

STATEMENT OF

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**BEFORE THE
OFFICE OF THE NATIONAL COORDINATOR FOR HEALTH INFORMATION TECHNOLOGY
POLICY COMMITTEE'S CERTIFICATION AND ADOPTION WORKGROUP**

***REGARDING CERTIFICATION FOR LONG TERM AND POST ACUTE CARE SETTINGS*
December 12, 2013**

Good morning Chairman and distinguished members of the HIT Policy Committee's Certification and Adoption Workgroup. My name is Karen Utterback, and I currently serve as Vice President of Strategy and Marketing for McKesson Technology Solutions Extended Care Solutions Group. I am here today on behalf of more than 15,000 McKesson Technology Solution employees who work every day on the development and deployment of health information technology (IT) solutions that improve the quality, safety and efficiency of patient care with over 230 of those being dedicated to the LTPAC market space.

I appreciate the opportunity to testify and share McKesson's perspective about how a LTPAC certification program by the Office of the National Coordinator (ONC) would impact us as a vendor.

I am a Registered Nurse with a Masters degree in Nursing Administration and Business. I have more than 32 years of experience in hospital, LTPAC and health IT. This experience has

provided me with a unique perspective on the needs of our provider customers and an appreciation of how health IT software development, adoption and use supports operational efficiency and influences the delivery of quality care in the LTPAC setting.

For 180 years, McKesson has led the industry in the delivery of medicines and healthcare products. As the nation's largest distributor of pharmaceuticals, we pride ourselves on the efficiencies that we bring to the healthcare system by delivering safe medicines every day to pharmacies, hospitals, physician offices, skilled nursing facilities and government locations, including every Department of Veterans' Affairs facility, across the country.

As the largest health IT company in the world, McKesson is actively engaged in the transformation of healthcare from a system burdened by paper to one empowered by interoperable electronic solutions that improve patient safety, reduce the cost and variability of care and advance healthcare efficiency.

McKesson is a member of the National Association of Home Care & Hospice (NAHC) and I currently serve as the Chair of the HealthCare Technology Association of America (HCTAA), a section of NAHC. In that role, I have worked extensively with Richard Brennan (NAHC) and other the vendor members of the HCTAA section.

LTPAC settings provide rich opportunities to support improved care transitions, continuity of care, care coordination and early intervention for those receiving post acute care services and

those dealing with chronic conditions using the data and information contained in their EMR systems today.

Adoption rates of EHR technology among LTPAC providers and particularly, among home health providers are amongst the highest in health care; this adoption of EHR products positions LTPAC providers to be ready and able to exchange valuable information about their patients at the time of transitions in care and during the time period that providers deliver post-acute care services.

Many vendors, including McKesson, have made significant investments in the form of participation in industry and ONC-based workgroups and in product development. McKesson specifically has participated in many of the S&I Workgroups. Additionally, our interoperability solution known as McKesson Home Health and Hospice Connect™, was made available to our customers more than a year ago. We believed that offering such a product to enable the publishing and consumption of a CCD/C-CDA via standards based exchange protocols would bring value to our customers in the form of operational efficiency (principally reducing duplicative data entry and limiting the use of phone and fax for communication) and contribute to better coordinated care and outcomes for their patients. What we have observed is that, unfortunately, the ability to move these products into use has been limited by the slow adoption of data exchange capabilities by hospitals and other eligible providers as they continue to strive to meet the requirements of Meaningful Use Stage 1 and 2.

Based on this experience, we are opposed to the requirement for ONC approved certification process for our software products prior to Meaningful Use Stage 3. We also believe that continued delays such as the one announced on Friday 12/6/2013 unfortunately prevent us from realizing the benefit of the already existing and available data/information from LTPAC providers that could be used to improve care, particularly in our eldest and most frail populations.

McKesson believes that ONC approved certification for LTPAC prior to MU Stage 3 is likely to result in an additional and unnecessary burden and cost for our product development and ultimately for our LTPAC providers and would have little value. This belief is based on the assumption that a certification program, required or voluntary cannot be successful without industry and provider commitment to the necessity of such a program and without participation requirements for the provider community. We are concerned that a voluntary or a required certification without implementation of MU3 will not substantially improve the alignment of existing federal and state programs or appropriately balance the costs and benefits of the effort required at this time because of the currently low adoption rates of the MU Stage 2 requirements by hospitals and other eligible providers.

Another very real concern for McKesson and the vendor community is the variability of state requirements for certified EHRs. The existence of state laws, for example in Minnesota, which

requires LTPAC providers to use a certified EHR by 2015 without clarity on ONC approved certification criteria, requires the vendor community to create 50+ versions of our solutions. Today, the growing patchwork of disparate requirements by the states imposes additional burdens on EHR vendors to accommodate absent, differing, overlapping, and potentially conflicting certification criterion. This puts unmanageable pressure on EHR vendors.

Although we believe an ONC approved certification program for LTPAC is currently unnecessary, the standards used in Meaningful Use such as Consolidated Clinical Document Architecture (CCDA), SNOMED, LOINC and RxNorm can be and are supported within our EHR products to help obtain greater parity in the exchange of information regardless of formal certification.

As an alternative, McKesson recommends that the transmission of CCDA standards adopted for certified EHR technology using standard messaging protocols such as Direct Messaging Protocols or publishing and consuming messages through standards-based HIE be considered. LTPAC EHR vendors support a variety of transport standards: Point to Point, X509, Https, Secure FTP, SMTP, S/MIME and XDR; however, not all of these standards are made available through vendors to home health care and hospice providers. Therefore, we recommend that the Workgroup and ONC consider a more flexible approach to prescribing the abstract layer for transport and leave the selection of transport protocols to local exchanges. This alternative would accelerate data exchange to support transitions of care and care coordination and allow

providers and vendors the flexibility they need when regulatory requirements are variable or unclear.

SUMMARY

In summary, McKesson does not believe that a federally required 2014 ONC approved Certification for LTPAC is necessary. This certification requirement would not improve the alignment of existing federal and state programs or appropriately balance the costs and benefits of the effort required.

We would recommend the transmission of a C-CDA using standard messaging protocols such as Direct Messaging Protocols or publishing and consuming information through standards-based health information exchange To support LTPAC transitions of care and care coordination.

We appreciate the opportunity to share our perspective on the implications of a potential ONC certification program for LTPAC with this Workgroup today.

Thank you.