

# **Update on HITECH & Other Recovery Act HIT Provisions**

**January 20, 2011**  
Conference Call

**Sponsored by:**

- **Minnesota e-Health Initiative**
- **Minnesota Department of Health**
- **Minnesota Department of Human Services**



# Monthly Update Calls

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- Purpose of the Calls:
  - Brief update on issues important to Minnesota Stakeholders
  - Provide a Q & A opportunity
  - Compliment other communications activities
- Monthly Timing of the Calls
  - Usually Third Thursday of the Month from 4:00 - 4:45 p.m.
  - Next Call Scheduled for February 17, 2011
- E-mail feedback & suggestions for improvement to [bob.b.johnson@state.mn.us](mailto:bob.b.johnson@state.mn.us)

# Plan for Receiving Questions From Conference Call Participants

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- All lines will be muted during the call
- E-mail questions to [bob.b.johnson@state.mn.us](mailto:bob.b.johnson@state.mn.us) at any time during the presentation
- Questions will be addressed following the presentation

*Following the call:  
Questions will be reviewed and staff will identify future  
resource materials to be posted.*

# Reminder

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- We don't have all the answers but we are very interested in hearing your questions and your perspectives.

# Minnesota Electronic Health Record Incentives Program

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e-Health Initiative Update Call  
January 20, 2011

Minnesota Department of Human Services



Minnesota Department of **Human Services**

# Minnesota EHR Incentives

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- ❑ Minnesota EHR incentives website
  - <http://www.dhs.state.mn.us/ehrincentives>
- ❑ Program information
- ❑ Link to CMS eligibility screening tool and resources
- ❑ Medicaid hospital incentive payment calculation template and example
- ❑ Sign up for email updates
- ❑ Email box to submit questions
- ❑ Ongoing updates to NLR registration process and program qualifications



# National Level Repository

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- National Level Repository (NLR) developed and maintained by CMS
  - Single point of entry for registration for both Medicaid and Medicare EHR incentives
  - Ensure no duplication of payments between Medicare and Medicaid and between states
  - Allows Medicare to meet its mandate for online posting requirements
  - Track EHR incentives nationally



# National Level Repository (contd.)

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- EPs and EHs elect state participation
- Collects following proposed information:
  - Name, Business Address/Phone/Email
  - Active National Provider Identifier (NPI)
  - CMS Certification Number (CCN)
  - Taxpayer Identification Number (TIN)
  - Elect participation in Medicare, Medicaid or both
  - EHR Certification Number
- NLR interfaces with state EHR systems



# National Level Repository (contd.)

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## □ NLR Registration Process

### ■ Eligible Hospitals

- If selecting participation in both Medicare and Medicaid programs the Medicaid registration will be placed in 'pending status' until MN program ready for launch

### ■ Eligible Professionals

- Registration process can not be completed until MN program is ready for launch



# Timeline

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- ❑ Estimated launch date for MN EHR incentives program is end of 2011
- ❑ Will not result in reduction of incentive payment to eligible providers or eligible hospitals
- ❑ Supports Adopt / Implement / Upgrade (A/I/U) only in 2011



# Resources:

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- DHS Medicaid EHR Incentive Website
  - <http://www.dhs.state.mn.us/EHRincentives>
- CMS
  - <http://www.cms.gov/EHRIncentivePrograms/>
- REACH
  - <http://www.khareach.org/>
- MDH - Minnesota e-Health Initiative
  - <http://www.health.state.mn.us/e-health>



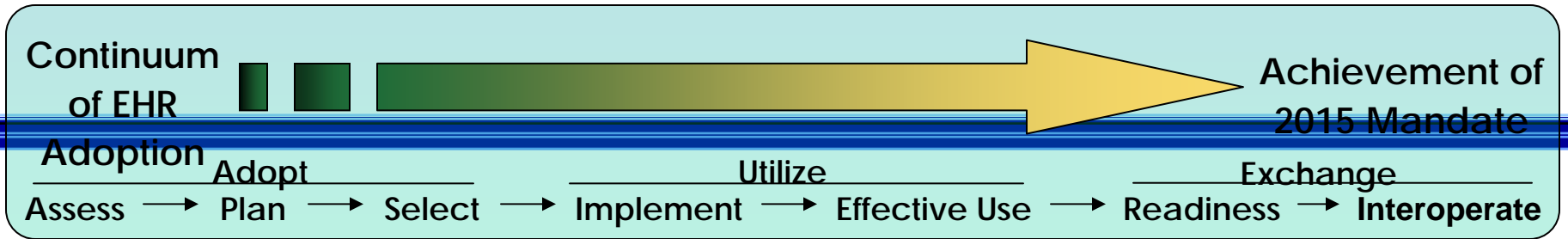
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# **Analysis of MN Health Information Technology (HIT) Ambulatory Clinic Survey**

Kari Guida, MPH  
HIT Assessment and Evaluation Coordinator  
Office of Health Information Technology  
Minnesota Department of Health

January 20, 2011

# Minnesota Model for Adopting Interoperable EHRs



<b>Setting/Domain</b>	<b>Adoption Status</b>	<b>Current Data Source / Plans for Assessment</b>
Ambulatory Clinics	EHR adoption rate: 67% (750/1121)	Annual: MN Health Information Technology (HIT) Ambulatory Clinic Survey
Acute Care Hospitals	Basic or Comprehensive EHR: 25% (another 46% tentatively achieving basic within a year)	Annual: Hospital HIT Survey
Clinical Laboratories		Survey in Winter/Spring 2011
Long Term Care Facilities	Fully or partially implemented an EHR: 32%	2008 Stratis Health Survey; Tentative survey in 2011
Local Health Departments		Annual: LPH PPMRS Performance Measures results in April
Pharmacies	Ability to e-prescribe: 82% of community pharmacies	Surescripts (2010) and other sources

# Background

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- The Minnesota Statewide Quality Reporting and Measurement System (MN Rules, Chapter 4654) requires that all physician clinics complete an HIT ambulatory clinic assessment survey
  - MDH contracted with Minnesota Community Measurement (MNCM) to develop and administer the survey
  - Technical advisory group (10 members) guided the development of the survey

# Background (continued)

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- The MN Health Information Technology (HIT) Ambulatory Clinic Survey (2010 Survey)
  - 65 questions
  - Link to online survey sent out to clinics in Minnesota, Wisconsin, and Iowa and completed in February and March of 2010
  - Non-respondents and newly registered clinics were sent link to online survey in June 2010

# Clinics Surveyed

Category	Total Number	Number of Respondents	Rate of Response
Minnesota Clinics	1285	1121	87%
Iowa and Wisconsin Clinics	97	77	79%
Total Clinics	1382	1198	87%

# Methods

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- Analysis completed on Minnesota respondents (N = 1121)
- Analysis at clinic level, not system level except for barriers questions
- Not able to separate primary care clinics from specialty clinics for 2010 Survey but should be able to for 2011 Survey

# Methods (continued)

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- Measuring Meaningful Use
  - MDH developed a crosswalk between the 2010 Survey and clinic core objectives
  - Not always a 1:1 ratio
  - 14 of the 15 core objectives “assessed”
    - Privacy and security of patient data was not assessed
  - Identified which clinics were achieving objectives at the level closest to the meaningful use measures

# Summary of Results

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- Applying for Medicaid and Medicare Incentives
- EHR Adoption
  - Status
  - Challenges and Barriers
- Meaningful Use
  - Status
  - Challenges and Barriers

# Percent of Clinics Anticipating Providers Applying for Medicare or Medicaid Incentives (N = 1121)



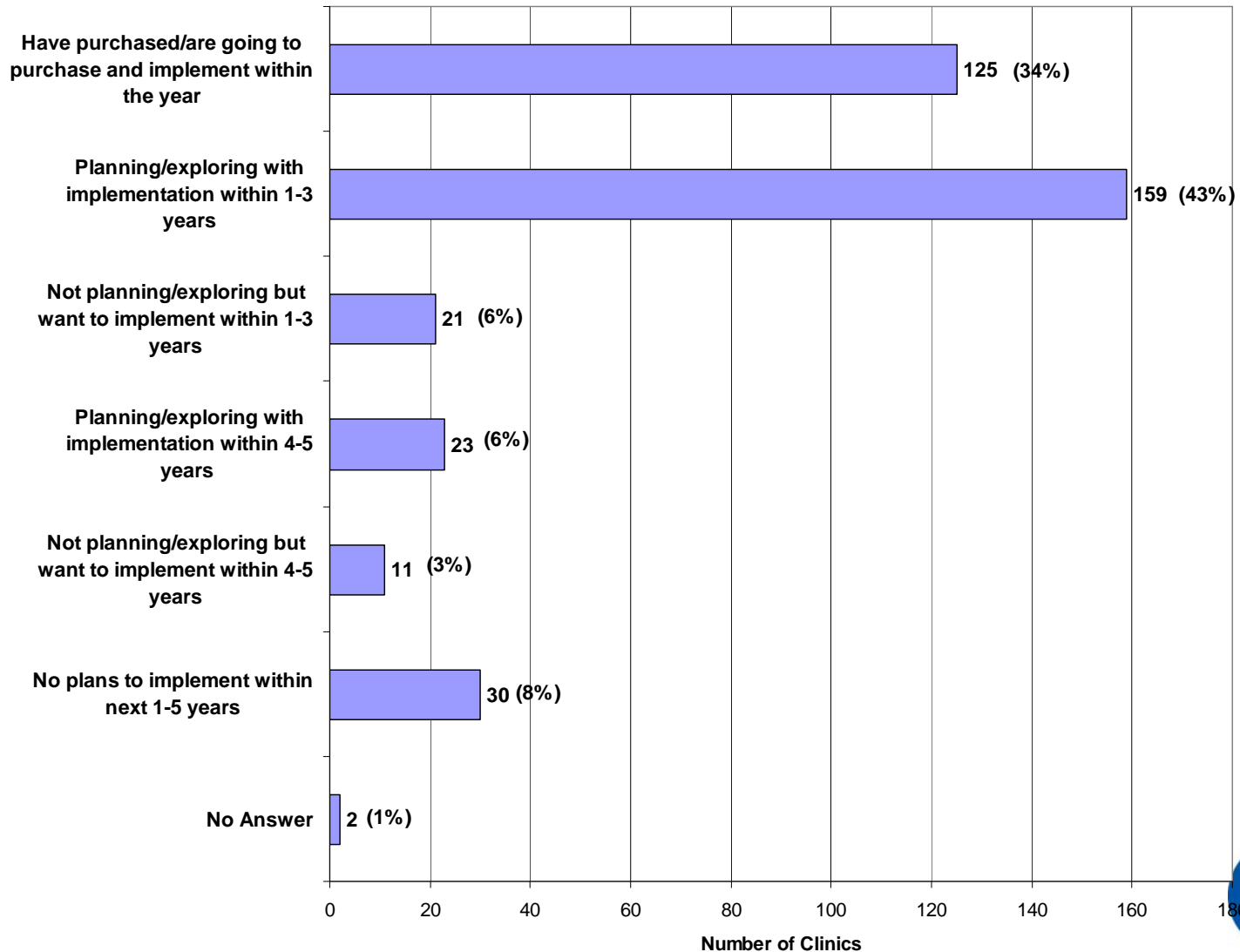
# EHR Adoption of Clinics (N = 1121)

Status of EHR Adoption	Number of Clinics (percent of clinics)
EHR installed and in all/most of areas of the clinic	687 (61%)
EHR installed and in use by some areas of clinic	63 (6%)
Purchased/begun installation of an EHR but not using	101 (9%)
Have no EHR	270 (24%)

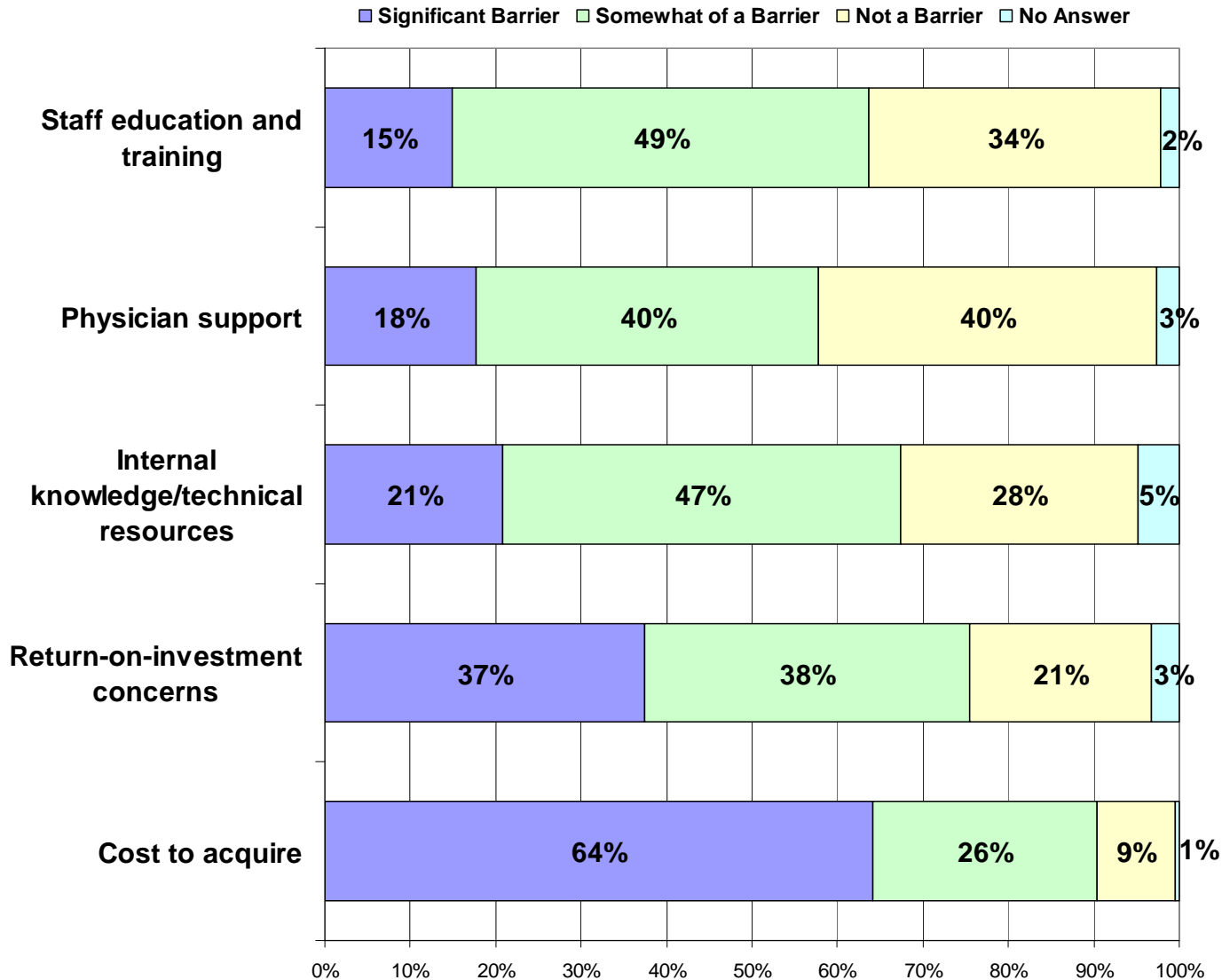
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# **Clinics with no EHR or not using an EHR but purchasing/installing**

# Plans for Acquisition and Implementation of an EHR (N = 371)



# Barriers Impacting EHR Implementation Status (N = 187)



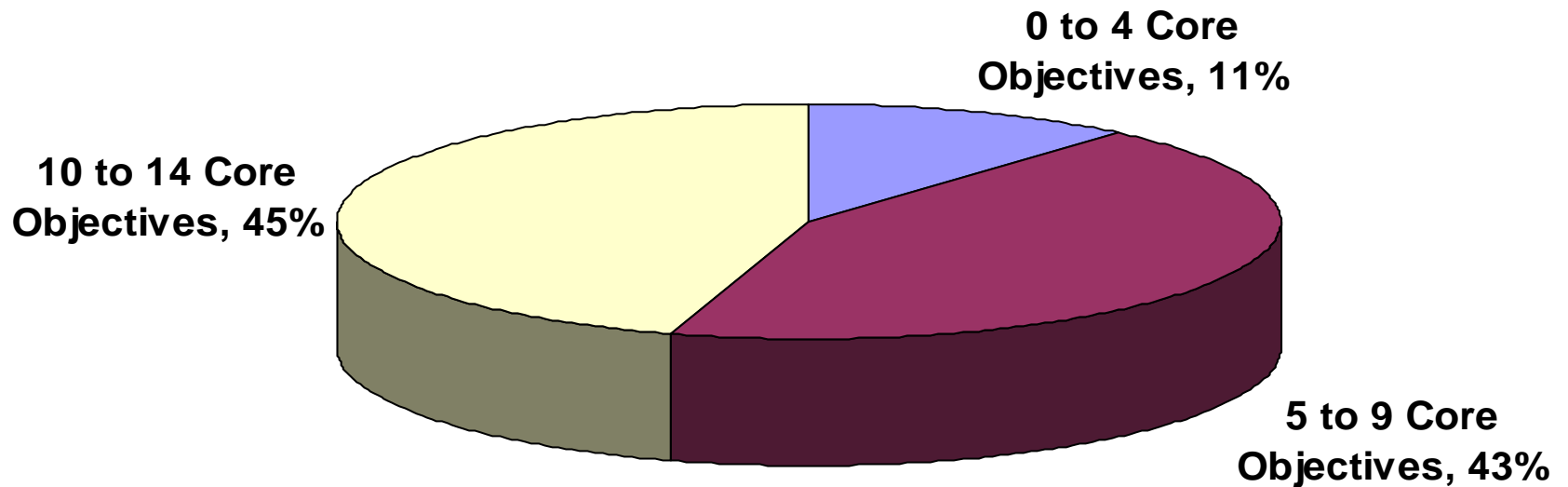
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# **Clinics with EHR installed and in use**

# Usage of EHR Systems at Clinics (N = 750) (continued)

<b>Level of Paper Use</b>	<b>Percent of clinics (number of clinics)</b>
Entirely Paperless	61% (459)
Maintain paper charts, but EHR is most accurate	33% (246)
Primarily use paper charts, but maintain EHR for some information	5% (38)
Other	1% (7)

# Percent of Clinics Meeting Core Objectives (N = 750)



# Clinics Achieving Select Meaningful Use Objectives (N=750)

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- Clinical Summary: 16%
- Demographics: 25%
  - Ethnicity: 30%
- Provide patient with health information: 43%
- Exchange Health Information: 64%
- Clinical Decision Support: 86%
- Medication Allergy List: 87%

# Percent of Clinics Electronically Exchanging Clinical and Patient Data with Specific Providers (Aggregated) (N=750)

	Hospitals in system/ affiliated	Hospitals outside of system	Providers outside system	Other care settings (nursing homes, home health)
Routinely SEND, RECEIVE, or SEND and RECEIVE electronic data	59%	20%	35%	14%
DO NOT send or receive electronic data	38%	77%	63%	83%
No Answer	3%	3%	2%	3%

# Challenges and Barriers (N = 317)

- Using CPOE
  - Requires staff training: 46%
  - Building orders in the system: 45%
  - Requires maintenance: 32%
- Using tools for clinical decision making at point of care
  - Requires resources to build/implement: 60%
  - Requires staff training: 44%
- Related to secure information exchange with outside organizations
  - HIPPA, privacy, or legal concerns: 50%
  - Competing priorities: 28%

# Next Steps

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- MN HIT Assessment webpage is currently being developed
- Watch for 2011 Ambulatory Clinic Survey in February and March
- Provide feedback to MU stage 2 & 3  
[http://healthit.hhs.gov/media/faca/MU\\_RFC%20\\_2011-01-12\\_final.pdf](http://healthit.hhs.gov/media/faca/MU_RFC%20_2011-01-12_final.pdf)
  - Individually provide feedback
  - Participate in phone call on Feb 2 from 9:00-10:30 or email comments to Kari Guida for MN's response

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# Comments and Questions on the HIT Ambulatory Clinic Survey

Kari Guida, MPH  
HIT Assessment and Evaluation Coordinator  
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651-201-4136

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# *Questions?*

e-mail questions to  
**[bob.b.johnson@state.mn.us](mailto:bob.b.johnson@state.mn.us)**

# For More Information

**Liz Cinqueonce**

Deputy Director

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Office of Health Information Technology

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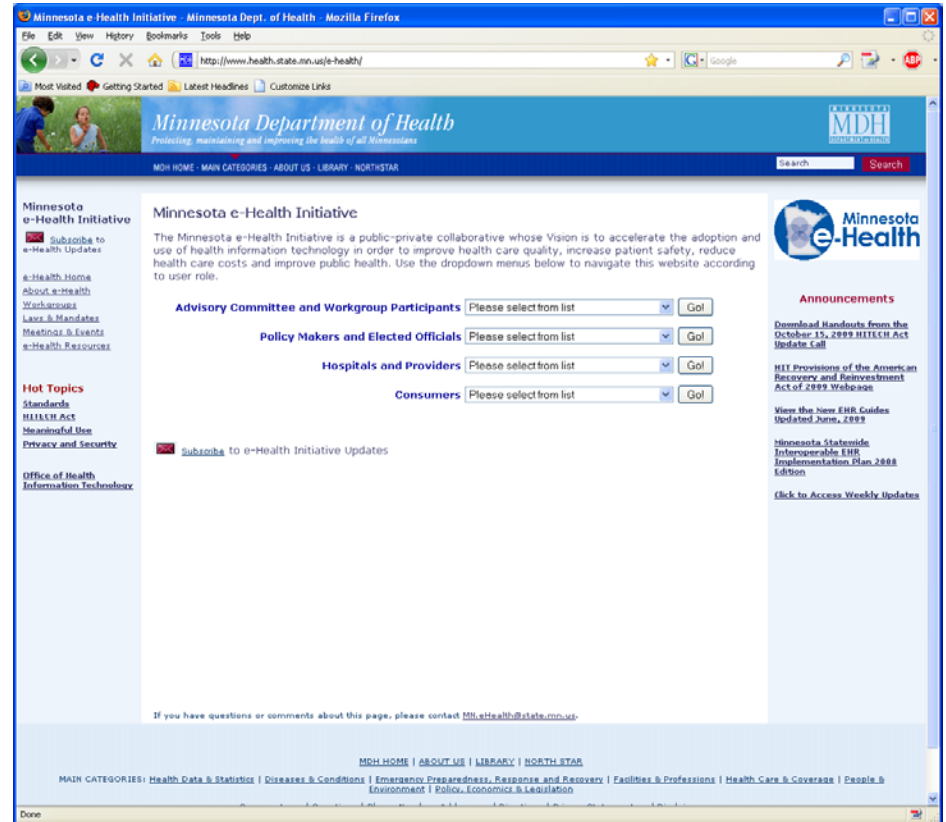
**Bob Johnson**

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651-201-4856



The screenshot shows the Minnesota e-Health Initiative website. The browser window title is "Minnesota e-Health Initiative - Minnesota Dept. of Health - Mozilla Firefox". The address bar shows "http://www.health.state.mn.us/e-health/". The website header includes the Minnesota Department of Health logo and the tagline "Promoting, maintaining and improving the health of all Minnesotans". The main content area is titled "Minnesota e-Health Initiative" and contains a paragraph about the initiative's vision. Below this, there are four dropdown menus for "Advisory Committee and Workgroup Participants", "Policy Makers and Elected Officials", "Hospitals and Providers", and "Consumers", each with a "Go!" button. A "Subscribe to e-Health Initiative Updates" button is also present. The right sidebar features "Announcements" with links to "Download Handouts from the October 15, 2009 HIT/ICH Act Update Fall", "HIT Provisions of the American Recovery and Reinvestment Act of 2009 Webpage", and "View the New EHR Guides Updated June, 2009". The footer includes "MDH HOME | ABOUT US | LIBRARY | NORTH STAR" and "MAIN CATEGORIES: Health Data & Statistics | Diseases & Conditions | Emergency Preparedness, Response and Recovery | Facilities & Professions | Health Care & Coverage | People & Environment | Policy, Economics & Legislation".

[www.health.state.mn.us/e-health](http://www.health.state.mn.us/e-health)

