



National Committee on Vital and Health Statistics

Executive Subcommittee

Hearing on “Meaningful Use” of Health Information Technology

Panel 8:

The Glide Path to Meaningful Use for 2011 and Beyond for other Stakeholders

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What are the challenges associated with coordinating meaningful use policy and operations across Medicare and Medicaid in 2011 and as requirements become more robust over time?

- Provider identification
 - Enroll/register for meaningful use reporting and incentive payment
 - Requires increased level of granularity to account for relationships and association between the eligible professional with practice settings and use of EHR
- Maintain integrity of incentive payments
 - Medicare and Medicaid must coordinate incentive payments across the continuums of time, location, and program participation in order to pay accurately
- Factoring provider workflow and patterns of practice to operate a measures collection and incentive payment program
- Factoring the integration points between Medicare and Medicaid for policies and operations
- Accounting for overall industry readiness and coordinating robustness of meaningful use with stakeholders
- Ongoing integration of legacy processes, operations, systems, and data with new requirements. Incentivizing the use of EHRs is an initial step in payer programs to conduct greater levels of integration between the business processes of paying bills and measuring quality
- Medicare and Medicaid IT capabilities and capacities require increased scaling to meet growth in data and data integration requirements
- Entire healthcare industry along with Medicare and Medicaid are faced with resource challenges in just maintaining day-to-day operations and planning for major changes already in the works—CMS must implement ARRA provisions without adversely affecting our current operations and programs
- Attention to Security & Privacy rules, regulations, and requirements and how they may change over time is critical to successful operations and policy development



What are the most important policy issues associated with implementing the Medicare and Medicaid incentives programs (e.g., setting 2011 criteria high enough while still assuring widespread participation)?

- Defining meaningful use measures and associated data standards
- Balancing greater rates of EHR adoption with the rate of improvement in standard measures of meaningful use
- Building a clear roadmap for desired sets of outcomes
- Measuring policy effectiveness
 - Ensure policies for incentive program influences greater rates of adoption of EHRs
 - Ensure adoption and meaningful use are sustained
- Creating a robust security policy framework to address HIEs where source data are from EHRs
- Establishing privacy policies for the ethical sharing and use of health information
 - Critical to ensure that organizations do not use such information to deny care, insurance, employment, etc., based on access to these records
- Establishing policies that harmonize payer centric, provider centric, and patient centric healthcare domains
- Policy coordination among all the stakeholders
- Education, Outreach, and Communication
- Using EHR incentives to further link payment to quality