We Can’t Wait:

Obama Administration Takes New Steps to Encourage Doctors and Hospitals to Use Health Information Technology to Lower Costs, Improve Quality, Create Jobs

When doctors and hospitals use health information technology (IT), patients get better care and we all save money. Today, the Obama Administration announced new steps that will make it easier to adopt health IT. These steps will make it easier for doctors and other health professionals to receive incentive payments for using health IT that were made available under the Health Information Technology for Economic and Clinical Health (HITECH) Act. At the same time, the Administration continues to take steps to ensure health data remains private, confidential and secure.

We Can’t Wait: Changes to Encourage Use of Health IT

Created in the HITECH Act, the Medicare and Medicaid Electronic Health Records (EHR) Incentive Programs provide a financial incentive for the adoption and “meaningful use” of certified EHR technology to achieve health and efficiency goals. By implementing and meaningfully using an EHR system, providers will reap benefits beyond financial incentives. These benefits include reductions in errors, easy access to records and data, reminders and alerts for providers and patients, clinical decision support, and e-prescribing/refill automation.

Three stages for meaningful use standards are planned. Each eligible professional or hospital enters the program at the lowest stage and rises through an “escalator” of stages:

- **Stage 1** (2011 and 2012) sets the baseline for electronic data capture and information sharing.
- **Stage 2** (expected to be implemented in 2013) will expand upon the Stage 1 criteria to encourage the use of health IT for continuous quality improvement at the point of care and the exchange of information in the most structured format possible. Exchange of information efforts can include the electronic transmission of orders entered using computerized provider order entry (CPOE) and the electronic transmission of diagnostic test results.
- **Stage 3** (expected to be implemented in 2015) will focus on promoting improvements in quality, safety and efficiency leading to improved health outcomes. Stage 3 will also focus on decision support for national high priority conditions, patient access to self-management tools, access to comprehensive patient data through robust, patient-centered health information exchange and improving population health.
Last summer, in response to input from multiple stakeholders, expert testimony, and analysis, the Health IT Policy Committee made a series of recommendations on Stage 2 meaningful use standards for the Medicare and Medicaid EHR Incentive Programs. This included a recommendation to extend Stage 1 through 2013 for all providers given that the new standards for Stage 2 are not proposed.

In consideration of this recommendation and concerns expressed by stakeholders, Secretary Sebelius announced her intent to make it easier to adopt health IT. Under the current requirements, eligible doctors and hospitals that begin participating in the Medicare EHR Incentive Programs this year would have to meet new standards for the program in 2013. If they did not participate in the program until 2012, they could wait to meet the new standards until 2014 and still be eligible for the same incentive payment.

To encourage faster adoption, the Secretary announced that HHS intends to allow doctors and hospitals to adopt health IT this year, without meeting the new standards until 2014. Specifically, HHS intends to propose such an extension in the Stage 2 meaningful use Notice of Proposed Rulemaking (NPRM), which is scheduled to be published in February 2012. HHS also clarified that those first attesting to meaningful use in 2011 by February 28 can qualify for 2011 as well as 2012 incentive payments.

These policy changes are accompanied by greater outreach efforts by HHS that will provide more information to doctors and hospitals about best practices and to vendors whose products allow health care providers to meaningfully use EHRs. For example, in communities across the country, HHS will target outreach, education and training to Medicare-eligible professionals that have registered in the EHR incentive program but have not yet met the requirements for meaningful use. EHR meaningful use is the necessary foundation for all impending payment changes (patient-centered medical homes, accountable care organizations, bundled payments, value-based purchasing, etc).

**Current HITECH Programs**

The HITECH Act was designed to improve American health care delivery and patient care through an unprecedented investment in health information technology. In addition to incentive payments to doctors and hospitals, other provisions of the HITECH Act work together to: provide the necessary assistance and technical support to providers, enable coordination and alignment within and among States, establish connectivity to the public health community in case of emergencies, and develop a health IT workforce to support providers in becoming meaningful users of certified EHRs.

Combined, these programs build the foundation for every American to benefit from an electronic health record, as part of a modernized, interconnected, and vastly improved system of care delivery. Several of these programs are summarized below:
**Beacon Community Program:** This grant program for communities builds and strengthens the health information technology infrastructure and exchange capabilities. The 17 Beacon Communities will demonstrate the vision of a future where hospitals and clinicians achieve measurable improvements in health care quality, safety, efficiency, and population health.

**State Health Information Exchange Cooperative Agreement Program:** This grant program supports a total of 56 states, eligible territories, and qualified State Designated Entities in establishing health information exchange (HIE) capability among healthcare providers and hospitals in their jurisdictions and across State lines.

**Health Information Technology Extension Program:** This grant program establishes 62 Health Information Technology Regional Extension Centers to offer technical assistance, guidance and information on best practices to support and accelerate health care providers’ efforts to become meaningful users of certified Electronic Health Records.

**Strategic Health IT Advanced Research Projects (SHARP) Program:** This grant program funds research focused on achieving breakthrough advances in health IT. These advances address well-documented problems that have impeded HIT adoption, and include four cooperative agreements in the following areas: 1) Security of Health Information Technology; 2) Patient-Centered Cognitive Support; 3) Healthcare Application and Network Platform Architectures; and, 4) Secondary Use of EHR Data.

**Workforce Development Program:** To help meet the growing demand for health IT professionals, the Office of the National Coordinator for Health Information Technology (ONC) funded the Workforce Development Program. The goal of the program is to train a new workforce of skilled health IT professionals who will be able to help providers implement electronic health records and achieve meaningful use. The Workforce Program consists of four initiatives: Community College Consortia, Curriculum Development Centers, Competency Exam Program, and University-Based Training.

**HITECH EHR Adoption Milestones**

The major EHR adoption milestones include:

- Over 135,000 providers have registered for a Medicare or Medicaid EHR Incentive Payment as of October 31, 2011, indicating their intent to adopt and meaningfully use EHRs and over $1.2 billion in EHR incentive payments have been made through the end of October.

- Medicare has paid over $119 million in EHR incentives to eligible doctors and hospitals for meaningful use of EHRs.

- Medicaid has paid over $230 million in EHR incentives to eligible doctors, nurse practitioners, certified nurse-midwives, dentists, physicians assistants and hospitals for having adopted or meaningfully used EHRs.

- Medicare and Medicaid combined have paid over $880 million in EHR incentives to hospitals eligible for both incentive payments for having adopted or meaningfully used EHRs.
52 percent of office-based physicians report that they intend to take advantage of incentives provided through the Medicare and Medicaid EHR Incentive Programs. (National Center for Health Statistics, National Ambulatory Medicare Care Survey, 11/30/11).

The percentage of physicians who have adopted EHRs in their practice has doubled from 17 to 34 percent between 2008 and 2011 (National Center for Health Statistics, National Ambulatory Medicare Care Survey, 11/30/11), with the percent of primary care doctors using this technology nearly doubling from 20 to 39 percent.

The number of health IT job postings increased 201 percent from January 2007 through September 2011.

ONC’s Regional Extension Centers have signed up more than 100,000 primary care providers. This means that roughly one third of the nation’s primary care providers have committed to meaningfully using EHRs by partnering with their local Regional Extension Center.

One- half of the Regional Extension Center-committed providers are in small private practices (38 percent) or small practice consortia (12 percent). The remaining providers are in underserved settings with:
  - 18 percent in community health centers,
  - 11 percent in public hospitals, and
  - 21 percent in other underserved settings, like critical access hospitals, rural health clinics, and practices in medically underserved areas.

Office-based physicians’ use of E-prescribing has increased from 0.8 percent in December 2006 to 40.2 percent in September 2011 (Surescripts).

Over 50,000 health IT-related jobs have been created since the enactment of the HITECH Act (Bureau of Labor Statistics).

According to the Bureau of Labor Statistics, the number of health IT jobs across the country is expected to increase by 20 percent from 2008 to 2018, much faster than the average for all occupations through 2018.

To meet the demand for these workers, the Obama Administration has launched four workforce development programs that help train the new health IT workforce. The training is provided through 82 community colleges and nine universities nationwide.

As of October 2011, community colleges have had 5,717 professionals successfully complete their training in health information technology. Currently there are 10,065 students enrolled in the training programs across the nation.

As of November 2011, universities have graduated over 500 post-graduate and masters-level health IT professionals, with over 1700 expected to graduate by July 2013.

For more information on how health IT can lead to safer, better, and more efficient care, visit http://www.healthit.gov/