

## Defining Meaningful Use of Health IT

### Background

On December 30, 2009 the Department of Health and Human Services released the Notice of Proposed Rule Making (NPRM) establishing the Electronic Health Record (EHR) Incentive Program, commonly referred to as the Meaningful Use of an EHR, and the Interim Final Rule (IFR) establishing the Initial Set of Standards, Implementation Specifications and Certification Criteria for EHR Technology. The Centers for Medicare and Medicaid Services (CMS) have released a [Notice of Proposed Rulemaking on Meaningful Use](#) that identifies the criteria for becoming a meaningful user of health IT. Guided by recommendations from the Office of the National Coordinator for Health Information Technology (ONC), the Centers for Medicare & Medicaid Services (CMS), public comment, industry readiness, and future meaningful use goals and objectives established for the Medicare and Medicaid EHR incentive programs, the Federal Health IT Policy Committee helped define what constitutes meaningful use. “Throughout all the deliberations of the HIT Policy Committee, the focus has been on how we use the HITECH dollars to transform the delivery of health care and improve outcomes – not on the technology itself. This is a fundamental principle underlying all the recommendations of the HIT Policy Committee,” states HIT Policy Committee Member Dr. Neal Calman (The Institute for Family Health).

### Overview

Implementing EHR technology, a process of analyzing workflow, customizing systems for each health care environment, and training users, is time consuming and complex but does not automatically achieve “meaningful use”. Meaningful use constitutes a dynamic communication among health care providers, patients, and caregivers rather than a static repository of electronic health information. Specific Meaningful Use criteria were developed for eligible physician and hospital providers to qualify for financial incentives. The financial incentives are aligned with health care goal accomplishments.

Meaningful use of EHRs supports five health care goals:

- Improvement in quality of care, patient safety, and system delivery with goal of reducing health disparity
- Increase care coordination
- Promote public and population health
- Engage patients and families
- Ensure privacy and security

### Financial Incentives

As part of the HITECH act, eligible physicians can receive up to \$44,000 over five years under Medicare or \$63,750 over six years under Medicaid for being meaningful users of EHRs. Hospitals that become meaningful EHR users could receive up to four years of financial incentive payments under Medicare beginning in 2011, and up to six years of incentive payments under Medicaid beginning in October 2010. “Over time, we believe the EHR incentive program under Medicare and Medicaid will accelerate and facilitate health information technology adoption by more individual providers and organizations throughout the health care system,” states David Blumenthal, M.D., M.P.P. National Coordinator for Health Information Technology.

### Obstacles

Major considerations in defining meaningful use included promoting innovations, encouraging widespread EHR adoption and avoiding excessive unnecessary burdens on health care providers. Multiple studies have shown that health care providers need assistance overcoming several key obstacles to adopting and using HIT. Many lack the financial resources to purchase, implement, and maintain EHRs. They also lack the technical expertise to pick the right HIT systems and use them in ways that will improve care. Currently no infrastructure exists in most areas of the country for secure health information exchange among providers and between providers and consumers. Some hospitals and practice groups have expressed concern about the stringency of the incentive program criteria. The Medical Group Management Association, which represents a primary target group for the plan – small and medium-sized health practices – said the rules were “overly complex,” warning they would present group practices with “significant challenges” in meeting the requirements. Dr. William Jessee, the association’s president and CEO, called for simplifying the criteria for how providers are to earn plan’s incentive payments, saying the “overly burdensome requirements” would “discourage physician participation in the program and the implementation of EHRs.” American Hospital Association executive vice president Rick Pollack urged the Health and Human Services Department to make “significant changes” to the plan or it will be “unlikely that the vast majority of hospitals can meet the proposed standards, making them ineligible for this important funding.” The proposed definition of “meaningful use” is a worthy goal, he added, “but it should be a destination point, not a starting point.”

### Certification Criteria and Standards

Defining meaningful use is a first step towards integrating health IT into our health care system, but additional standards must be defined and certification criteria for EHR technology identified. Meaningful Use describes the way software features should be implemented in actual workflows and certification is a guarantee of software capabilities. Certification criteria address functionality such as Certified Provider Order Entry (CPOE), interoperability (e-prescribing) and clinical quality reporting. The IFR issued by the ONC calls for the industry to standardize the way in which EHR information is exchanged between organizations. This initial set of standards defines a common language to ensure accurate and secure health information exchange across different EHR systems, describes standard formats for clinical summaries and prescriptions; standard terms to describe clinical problems, procedures, laboratory tests, medications and allergies; and standards for the secure transportation of this information using the Internet. These standards will support meaningful use and data exchange among providers who must use certified EHR technology to qualify for the Medicare and Medicaid incentives.

For more information and complete draft of IFR and meaningful use criteria for incentive program reference <http://healthit.hhs.gov> and HIMMS Meaningful Use, Certification Criteria and Standards, and HHS Certification Process toolkit [www.himss.org/EconomicStimulus](http://www.himss.org/EconomicStimulus).