Component 11:
Configuring EHRs

Unit 2: Meaningful Use of the
Electronic Health Record (EHR)
Lecture 1

Meaningful use is driven by five underlying principles

1. Improving quality, safety and efficiency
2. Engaging patients in their care
3. Increasing coordination of care
4. Improving the health status of the population
5. Ensuring privacy and security

What is Meaningful Use

- Established by the ARRA legislation
- Eligible providers and hospitals who make "meaningful use" of certified EHRs may receive incentive payments
- The adoption of EHR and HIT can improve patient safety and healthcare quality
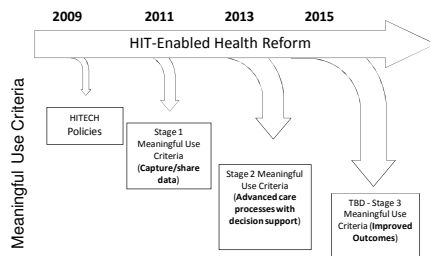
Timeline

- NPRM for Meaningful Use published January 13, 2010
- IFR for Standards and Certification published January 13, 2010
- Final Rule for Temporary Certification program for HIT published June 24, 2010
- Final Rules for Certification program for HIT and for EHR Incentive Programs published July 28, 2010
- Payment for meaningful use begins in 2011
  – January 2011 Registration for the Incentives Program
  – April 2011 Attestation for the Medicare EHR Incentive Program Begins
  – May 2011 EHR Incentive Payments Begin

Implemented in three stages

Payment depends on when meaningful use begins

		Payment Year				
		2011	2012	2013	2014	2015+
First Payment Year	2011	Stage 1	Stage 1	Stage 2	Stage 2	TBD
	2012		Stage 1	Stage 1	Stage 2	TBD
	2013			Stage 1	Stage 2	TBD
	2014				Stage 1	TBD
	2015+					TBD

Implementation: Incentives for Eligible Hospitals

- Complex; varies depending on Medicare vs. Medicaid, hospital type, and share of patients (30% Medicaid)
- General formula is that payment is multiplication of
  - Initial amount – $2 million + $200 per discharge for 1,150th to 23,000th discharge (maximum for 21,850 discharges is $4.37 million)
  - Medicare or Medicaid share
  - Transition factor – 1.0, 0.75, 0.5, and 0.25 over four years

Categories of Criteria for Stage 1 meaningful use

Metrics divided into two sets

- Core metrics
  - 15 core metrics for EPs & EHs

- Menu selection
  - A choice of 5 more from a selection
  - At least 2 must support Public Health (Improving the health status of the population)

Stage I Metrics : Data Collection

Core:
1. Problem list in ICD-9/10 or SNOMED
2. Medication list in RxNorm
3. Allergies listed or in UNII
4. 50% have demographics – language, gender, race, ethnicity, and date of birth plus date and cause of death in the event of mortality for EHs.
5. Vital signs – height, weight, blood pressure, BMI (calculated), pediatric growth chart
6. Smoking status

Menu:
1. Test results – 40% structured in LOINC

Stage 1 Criteria: Functions

Core:
1. Drug-drug and drug-allergy checking
2. Clinical decision support – one rule implemented
3. Medication reconciliation in 50%
4. Visit summary in CCD/CCR by 3 days for 50%
5. Clinical Summaries provided for at least 80% of all office visits
6. Discharge summary and procedures in electronic form upon discharge (EH only)

Stage One Criteria: Functions Cont'd

Menu
1. Reminders to 20% 65+ and 5-
2. On-line access to problems, allergies, medications, and lab tests within 4 days for 10%
3. Care transitions coded in CCD/CCR for 50%
4. Patient list – generate one type of report
5. Drug formulary checking
6. Advance directive recorded for 50% 65 and older
7. 10% provided patient specific education resources

Stage 1 Criteria: CPOE

1. 30% of unique patients with at least one medication in their medication list

2. 40% of all permissible prescriptions written by the EP are transmitted electronically using certified EHR technology

Stage 1 Criteria: HIE, Public Health

Core metric: HIE – one test among providers of care and patient-authorized entities

Non-core menu
- Public health
  - Surveillance – one test of reporting to a public health authority
  - Immunization – one test of reporting to a public health authority
  - Lab reporting – for EHs only

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Stage 1 Criteria: HIE Security

Core –
1. Conduct security risk assessment and update practices accordingly

Other
1. Encrypt/decrypt electronic health information (AES)
2. Encrypt/decrypt electronic health information for HIE (TLS, IPv6, IPv4 with IPSec)
3. Record actions related to electronic health information (audit trails)
4. Verify that electronic health information has not been altered in transit (SHA-1 or higher)
5. Cross-enterprise authentication
6. Record treatment, payment, and healthcare operations disclosures

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Clinical Quality Reporting

One metric for clinical quality is: The quality measures reported must be captured by and reported from a certified EHR system.

- From NQF, HQA, CMS PQRI, AQA
- Must be reported by CMS portal, HIE, or (to be defined) registry

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General Requirements for Meaningful Use

- **Use of a certified EHR technology is required in meeting meaningful use criteria.**
- Use certified EHR technology that supports health information exchange to improve the quality of care.
- Using certified EHR technology, the provider submits information on clinical quality measures.

Certification Criteria Summary

- To qualify for certification, an EHR system must:
  - record health related information on an individual that includes demographic and clinical health information, such as medical history and problem lists
  - have the capacity to
    - Provide clinical decision support
    - Support computerized physician order entry (CPOE)
    - Exchange electronic health information with, and integrate such information, from other sources
    - Capture and query information relevant to healthcare quality
  - Certification can be for a module or for an entire EHR system.

Why Certify?

- Represents evaluation by an independent and knowledgeable organization.
- Assurance that EHR system has potential to meet meaningful use standards.
- Assurance that the benefit of improved patient care can be realized.
- Financial Incentives!

Who Sets Certification Standards?

- ONC
- CCHIT
- Surescripts
- ICSA Labs
- SLI Global Solutions
- InfoGard Laboratories
- Drummond Group

Certification Authority

- ONC Interim Final Rule (IFR) – Standards, Implementation Specifications, and Certification Criteria
- ONC final ruling was published July 13, 2010

Certification Standards

- HITECH ties the standards, implementation specifications, and certification criteria adopted in the ONC ruling to the incentives under the Medicare and Medicaid EHR Incentive Programs by requiring the meaningful use of certified EHR technology
- The ONC ruling creates specific standards in 2011 in four areas:
  1. Vocabulary
  2. Content exchange
  3. Transporting of information
  4. Privacy and security