

Jack Mortell

- Info on me
- Born 1970 in Danbury Hospital

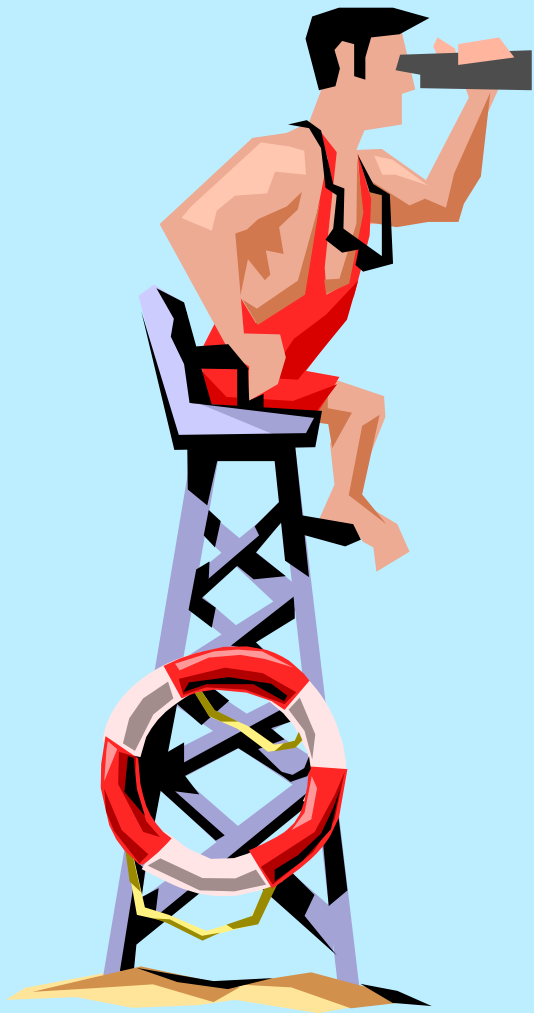


Medical Technology Experience



PROVEN BACKUP

data life support



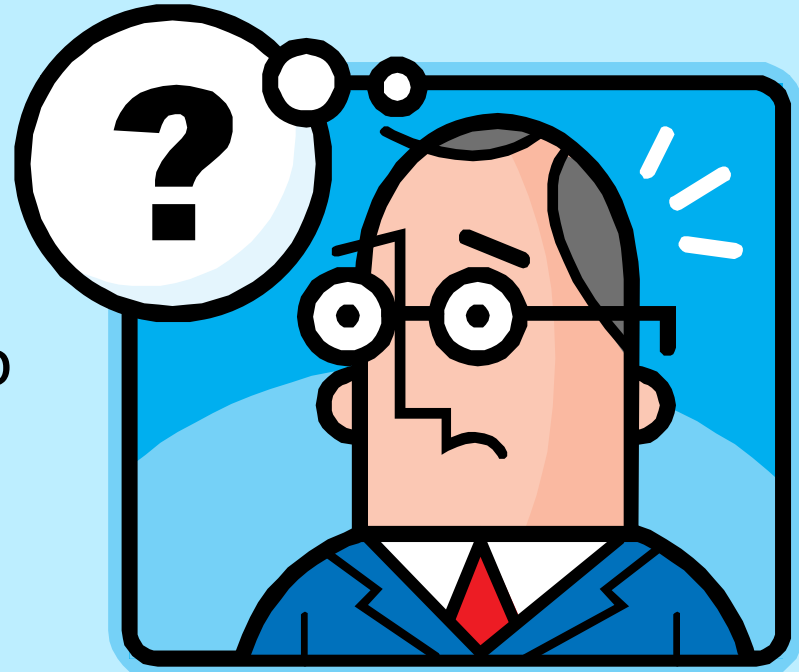
Today's Medical Information Technology from my perspective

1. Legislation & definitions
2. Challenges of implementing technology
3. Alternatives to all the “hoopla”

What's the hype all about?

TOPIC:

- Federal government incentives for EMR use
 - How this incentive works
 - Criteria doctors need to meet
 - Criteria electronic systems need to meet



That's a lot of acronyms

ARRA

HITECH

EHR

EMR

ONCHIT

CCHIT

PQRI

American Recovery & Reinvestment Act 2009 (ARRA)

Also known as “the stimulus package” or “bill”.

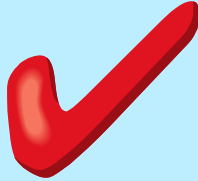

Of the \$850B in the bill, \$19B will be used as incentives to medical practices to adopt EHRs/EMRs, outlined in the bill’s section titled: HITECH



HITECH (section of the ARRA)

- Purpose is to provide enough money for each healthcare practitioner to invest in their office technology (allowing records to be shared through the healthcare continuum)
- Monies to be distributed via % increases in Medicare and Medicaid payouts if the practice meets various criteria

HITECH (section of the ARRA)

- Starting in 2011, physicians who adopt some type of electronic medical record (EMR) will get reimbursements from Medicare through 2014. 
- Those who have NOT adopted an EMR by 2015, will have their Medicare and Medicaid reimbursements penalized (1%-5%) 

HITECH ACT: MEDICARE PHYSICIAN REIMBURSEMENT PLAN

Year	Adopt 2011 (\$)	Adopt 2012 (\$)	Adopt 2013 (\$)	Adopt 2014 (\$)	Adopt 2015+ (\$)
2011	18,000	0	0	0	0
2012	12,000	18,000	0	0	0
2013	8,000	12,000	15,000	0	0
2014	4,000	8,000	12,000	15,000	0
2015	2,000	4,000	8,000	12,000	0
2016	0	2,000	4,000	8,000	0
TOTAL	44,000	44,000	39,000	35,000	0
Health Prof. Shortage Area	48,400	48,400	42,900	38,500	0

Chart provided by Chilmark Research

HITECH (section of the ARRA)

To qualify for the reimbursement, the EMR must meet the following criteria:

1. The EMR must be “**certified**.” The certification requirements have not been outlined yet, but experts believe it will be based at least partly on the CCHIT certification
2. The EMR system must be used in a “**meaningful**” manner. Also, as yet undefined, time the EMR has been in use, electronic exchange of information (eg., e-prescribe) and quality reporting are thought to be items that will define “**meaningful use**.”

EHR & EMR

- Used interchangeably, but there is a difference

EHR:

The **aggregate** electronic record of health-related information on an individual that is created and gathered cumulatively across more than one health care organization and is managed and consulted by licensed clinicians and staff involved in the individual's health and care

Think of your physician seeing an X-ray/MRI taken at a hospital while in their office

EMR:

The electronic record of health-related information on an individual that is created, gathered, managed and consulted by licensed clinicians and staff from a **single organization** who are involved in the individual's health and care.

Record kept in house by your physician after each visit at their office

Office of the National Coordinator for Health Information Technology (ONCHIT)



- March '09, President Obama appointed David Blumenthal, M.D., M.P.P. to this position.
- He is charged with aiding the Secretary of HHA in achieving the President's goal for most Americans to have access to an interoperable electronic medical record by 2014

The Certification Commission for Health Information Technology (CCHIT)



- Private organization that certifies EMRs and EHRs based on 475 criteria spanning functionality, interoperability and security.
- The determination of whether or not CCHIT will be the certifying organization to approve “qualified EMRS” will be announced at the end of the year.

Physician Quality Reporting Initiative (PQRI)

- Launched in July '07, by the Centers for Medicare and Medicaid Services (CMS), encourages and measures quality of care through the use of reporting of performance measures on various aspects of quality care
- Physicians and eligible professionals who successfully report on a designated set of quality measures through claims submitted for services.
- What does this mean? CMS offers a 2% incentive payment for physicians who successfully report under the PQRI's measures.

“What’s wrong with that?”

TOPIC:

- Various opinions on legislation
- EMR implementation experience
- Challenges

The Challenges for Physicians

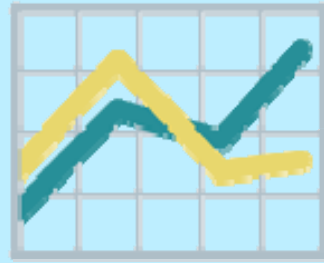
Barriers to doctors turning to/upgrading their Technology:

- Culture
 - Paper
 - Slow to adopt technology
- Organizational Structure
 - Who's the boss?



The Challenges for Physicians

- Profitability



- No existing business process



- Selecting and purchasing software



- Purchasing and setting up hardware



The Challenges for Physicians

- Building out network infrastructure
- Testing
- Creating the training plan
- Planning the roll-out



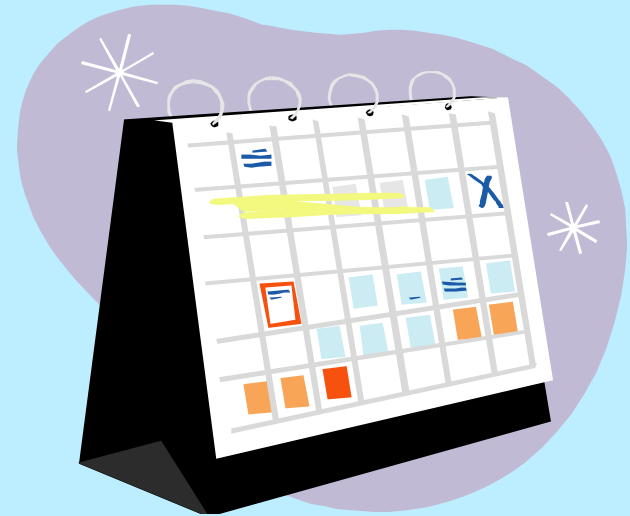
The Challenges for Physicians

- Existing workflow vs. updated workflow
- Existing staff
- Fear of change
- Under paid staff



The Challenges for Physicians

- Under-trained staff
 - It's critical to allot enough time for proper training
- Varied education between doctors and their staff



Other Options and Baby Steps

TOPIC:

There ARE technologies available that make medical practices more efficient without buying and EMR

- My opinion

A lot of options to compliment
(baby steps towards) EMR use

E-prescribing

**Reminder
calls**

Scanning

Websites

charts

**Automated
faxing**

PACA

(imaging)

E-mail

**Scheduling
software**

**Practice
Management
software**

**Reporting
software**

**Online
Backup**

E-Prescribing

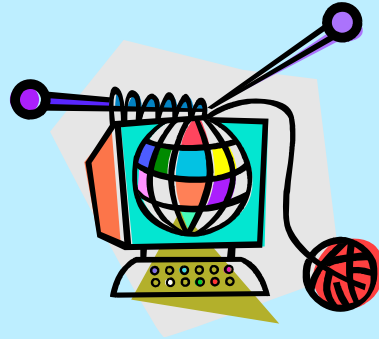
- The use of an automated data entry systems to generate a prescription vs. writing on the prescription pad
- Today only about 10% of eligible prescriptions are routed electronically
- To encourage physicians to adopt e-prescribing technology, the CMS instituted the 2% incentive program for those who have systems that meet certain criteria

Scanning Charts

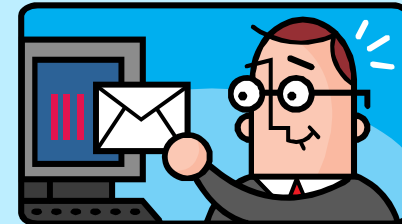
- Biggest bang for the buck



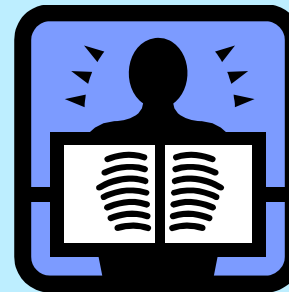
- Websites



- E-mail communications
 - It works for the rest of the world



- PACS (imaging)
 - Easily proven ROI



- Automated faxing
 - Simple, effective and great ROI



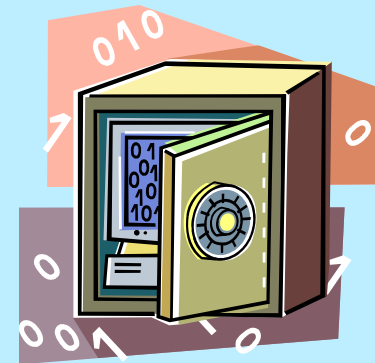
- Scheduling software
 - They still use paper!



- Practice management software
 - Most systems are old
 - No easy path to EMR



- Online backup
 - Proven ROI once a disaster hits
 - The questions are “when,” not “if,” and if you’re prepared



Gut Check

TOPIC:

These doctors need help!



Have System Purchases Increased?

- Not from my perspective
- All of this regulation is causing confusion



Sharks

- Phony experts



How you can help

- Profitability for all
- Great opportunity

