

The Office of the National Coordinator for
Health Information Technology



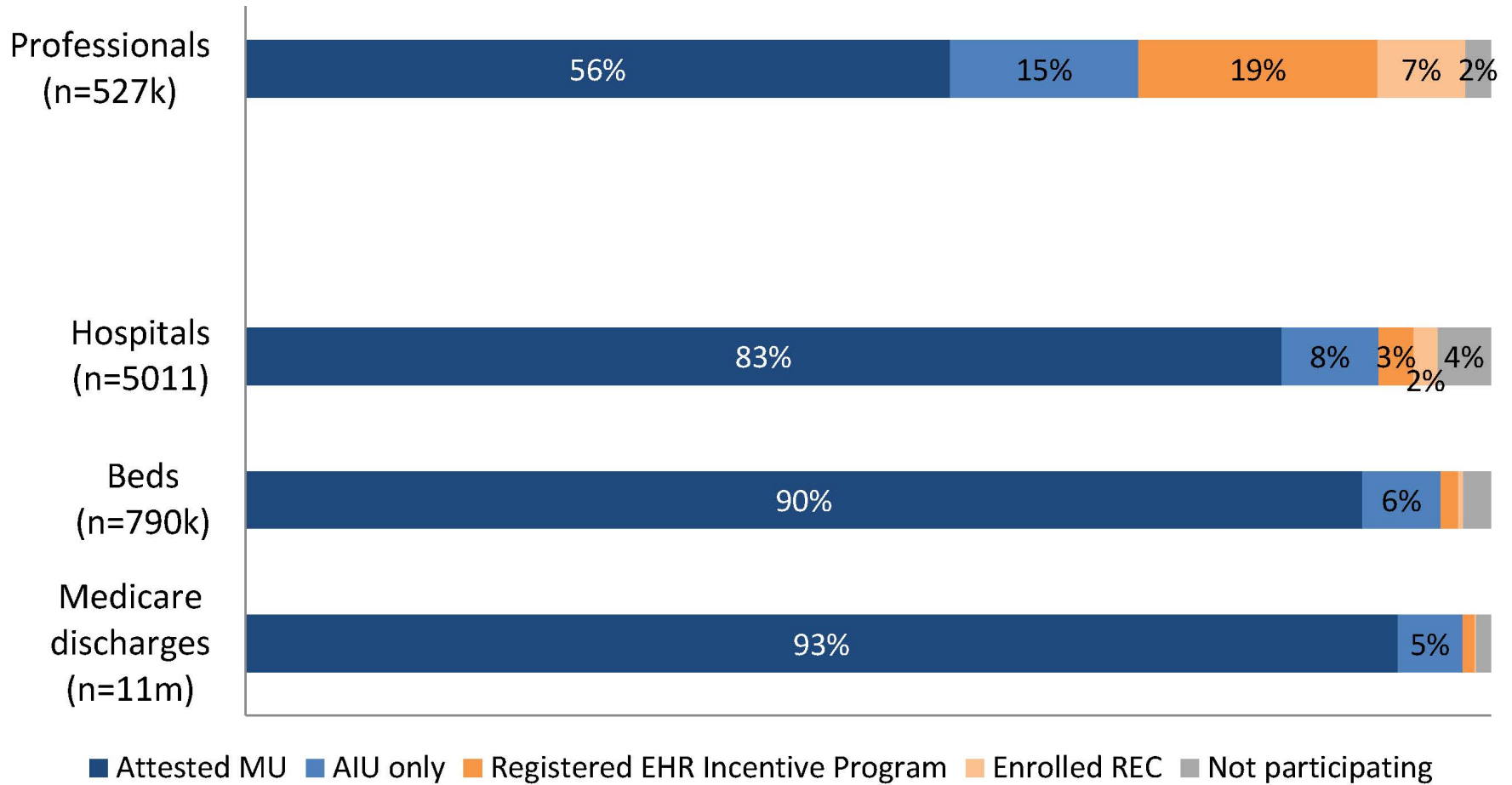
Data Analytics Update

Health IT Policy Committee Meeting
April 8, 2014

Putting the **I** in Health **IT**
www.HealthIT.gov

Stage 1 meaningful use experience

Majority of eligible providers have attested to stage 1



Note: Categories are hierarchical and mutually exclusive. For example, a hospital that has attested and received AIU payment and is enrolled with an REC is counted only in the Attested MU category. See Data Sources and Definitions slides for more details.

MU is meaningful use. AIU is adopt/implement/upgrade to certified EHR technology. REC is Regional Extension Center.

Most attesting providers far exceeded minimum requirements for stage 1 objectives

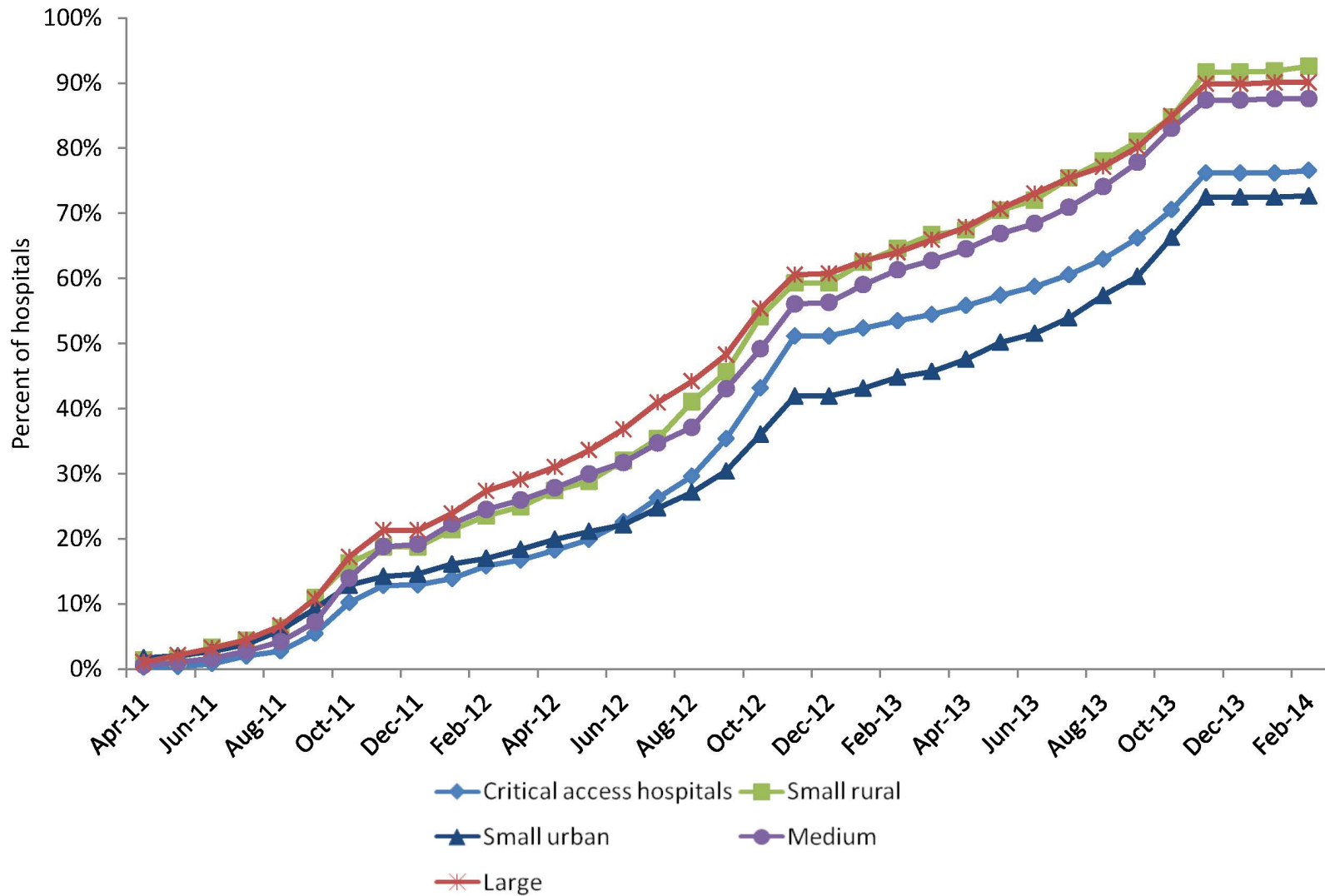
Eligible Hospitals

	Objective score reported at attestation (numerator/denominator)																		100
	>=10	>=15	>=20	>=25	>=30	>=35	>=40	>=45	>=50	>=55	>=60	>=65	>=70	>=75	>=80	>=85	>=90	>=95	
	<15	<20	<25	<30	<35	<40	<45	<50	<55	<60	<65	<70	<75	<80	<85	<90	<95	<100	
Core Objectives																			
CPOE for medication orders					1%	1%	2%	2%	3%	3%	4%	4%	4%	5%	6%	9%	12%	31%	12%
Maintain problem list															6%	12%	21%	48%	12%
Active medication list															2%	4%	10%	64%	21%
Medication allergy list															1%	2%	10%	70%	16%
Record demographics									0%	0%	0%	1%	1%	1%	2%	4%	8%	71%	12%
Record vital signs									0%	1%	1%	1%	2%	4%	6%	10%	19%	51%	4%
Record smoking status									0%	0%	1%	1%	2%	4%	6%	9%	15%	49%	12%
Electronic copy of health info									0%	1%	1%	2%	1%	3%	3%	4%	4%	9%	72%
Electronic copy discharge instr									0%	0%	1%	3%	1%	3%	4%	5%	7%	9%	66%
Menu Objectives																			
Advance directives									0%	0%	1%	1%	1%	2%	3%	5%	9%	44%	34%
Clinical lab test results								0%	0%	0%	0%	0%	1%	3%	5%	7%	11%	52%	20%
Patient-specific ed resources	1%	2%	1%	2%	3%	3%	3%	3%	3%	4%	5%	5%	6%	7%	10%	10%	14%	14%	2%
Medication reconciliation									2%	3%	4%	5%	5%	10%	10%	16%	20%	23%	2%
Transition of care summary									4%	5%	5%	6%	6%	12%	11%	17%	13%	9%	12%

Most attesting providers far exceeded minimum requirements for stage 1 objectives

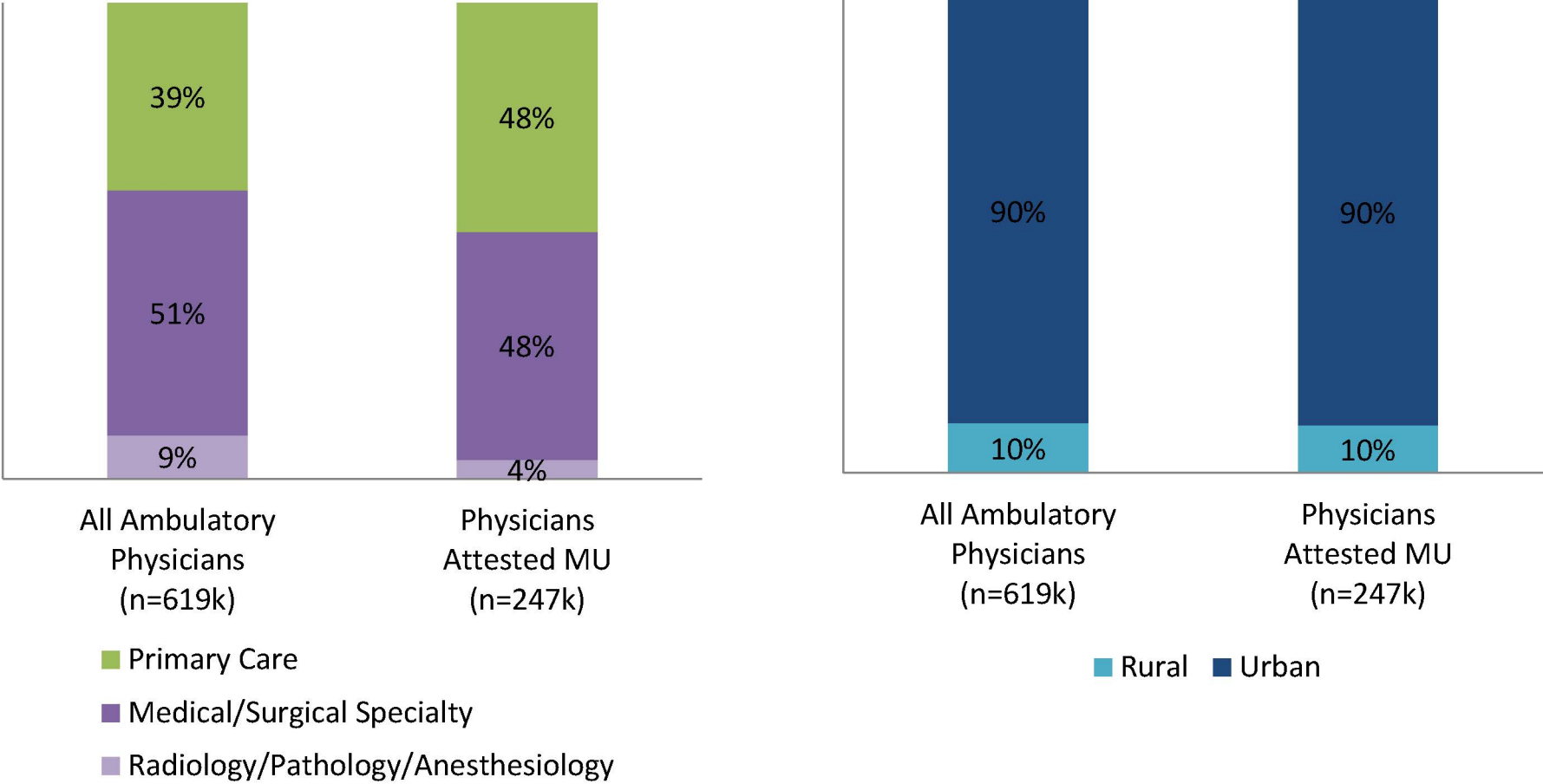
Eligible Professionals

	Objective score reported at attestation (numerator/denominator)																		100
	>=10 <15	>=15 <20	>=20 <25	>=25 <30	>=30 <35	>=35 <40	>=40 <45	>=45 <50	>=50 <55	>=55 <60	>=60 <65	>=65 <70	>=70 <75	>=75 <80	>=80 <85	>=85 <90	>=90 <95	>=95 <100	
Core Objectives																			
CPOE for medication orders					1%	1%	2%	2%	3%	3%	4%	4%	4%	5%	6%	9%	12%	31%	12%
Maintain problem list															6%	12%	21%	48%	12%
Active medication list															2%	4%	10%	64%	21%
Medication allergy list															1%	2%	10%	70%	16%
Record demographics									0%	0%	0%	1%	1%	1%	2%	4%	8%	71%	12%
Record vital signs									0%	1%	1%	1%	2%	4%	6%	10%	19%	51%	4%
Record smoking status									0%	0%	1%	1%	2%	4%	6%	9%	15%	49%	12%
Electronic copy of health info									0%	1%	1%	2%	1%	3%	3%	4%	4%	9%	72%
Electronic copy discharge instr									0%	0%	1%	3%	1%	3%	4%	5%	7%	9%	66%
Menu Objectives																			
Advance directives									0%	0%	1%	1%	1%	2%	3%	5%	9%	44%	34%
Clinical lab test results								0%	0%	0%	0%	0%	1%	3%	5%	7%	11%	52%	20%
Patient-specific ed resources	1%	2%	1%	2%	3%	3%	3%	3%	3%	4%	5%	5%	6%	7%	10%	10%	14%	14%	2%
Medication reconciliation									2%	3%	4%	5%	5%	10%	10%	16%	20%	23%	2%
Transition of care summary									4%	5%	5%	6%	6%	12%	11%	17%	13%	9%	12%




Note: Large = 400+ staffed beds; Medium = 100-399 staffed beds; Small = <100 staffed beds. Rural = non-metropolitan; Urban = metropolitan. See Data Sources and Definitions slides for more details.

Some differences in stage 1 attestation by physician specialty, no differences rural/urban location

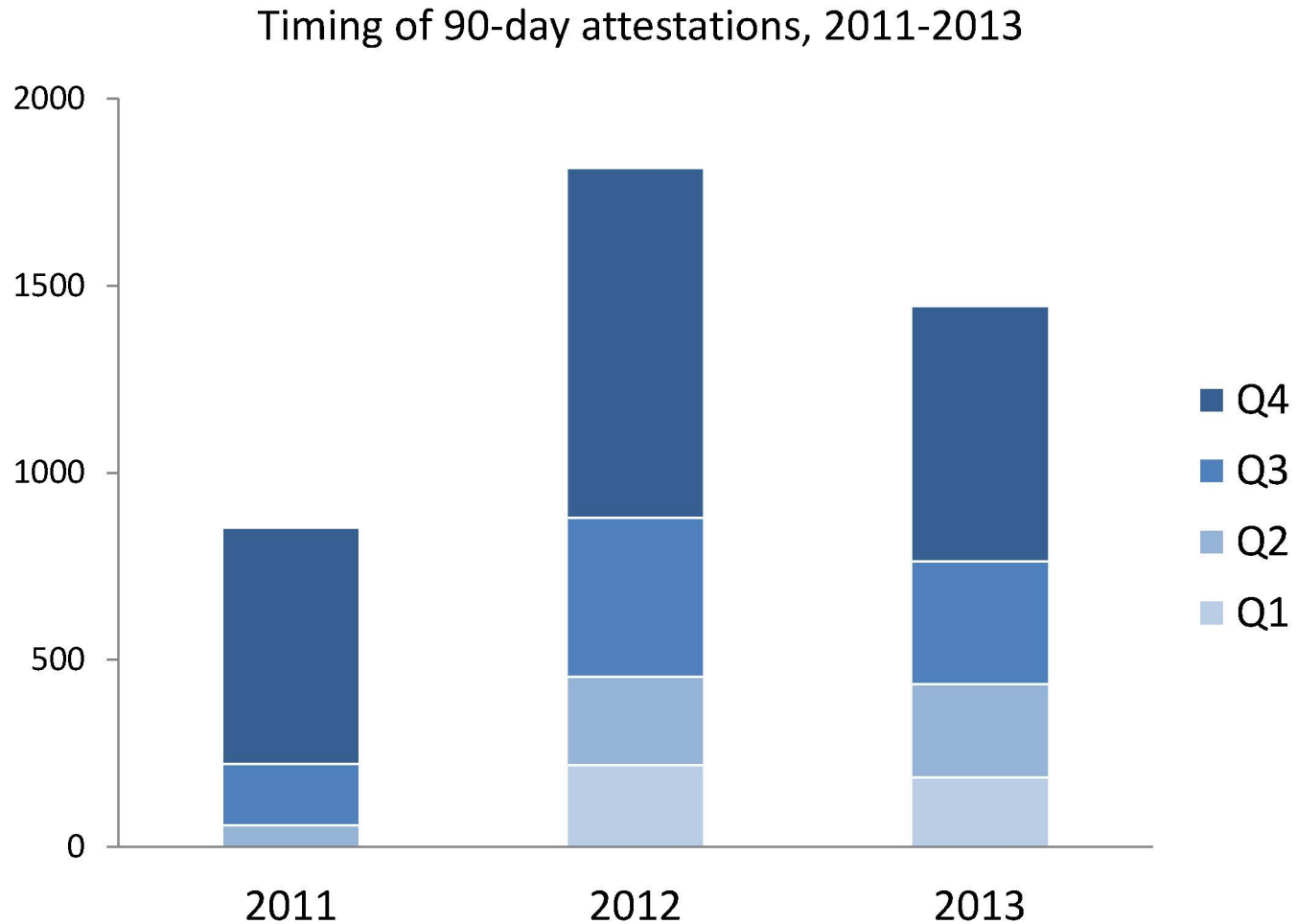


Data reflect physicians not participating via Medicare Advantage only; an additional 49k professionals (non-physician professionals and Medicare Advantage physicians) have attested. Data on all ambulatory physicians are from SK&A Office Based Provider Data Base, 2012. Primary care includes: family practice, general practice, internal medicine, obstetrics/gynecology, adolescent medicine, pediatrics, and geriatrics. Rural = non-metropolitan; Urban = metropolitan.

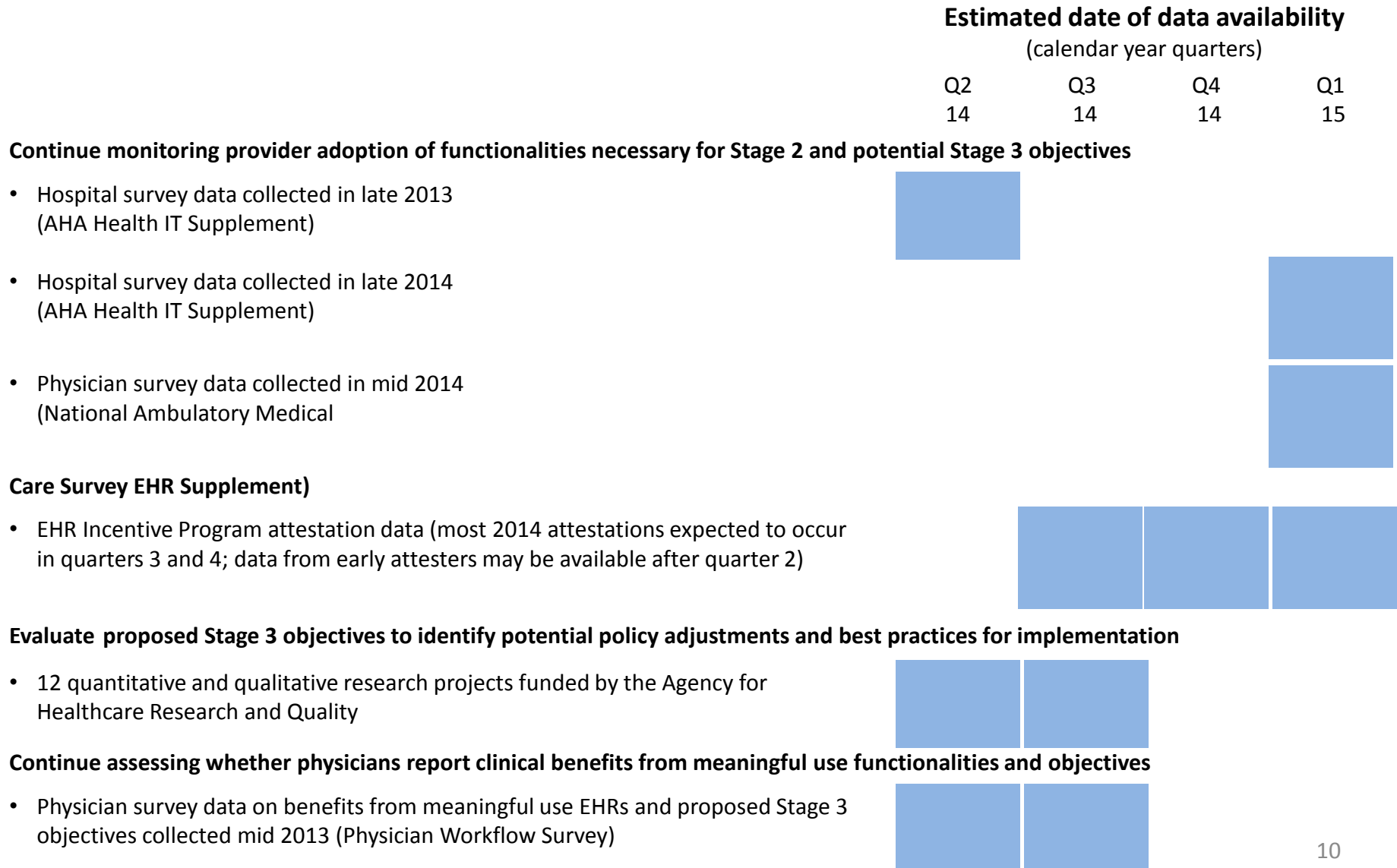


Upcoming data on meaningful use
implementation and impacts

Most 2014 attestations likely in 3rd and 4th quarters



Draft timeline of upcoming data on implementation and impacts





Data Sources and Definitions

Data Sources and Definitions

Hospital Data

To describe hospital progress to Meaningful Use by key characteristics, data on all CMS certified hospitals as of March 2013 were merged to data from the CMS EHR Incentive Program, the ONC Regional Extension Center (REC) Program, and the American Hospital Association (AHA) Annual Survey by CMS Certification Number (CCN). The final analysis file contained 4,970 hospitals, 97% of which matched to the AHA Annual Survey.

Hospitals were categorized into 1 of 5 hierarchical and mutually exclusive categories:

1. Attested MU – hospitals successfully attested to Stage 1 Meaningful Use under the Medicare EHR Incentive Program or received payment for attesting to Stage 1 Meaningful Use under the Medicaid EHR Incentive Program. Category includes some hospitals that had successfully attested but still had Medicare payment for the attestation pending.
2. AIU only – hospitals received Medicaid EHR Incentive Program payment for AIU but not yet attested or received payment for attesting to Meaningful Use.
3. Registered EHR incentive program – hospitals registered for the Medicare or Medicaid EHR Incentive Program but had not yet attested or received payment for AIU or Meaningful Use.
4. Enrolled REC – hospitals enrolled with an REC but not yet registered for the Medicare or Medicaid EHR Incentive Program.
5. Not participating – hospitals not registered for the Medicare or Medicaid EHR Incentive Program and not enrolled with an REC.

Data Sources and Definitions

Professional Data

To describe professional progress to Meaningful Use, data from the CMS EHR Incentive Program were merged to data from the ONC Regional Extension Center Program by National Provider Identifier (NPI). Professionals were categorized into 1 of 5 hierarchical and mutually exclusive categories.

- 1) Attested MU – professionals successfully attested to Stage 1 Meaningful Use under the Medicare EHR Incentive Program or received payment for attesting to Stage 1 Meaningful Use under the Medicaid EHR Incentive Program. Category includes some professionals that had successfully attested but still had Medicare payment for the attestation pending.
- 2) AIU only – professionals received Medicaid EHR Incentive Program payment for AIU but not yet attested or received payment for attesting to Meaningful Use.
- 3) Registered EHR incentive program – professionals registered for the Medicare or Medicaid EHR Incentive Program but had not yet attested or received payment for AIU or Meaningful Use.
- 4) Enrolled REC – professionals enrolled with an REC but not yet registered for the Medicare or Medicaid EHR Incentive Program.
- 5) Not participating – professionals not registered for the Medicare or Medicaid EHR Incentive Program and not enrolled with an REC.

To monitor professional progress to Meaningful Use by key characteristics, characteristics of physicians who had successfully attested to Stage 1 Meaningful Use were compared to characteristics of all ambulatory physicians nationally using data from the 2012 SK&A Office-Based Provider data base.