ambulatory, Inpatient, and Emergency Department

Three criteria areas derived from existing standards:

- Functionality (e.g., CPOE)
- Security (e.g., authorized access, encrypt and decrypt information exchange)
- Interoperability e.g., (HL7)

Domain specific topics

- e.g., cardiovascular health, child health, diabetes

System vendors are provided with a certification handbook and test-scripts for self-evaluation
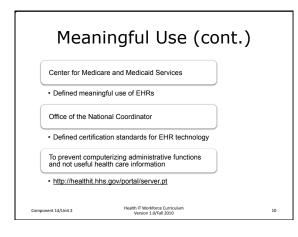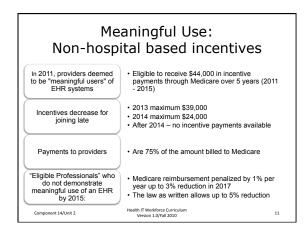

CCHIT and the American Recovery and Reinvestment Act (ARRA) 2009

CCHIT

- Certification voluntary

ARRA – a.k.a. the "Stimulus Bill"

- Health Information Technology for Economic and Clinical Health (HITECH) Act:
- Hospitals and health care professionals required to become **meaningful users** of **certified** EHR technology
  - Incentive payments under the Medicare or Medicaid
  - Avoid financial penalties down the road
- Using a certified system does not mean you are **meaningful user**

CCHIT and the ARRA (cont.) Meaningful Use

$32 billion available

- Incentives to healthcare providers
- **Adoption** and **Meaningful use** of certified EHRs
- Within the next 10 years

CCHIT 2011 comprehensive certification

- Automatic certification as meeting or exceeding the preliminary ARRA 2011 requirements

Meaningful Use (cont.)

Center for Medicare and Medicaid Services

- Defined meaningful use of EHRs

Office of the National Coordinator

- Defined certification standards for EHR technology

To prevent computerizing administrative functions and not useful health care information

- http://healthit.hhs.gov/portal/server.pt

Meaningful Use:
Non-hospital based incentives

In 2011, providers deemed to be "meaningful users" of EHR systems	• Eligible to receive $44,000 in incentive payments through Medicare over 5 years (2011 - 2015)
Incentives decrease for joining late	• 2013 maximum $39,000 • 2014 maximum $24,000 • After 2014 – no incentive payments available
Payments to providers	• Are 75% of the amount billed to Medicare
"Eligible Professionals" who do not demonstrate meaningful use of an EHR by 2015:	• Medicare reimbursement penalized by 1% per year up to 3% reduction in 2017 • The law as written allows up to 5% reduction

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Meaningful Use:
Phasing in 3 Stages Now – 2015

Stage 1	Providers submit at least 80% of their orders electronically	Hospitals submit at least 10% of orders electronically
Collecting electronic health data in coded formats	Using EHR data to track conditions and coordinate care	Providers use EHRs to check for drug interactions
Implementing clinical decision support tools	Reporting clinical quality measures and public health data	Required to provide electronic copies of patients' medical records within 48 hours

Meaningful Use:
Phasing in 3 Stages Now – 2015

Stage 2 criteria
• Data exchange & quality improvement

The Stage 3 criteria
• Advanced decision support & population health

Joining in 2011
• 2 years to achieve each stage

Joining after 2011
• a consecutive stage has been phased in 1 year to achieve next stage

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Joint Commission

Patient safety and quality health services accreditation and certification

• Oldest
• Independent
• Not-for-profit

Voluntary, yet required by many states

• Licensing and Medicare reimbursement eligibility
• On-site survey every 3 years
• HIPAA requirements
  • Information mgt., EHR mgt. & Personal Health Information mgt.

National Patient Safety Goals and EHRs

Identify patients correctly

Improve communication among caregivers

Improve the safety of using medications

Accurately reconcile medications

Patient Safety and FDA Oversight

Development of a national program to monitor patient safety problems in health IT systems	Potential role of FDA

May be FDA, but responsible agency not yet named

Collaboration about certification criteria

Focus on EHR implementation in areas with safety risks

FDA Oversight of EHRs

May extend safety of EHR systems

- FDA focus on serious injuries and death
- Yet, EHRs may cause unsafe conditions and hazards versus actual injuries

May stifle innovation and increase costs

Stay Current!

- EHR Certification and Meaningful Use Policy and Criteria are continuously evolving

- Office of National Coordinator for Health Information Technology (ONC) website:
  - http://healthit.hhs.gov/portal/server.pt

References

- http://www.cchit.org
- http://www.jointcommission.org
- Office of the National Coordinator for Health Information Technology, Department of Health and Human Services. Establishment of the Temporary Certification Program for Health Information Technology: Department of Health and Human Services; 2010.
- Egerman P, Probst M. Adoption-Certification Letter HIT Safety: HIT Policy Committee to the National Coordinator for Health IT; 2010.