



The Office of the National Coordinator for  
Health Information Technology



# Health IT Standards Committee Meeting

## Data Update

March 18, 2015



- Examine characteristics associated with meaningful use performance among eligible hospitals
  - Care transitions
  - Patient engagement
  - Patient safety
  - Public health

# Providers must complete 2 years of stage 1 before progressing to stage 2

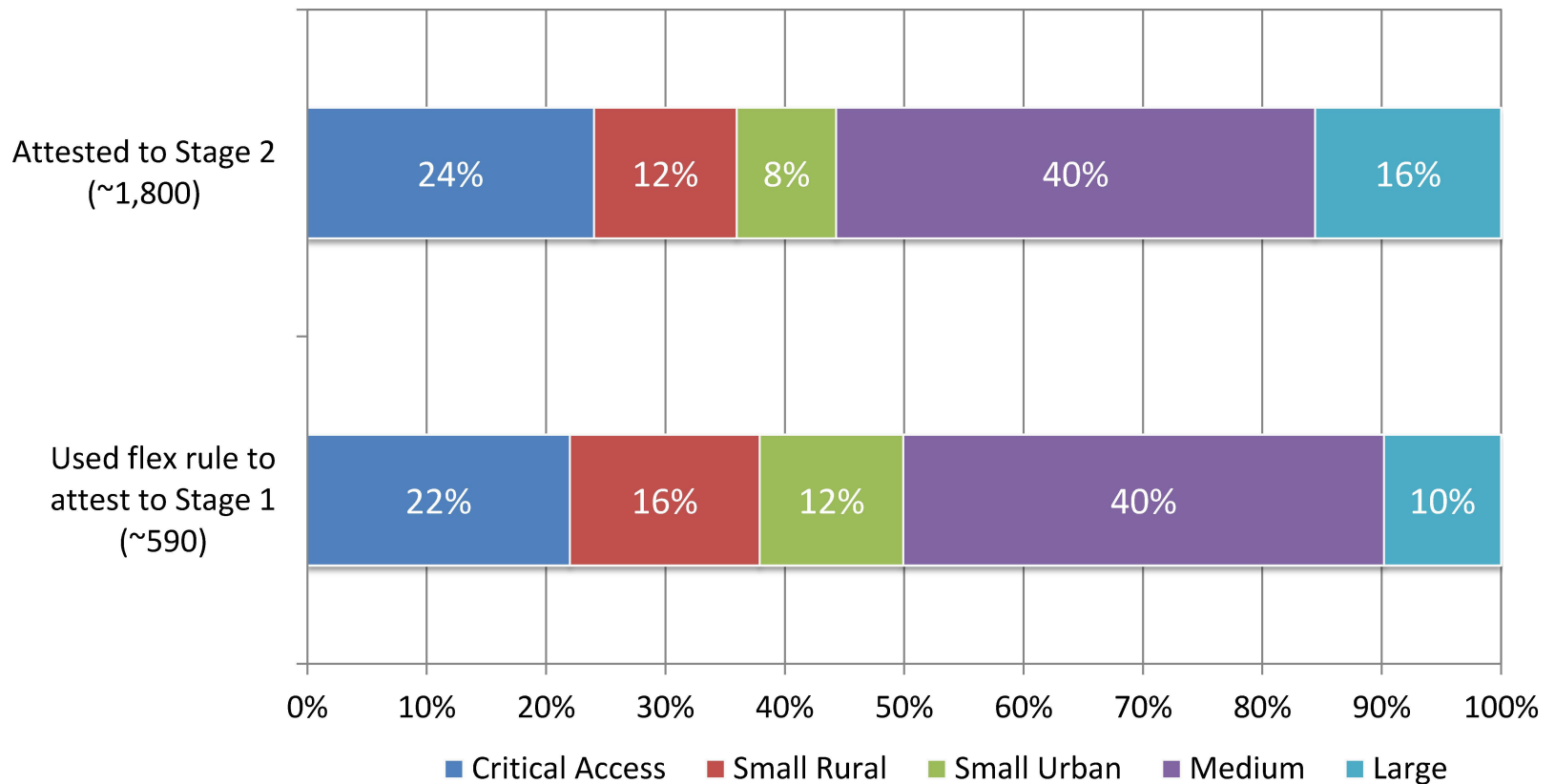


	Percent of EHRs	2011	2012	2013	2014	2015	2016	
2011 cohort	18	First attested to Stage 1 MU			Scheduled for Stage 2 MU			
2012 cohort	36		First attested to Stage 1 MU			Scheduled for Stage 2 MU		
2013 cohort	30			First attested to Stage 1 MU			Scheduled for Stage 2 MU	
2014 cohort	6				First attested to Stage 1 MU			Scheduled for Stage 2 MU

Based on CMS EHR Incentive data through January, 2015.

# Distribution of characteristics among stage 2-scheduled hospitals

**Distribution of stage 2-scheduled hospitals by characteristics and stage of attestation**

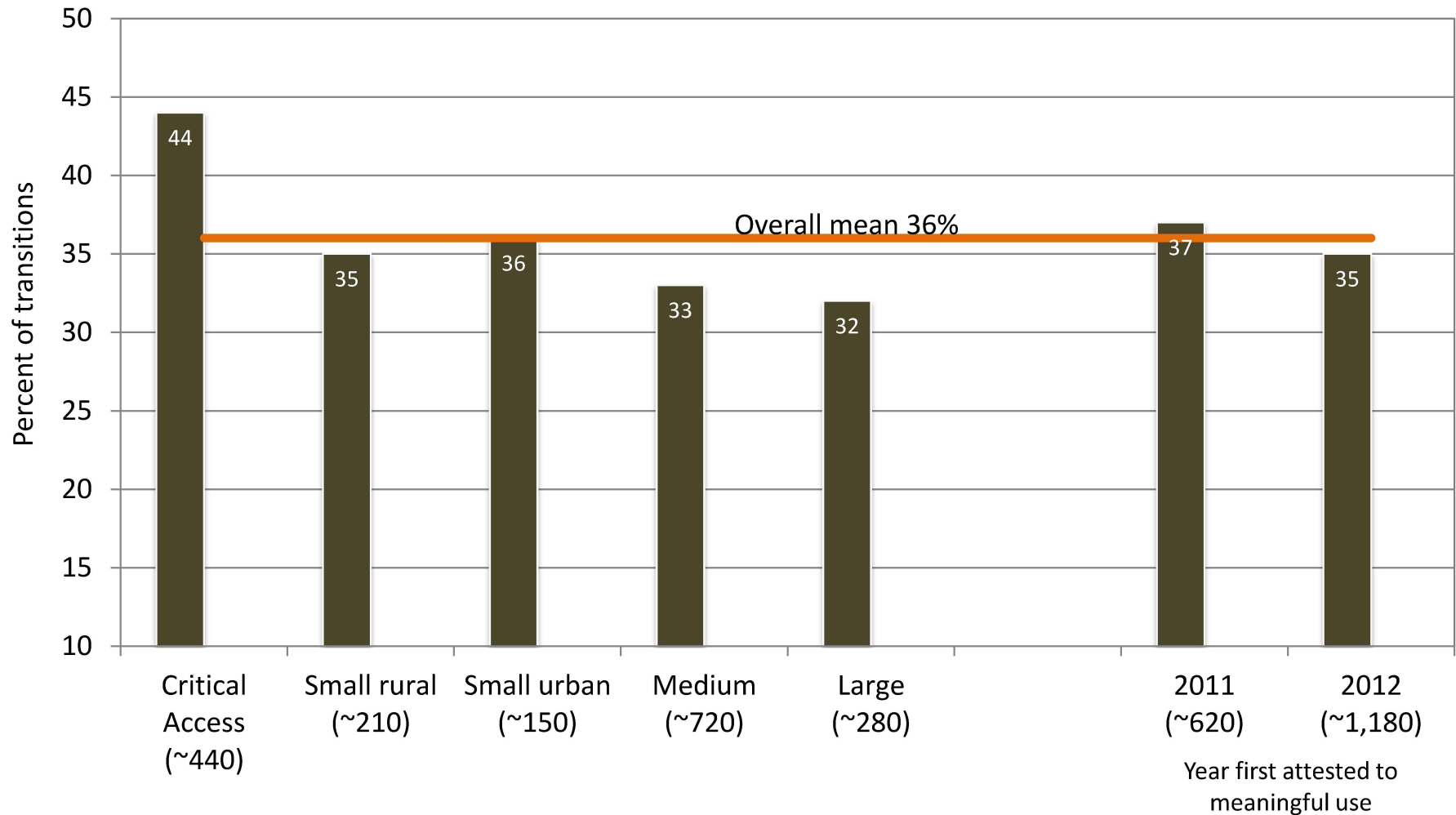


# Care Transitions

# Critical Access Hospitals reported sending an electronic summary of care to a higher proportion of transitions than other hospital types



**Average proportion of hospital transitions that included an electronic summary of care document, FY2014**



Based on CMS EHR Incentive Program data through January 31, 2015. The electronic summary of care measure applies only to stage 2 hospitals, and requires that more than 10% of care transitions have a summary of care record provided electronically using certified technology.

- On average, stage 2 hospitals are sending electronic summaries of care for 36% of all transitions
- Critical Access Hospitals reported the highest summary of care rates
  - On average, 44% of transitions from CAHs received an electronic summary of care
- Large hospitals (400+ beds) reported the lowest provision rate of electronic summaries of care
  - On average, 32% of transitions from large hospitals received an electronic summary of care

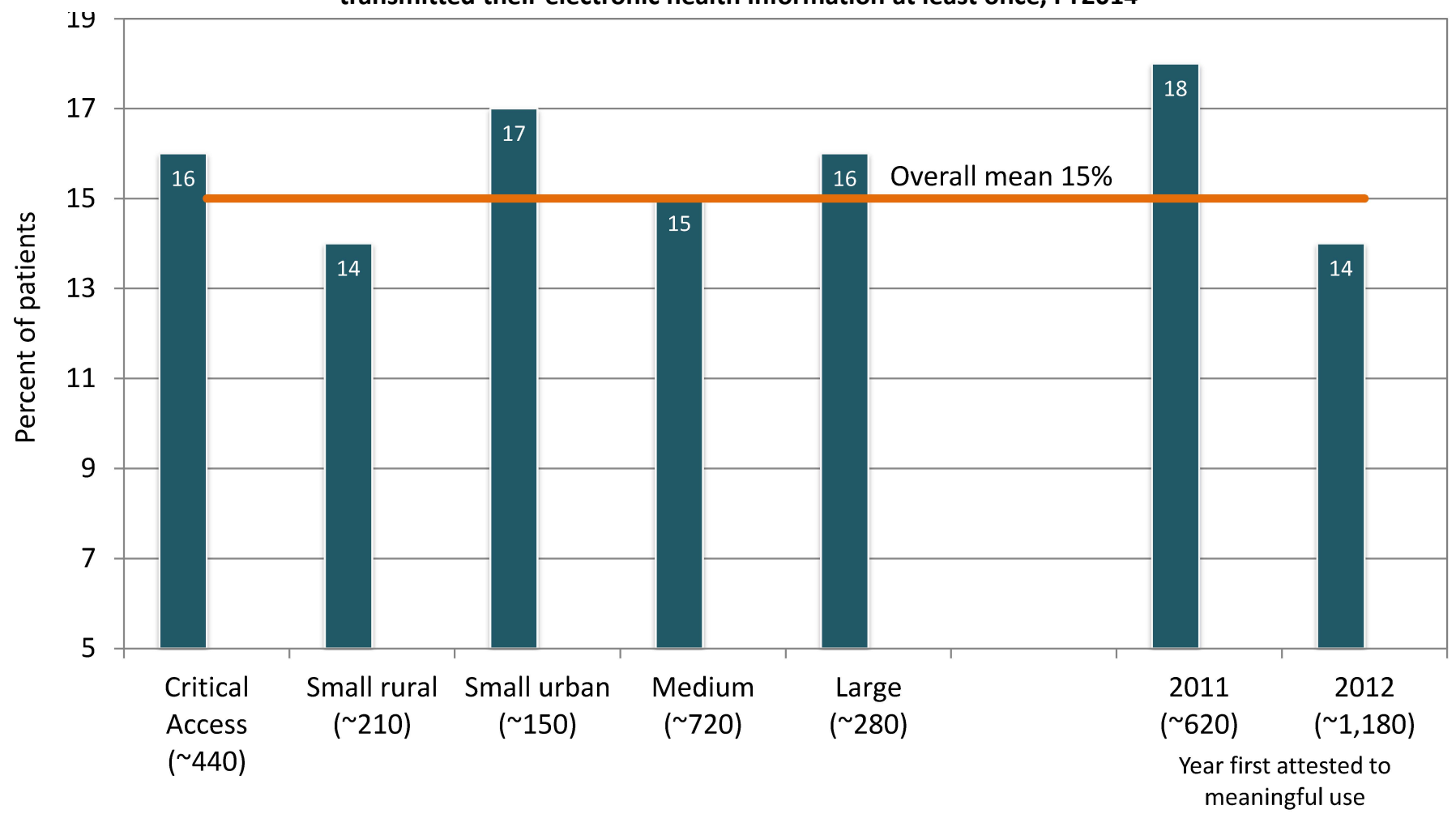
# Patient Engagement



# Hospitals that have been in the Incentive Program longer reported higher rates of patients who viewed, downloaded, or transmitted their electronic health information



Average proportion of patients who have viewed, downloaded, or transmitted their electronic health information at least once, FY2014

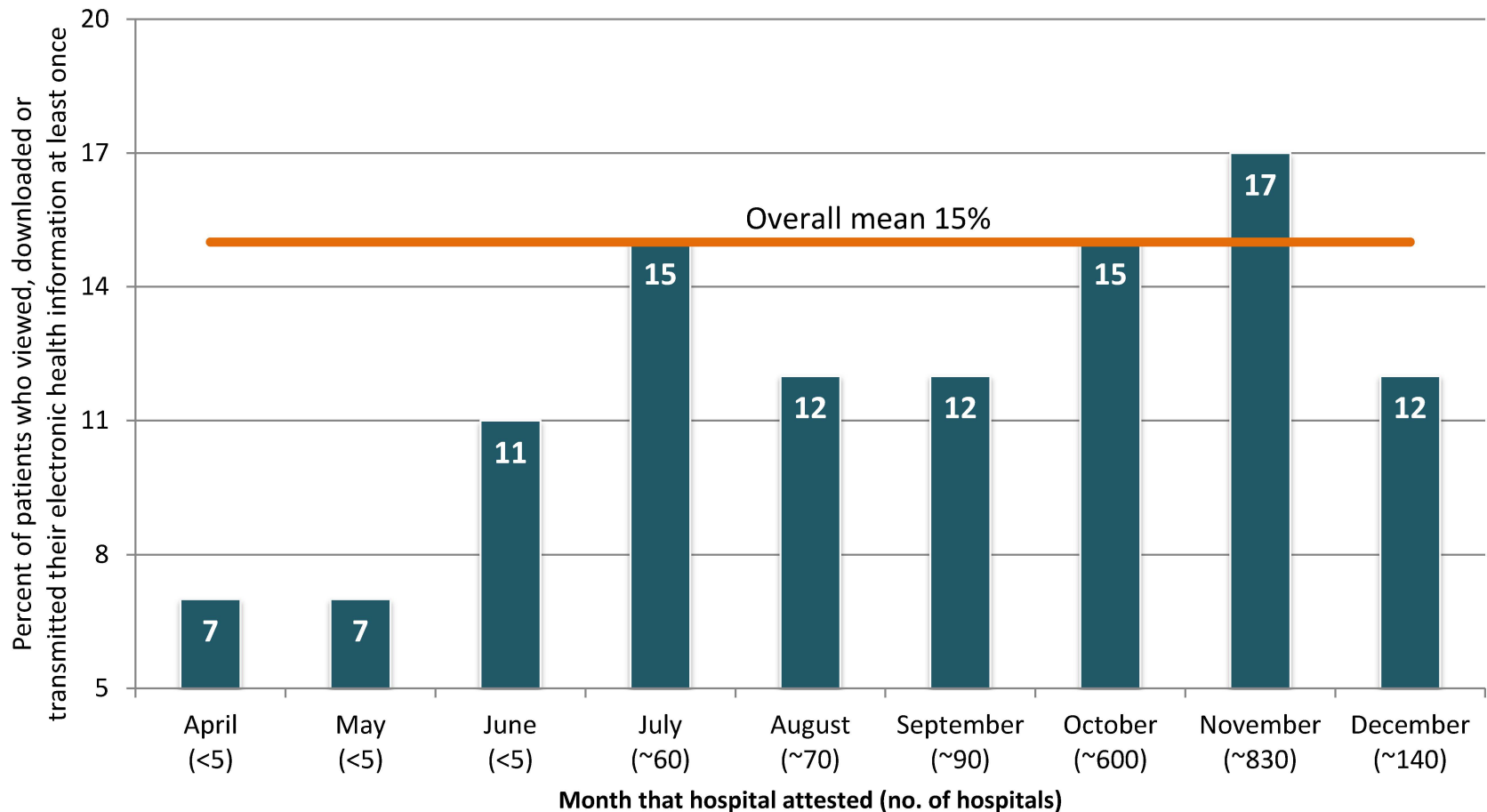


Based on CMS EHR Incentive Program data through January 31, 2015. This measure applies only to stage 2 hospitals, and requires that more than 5% of patients view, download, or transmit their electronic health information at least once. 8

# Hospitals that attested in November reported the highest rates of patients viewing, downloading, or transmitting their electronic health information at least once



### Average reported score by eligible hospitals for VDT measure 2 by attestation month



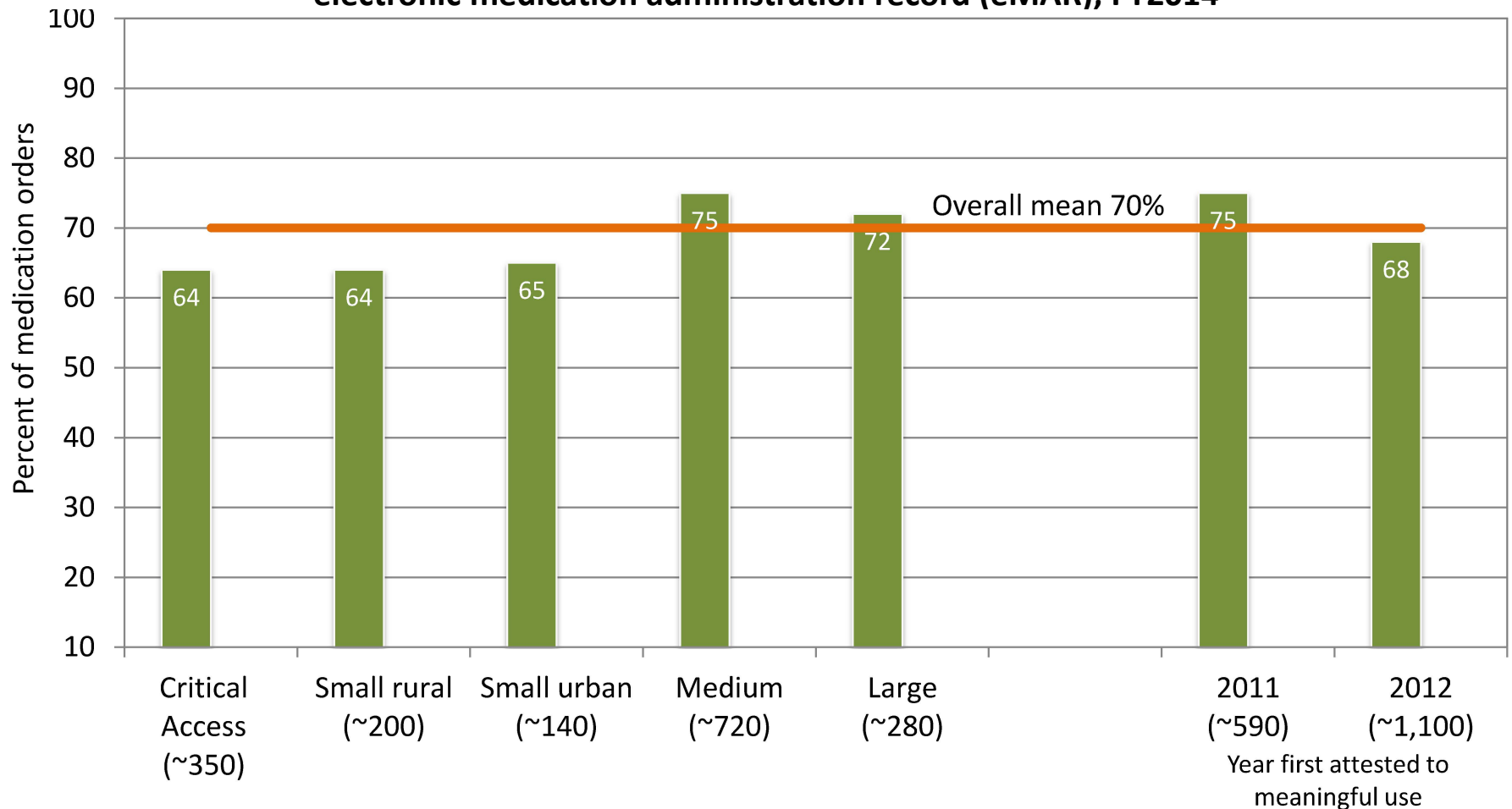
Based on CMS EHR Incentive Program data through January 31, 2015. For VDT measure 2, hospitals must attest that more than 5% of all their patients viewed, downloaded, or transmitted their electronic health information at least once. 9

- On average, 15% of stage 2 hospitals' patients viewed, downloaded, or transmitted their electronic health information at least once
- Hospitals that have been meaningful users since 2011 have the highest average rates (18%) of VDT
- With an average of 17%, hospitals that attested in November had the highest rates of patients viewing, downloading, or transmitting their electronic health information at least once

# Patient Safety

# Medium-sized hospitals reported higher electronic medication administration record (eMAR) tracking rates for their inpatient or ED medication orders

**Average hospital rate of tracking all doses of medication orders through an electronic medication administration record (eMAR), FY2014**

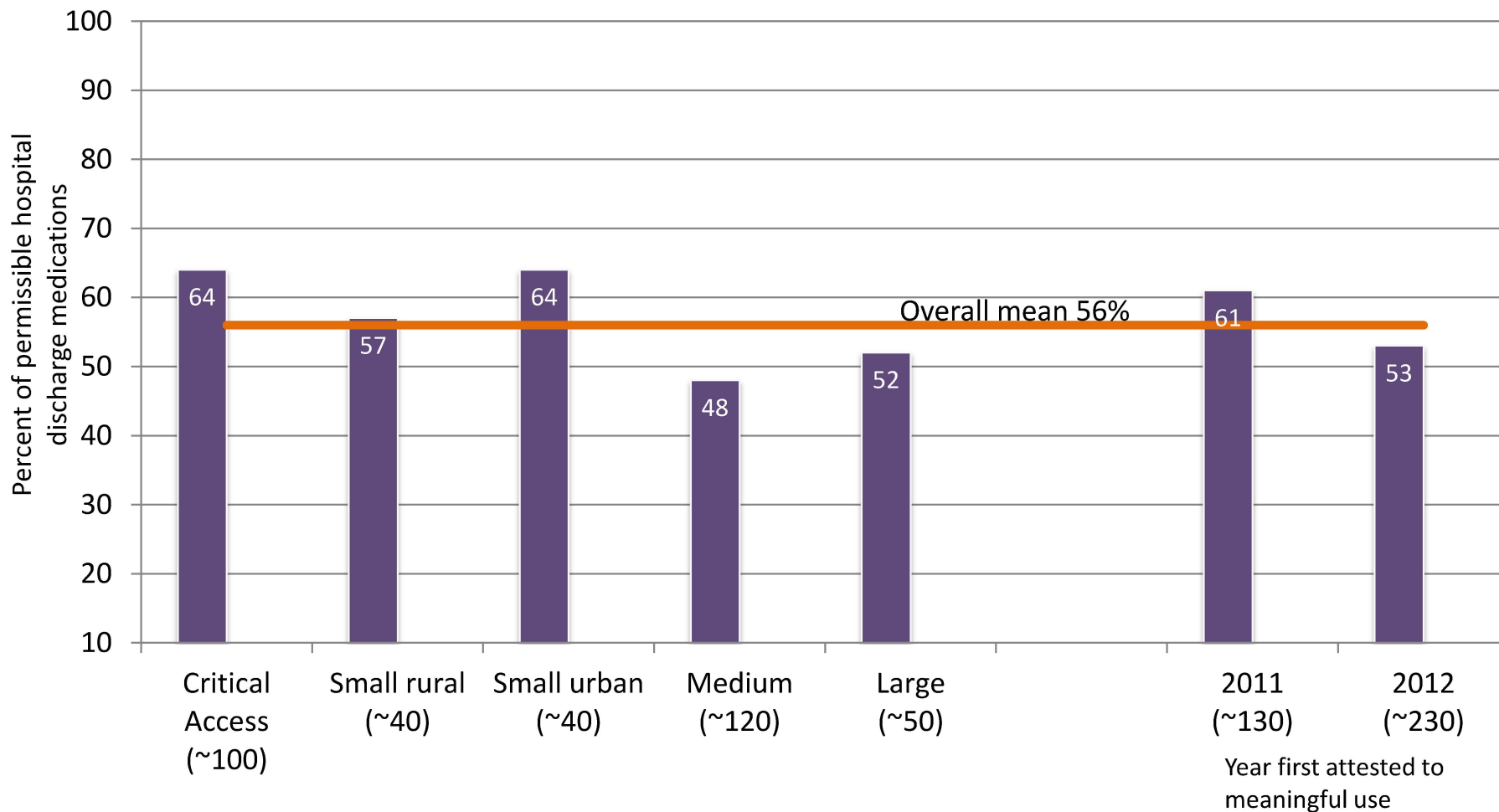


Based on CMS EHR Incentive Program data through January 31, 2015. The stage 2 eMAR measure requires that more than 10% of the hospitals' inpatient or emergency department (ED) medication orders have all doses tracked through an electronic medication administration record (eMAR). 6% of hospitals took an exclusion on this measure.

# Among hospitals that selected the eRx menu measure, smaller hospitals reported the highest e-prescribing rates



Average hospital performance on the e-prescribing menu measure, FY2014



Based on CMS EHR Incentive Program data through January 31, 2015. The stage 2 e-prescribing (eRx) measure is optional. For this measure, hospitals must query for a drug formulary and transmit electronically more than 10% of their permissible hospital discharge medications.

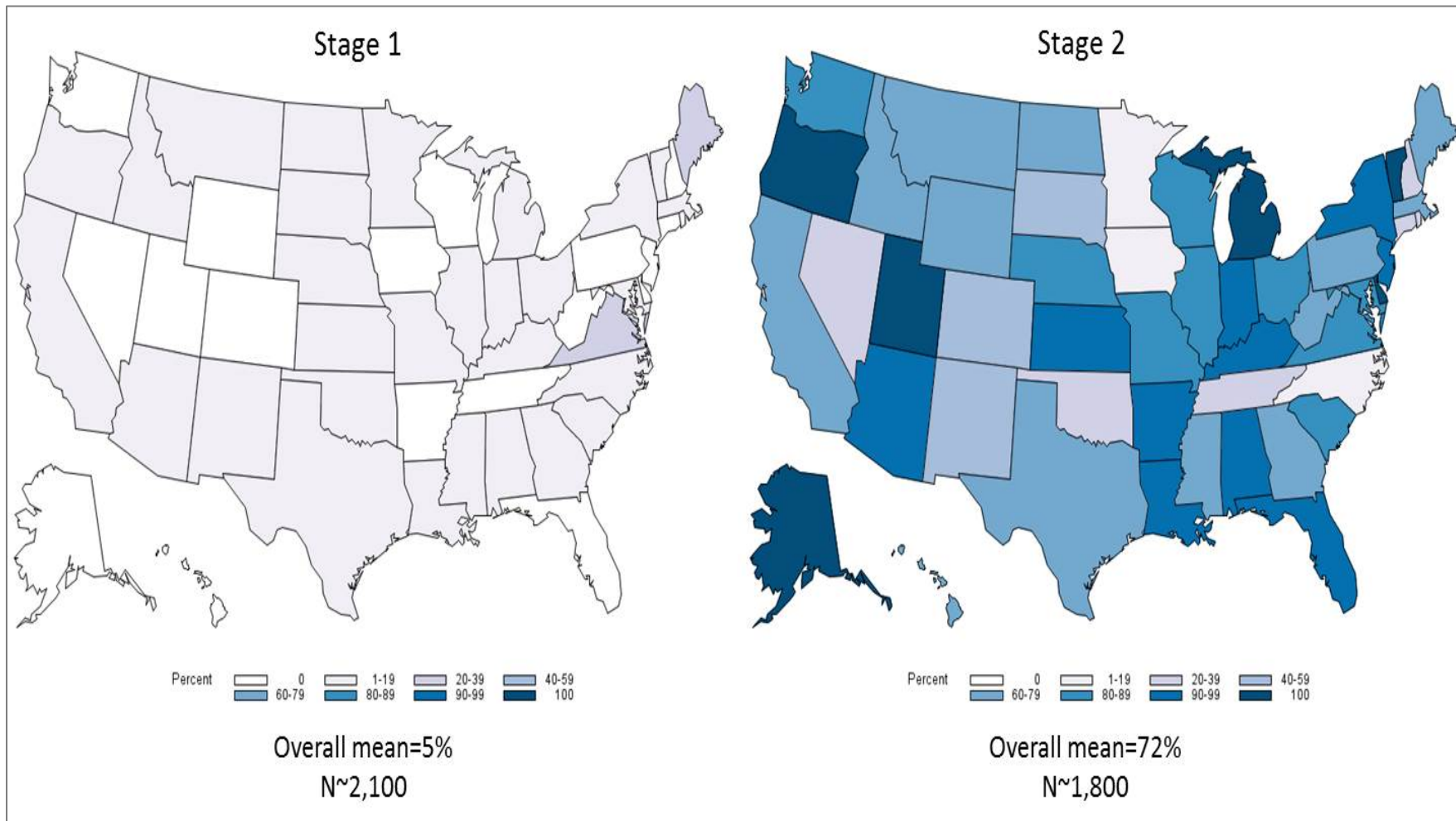
- On average, 70% of medications administered in stage 2 hospitals had all doses tracked through an electronic medication administration record (eMAR)
  - Medium-size hospitals and hospitals that first attested to meaningful use in 2011 reported the highest average eMAR tracking rates
- The e-prescribing measure is an optional measure in stage 2. On average, hospitals that selected this measure used e-prescribing for 56% of all permissible discharge medications
  - Of the hospitals that selected the measure, Critical Access Hospitals and other small hospitals reported the highest average discharge eRX rates at 64%
  - Of the hospitals that selected the measure, medium-size hospitals had the lowest average discharge eRx rates at 48%

# Public Health Reporting



# More stage 2 hospitals reported on all public health measures without exclusion than did stage 1 hospitals

Percent of Medicare eligible hospitals that reported on all applicable public health measures in 2014.



Based on CMS EHR Incentive Program data through December, 2014. Includes eligible hospitals reporting to the Medicare EHR Incentive Program for Fiscal Year 2014. (n~4,000) For more information on public health reporting, see the data brief posted here: <http://dashboard.healthit.gov>

- Three public health measures are required reporting for stage 2; these were optional for stage 1.
- Seven in 10 stage 2 hospitals reported, without exclusion, on all three public health measures.
- 5% of stage 1 hospitals reported, without exclusion, on all three public health measures.

# Questions?

- Denominator data for hospitals was obtained based on the CMS list of certified hospitals through September, 2014 and CMS EHR Incentive Program participants through January, 2014.
- Hospital size was based on the number of certified beds as reported in the CMS Provider of Service files through September, 2014 (<http://www.cms.gov/Research-Statistics-Data-and-Systems/Downloadable-Public-Use-Files/Provider-of-Services/index.html>). CAHs were separated prior to classification by size and geography. Bed size was unavailable for less than 1% of hospitals. Size categories were:
  - **Large:** 400 or more beds
  - **Medium:** 100-399 beds
  - **Small:** 1-99 beds
- Geographic location was based on the county in which the hospital was located based on the zip code provided through the CMS EHR Incentive Program data file. Hospitals in metropolitan counties were classified as urban. Hospitals in micropolitan and areas that were not in a combined statistical area were classified as rural. Combined Statistical Area designations were based on HRSA's 2012/2013 Area Resources File.
- Hospitals were assigned to an attestation cohort based on the first year they attested to, or were paid for, meaningful use with either the Medicare or Medicaid EHR Incentive Program.