



To: Marc Probst, Vice President and Chief Information Officer, Information Systems
Intermountain Healthcare, Co-Chair, Adoption/Certification Workgroup, ONC Health IT Policy Committee

Larry Wolfe, Health IT Strategist, Kindred Healthcare, Co-Chair, Adoption/Certification Workgroup, ONC
Health IT Policy Committee

Date: Dec. 11, 2013

RE: ONC's Proposed Voluntary Certification Program for LTPAC EHRs- VIA ELECTRONIC SUBMISSION

Dear Marc and Larry,

LeadingAge is a 501c3 tax-exempt charitable organization focused on education, advocacy and applied research. The mission of LeadingAge is to expand the world of possibilities for aging. Its members touch **4 million** lives every day and include **6,000** not-for-profit organizations representing the entire field of aging services, **39** state partners, hundreds of businesses, consumer groups, foundations and research partners. LeadingAge is also a part of the International Association of Homes and Services for the Ageing that spans thirty countries across the globe. The **LeadingAge Center for Aging Services Technologies (CAST)** is focused on accelerating the development, evaluation and adoption of emerging technologies that will transform the aging experience. CAST is an international coalition of more than 400 technology companies, aging-services organizations, businesses, research universities and government representatives. CAST works under the auspices of LeadingAge.

As you know, the long-term and post-acute care (LTPAC) vision encompasses a broad range of providers: home and community-based services; nursing homes; assisted living; long-term acute care hospitals; rehabilitation and post-acute care facilities; PACE programs; hospice; chronic disease and co-morbidity management; medication therapy management and senior pharmacists; wellness providers; and others.

Providers in the LTPAC sector concentrate on coordination of supportive services and care, restoring and maintaining health, wellness and functional abilities, and a particular, almost programmatic, focus on the particular needs and goals of each of its consumers and their families. This focus demands an application of health IT towards shared care, transitions of care, and person-centered longitudinal health and wellness records to ensure a person receives affordable, quality and coordinated care when they need it, where they need it.

LeadingAge and CAST, which are founding members of the LTPAC Health IT Collaborative (<http://www.ltpachealthit.org/>), have been advocating for interoperability standards development, and tracking implementation of such standards as well as certification activities by LTPAC EHR vendors through its LTPAC EHR Initiative. In this vein, CAST produces and annually updates an EHR Selection Matrix. Moreover, CAST maintains the most up-to-date information about certification of LTPAC EHR products in an online EHR selection tool. For more information, please see: http://www.leadingage.org/CAST_Completes_2013_Electronic_Health_Record_Portfolio_with_Updated_Online_Selection_Tool.aspx).

Today, I am writing to express LeadingAge's, CAST's and my support for plans to establish a voluntary program for EHRs designed for providers who are not explicitly eligible to participate in the Medicare and Medicaid EHR Incentive Program, including LTPAC and behavioral health care providers.

We believe that such a program would help identify gaps in the interoperability standards and certification criteria that are key to meaningfully engaging non-eligible providers in health information exchange activities. This, in turn, would drive standards development to address those gaps and would advance interoperability, ultimately encouraging health information exchange between incentive-eligible and non-eligible providers.

We believe that LTPAC EHR providers would pursue the voluntary certification program, as they have voluntarily demonstrated in the recent past by pursuing available certification programs. We know, for example, that at least 4 LTPAC EHR vendors have completed at least one of CCHIT's LTPAC voluntary certification programs. More importantly, we know that there are at least 12 LTPAC EHRs, from 11 vendors, that have received ONC-ATCB Meaningful Use Certification, even though CMS' Health IT adoption incentives were not available to LTPAC providers.

However, we believe that for LTPAC EHR vendors to embrace and pursue ONC's proposed voluntary certification program, the program must:

- 1- **Leverage and build upon existing certification programs that many of LTPAC EHR vendors have already pursued, including earlier editions of ONC's Meaningful Use Certification and CCHIT's two LTPAC Certification Programs (Nursing Home and Home Health EHRs), where possible, to encourage vendors who have invested in pursuing these programs to go the extra mile.**
- 2- **Better align the certification criteria with those of the 2014 Edition of ONC-ATCB Meaningful Use Certification but relevant to LTPAC settings to a) ensure cross-setting harmony and b) help LTPAC providers leverage the incentive program directly and indirectly, e.g. through partnerships with hospitals.**
- 3- **Encourage LTPAC providers to adopt/ upgrade to certified EHR technology by providing adoption incentives through levers in payment and health reform initiatives, such as ACOs, Payment Bundling and Hospital Readmission Reduction Programs (HRRP). This entails identifying quality measures that are relevant to LTPAC settings and well-aligned with the established voluntary certification criteria to create payment incentives tied to care quality and/or cost savings to enhance opportunities for LTPAC and behavioral health providers that have the technology to participate in these initiatives more meaningfully.**

We have already alluded to some of these requirements in the comments we submitted in our response to Request for Information - Advancing Interoperability and Health Information Exchange (CMS-0038-NC) submitted by the LTPAC Health IT Collaborative to Farzad Mostashari, former National Coordinator for Health IT, and Marilyn Tavenner, Acting CMS Administrator Centers for Medicare & Medicaid Services, on April 22nd 2013.

If the proposed voluntary certification program meets the requirements outlined above, it is likely not only to succeed, but also encourage broader adoption and higher utilization of health information exchange in alignment with the principles and strategies for accelerating HIE that HHS recently released in 2012.

I commend you and your esteemed workgroup members on your laudable work, and thank you for addressing health IT adoption and certification in the LTPAC and behavioral health sectors.

Please let me know if LeadingAge, CAST or I can be of assistance.

Sincerely,

//signed//

Majd Alwan, Ph.D.,
SVP of Technology, LeadingAge
Executive Director, CAST