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UPDATE ON CERTIFICATION



Elements Most Relevant to Healthcare

- The legislation includes roughly \$36 billion in Medicare and Medicaid incentives for Meaningful Use of certified EHRs
 - This estimate relies on two aggressive assumptions:
 1. 90 percent of physicians and 70 percent of hospitals will be Meaningful Users by 2019
 2. Increased adoption of HIT will save the government more than \$12 billion
- ONCHIT has received elevated status and budget (\$2 billion)
 - The timelines for developing and approving standards are aggressive
 - New programs provide both financial assistance and implementation guidance/expertise
- \$1.1 billion to study comparative effectiveness
 - Research funds go to AHRQ, NIH and HHS

Introduction

The American Recovery and Reinvestment Act of 2009 could inject \$36 billion in incentive payments into the healthcare system. To be eligible for incentive payments, hospitals and physician practices must demonstrate “meaningful use of certified EHR technology.” The Office of the National Coordinator for Health Information Technology (ONC) will play an important role in driving toward the goal of “The utilization of a certified electronic health record for each person in the United States by 2014.” Among the duties of ONC is the development of a voluntary health information technology (HIT) certification program. The purpose of the new certification process is to minimize risk for clinicians purchasing an EHR and provide assurances that a system is capable of supporting the requirements for Meaningful Use.

Industry Impact

EHR certification criteria will focus on the high-level capabilities that directly support the requirements for Meaningful Use. The ONC Policy Committee is currently working on the specifics of the actual process, but it appears likely that the National Coordinator will establish EHR certification criteria, and product certification will be done separately by certification organizations accredited by ONC. Under this scenario, providers would have to use a product certified by one of the accredited certifying organizations in order to qualify for Meaningful Use. Certification will include open source and self-developed products, and potentially even components or modules or enterprise clinical systems.

On July 16, 2009, the ONC Policy Committee formally made five high-level recommendations to the National Coordinator around the new EHR certification process:

1. Focus certification criteria on the requirements for Meaningful Use
2. Leverage the certification process to improve progress on Security, Privacy, and Interoperability
3. Improve objectivity and transparency of the certification process
4. Expand certification to include a range of software sources: open source, self-developed, etc.
5. Develop a short-term transition plan until a formal certification process is established

In the short term at least, it appears likely that the Certification Commission for Health Information Technology (CCHIT) will play a role in the EHR certification transition plan, as development of the new certification process will take time and providers can probably start qualifying for incentive payments as soon as October 2010. ONC has raised the possibility that CCHIT could continue to certify products against ONC-defined criteria until the formal process is finalized, and that currently certified CCHIT EHRs would only need to complete a “gap” certification process in order to be considered certified for 2011. More details on the certification process and the role of CCHIT are expected to be announced during the next Policy Committee meeting on Friday, August 14, 2009.

- Health insurance assistance for the unemployed
 - COBRA premium assistance for unemployed workers
 - Expanded matching funds for state Medicaid programs
- 6.2 percentage point increase in Medicaid FMAP amounts
- Intended to help states handle expected beneficiary increases due to rising unemployment rate

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Recommendations

Meaningful Use requirements for 2011 are now fairly clear. Provider organizations must understand the implications of these requirements in their organization and be prepared to react in order to increase their ability to realize Centers for Medicare & Medicaid Services' incentives and avoid penalties.

Provider organizations that are setting down the path to select and implement EHR technology today should only consider those that are currently CCHIT certified or have a demonstrable plan for becoming certified against the most recent Meaningful Use requirements from ONC. Those organizations that have an EHR in place should evaluate their current EHR system to understand which standards are not met and work with their vendor to put a plan in place to become compliant with current and future Meaningful Use requirements.

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