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*Slides are available for download at
www.ehdc.org under 'New Resources'*



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Policy Workgroup Webinar

Mind the Gap: Addressing the Meaningful Use Attestation Disparity

Follow us: @ehealthdc, join the discussion: #ehipolicy

Reminders

- 1) At any time, you can submit a question via the chat box*
 - 2) This call is being recorded*
 - 3) Slides are available for download at www.ehfdc.org under 'New Resources'*
- The audio recording will be posted within 24 hours.*



Agenda

2:00 – 2:05 PM Welcome and Introductions

- Nadeen Siddiqui, Policy Analyst, eHealth Initiative (eHI)
- Moderator: Mary Brown, Director of External Affairs, Quality Health Network (QHN)

2:05 – 2:35 PM Presentations

- Leila Samy, Rural Health IT Coordinator, Office of the National Coordinator for Health IT (ONC)
- Beth Schindele, Director, Quality Insights of Delaware – Regional Extension Center (QIDE REC)
- Debbie Geiger, Executive Director of Acute Care Services, Harbor Beach Community Hospital (HBCH)

2:35 – 2:45 PM Panel Discussion

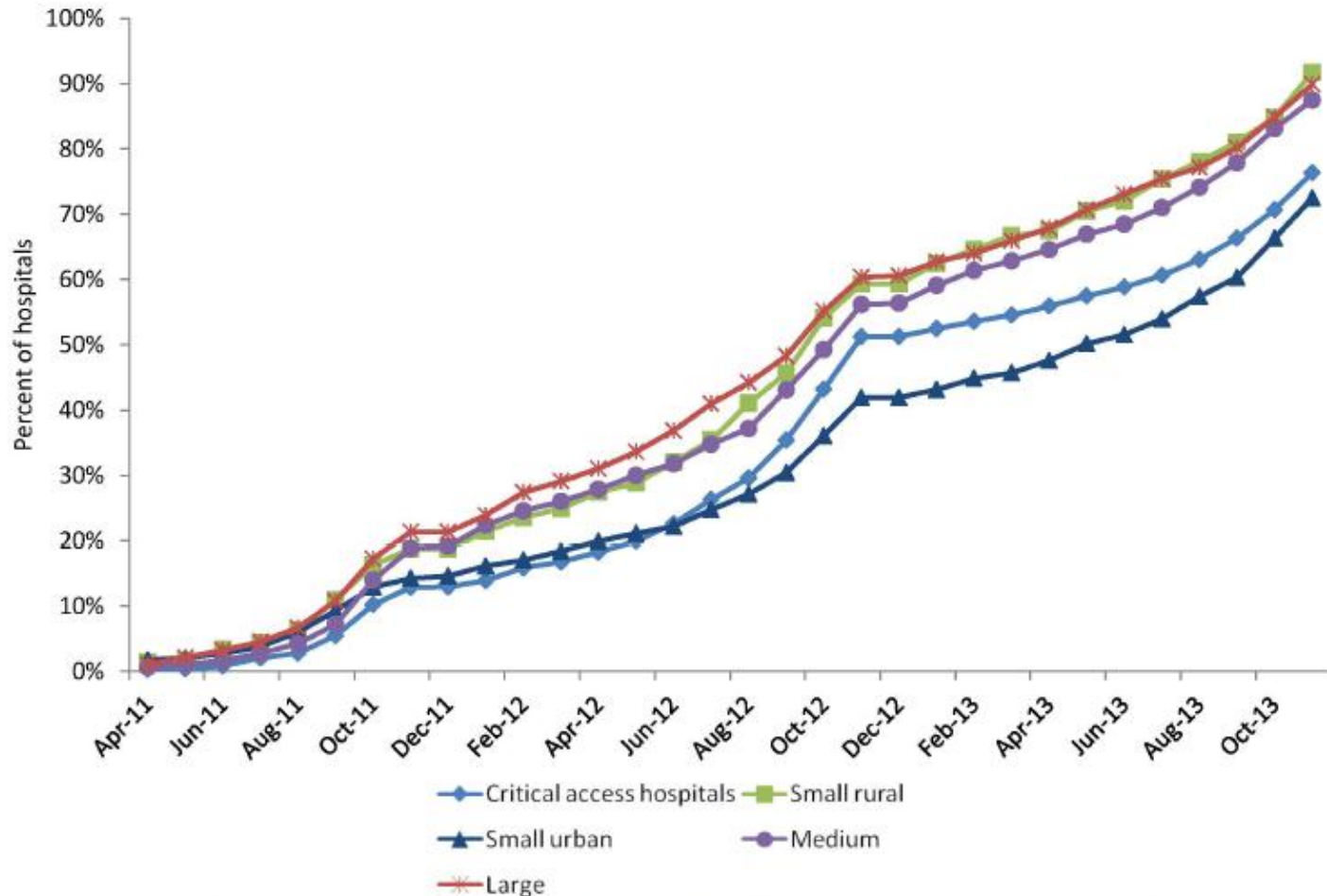
2:45 – 2:55 PM Q&A

2:55 – 3:00 PM Updates and announcements

3:00 PM Adjourn



Hospitals attesting to Meaningful Use, through November 2013



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.

4

Source: January 14, 2014 Health IT Policy Committee Meeting, ONC Data Analytics Presentation by Jennifer King, ONC

Panelists



Leila Samy
*Rural Health IT Coordinator
ONC*



Beth Schindele
*Director
Quality Insights of Delaware - REC*



Debbie Geiger
*Executive Director of Acute Care Services
Harbor Beach Community Hospital*



Rural Health IT eHealth Initiative: Policy Workgroup June 17, 2014

Leila Samy, MPH

Rural Health IT Coordinator

Office of the National Coordinator for Health IT



Leila Samy
HHS Office of the
National Coordinator for
Health IT

“Within an agency charged with promoting nationwide adoption of technology in healthcare to transform healthcare delivery, my efforts are centered on ensuring that rural communities are not left behind.”

- Nationwide trends
- How are we doing in rural?
- MU Acceleration Challenge for CAHs/RHs
- Highlight 2 initiatives:
 - Financing for rural health and IT
 - Improving care quality and coordination for rural veterans

Progress with Health IT Adoption Among Hospitals

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Hospitals receiving incentive payments for EHR Adoption or Meaningful Use

May 2011



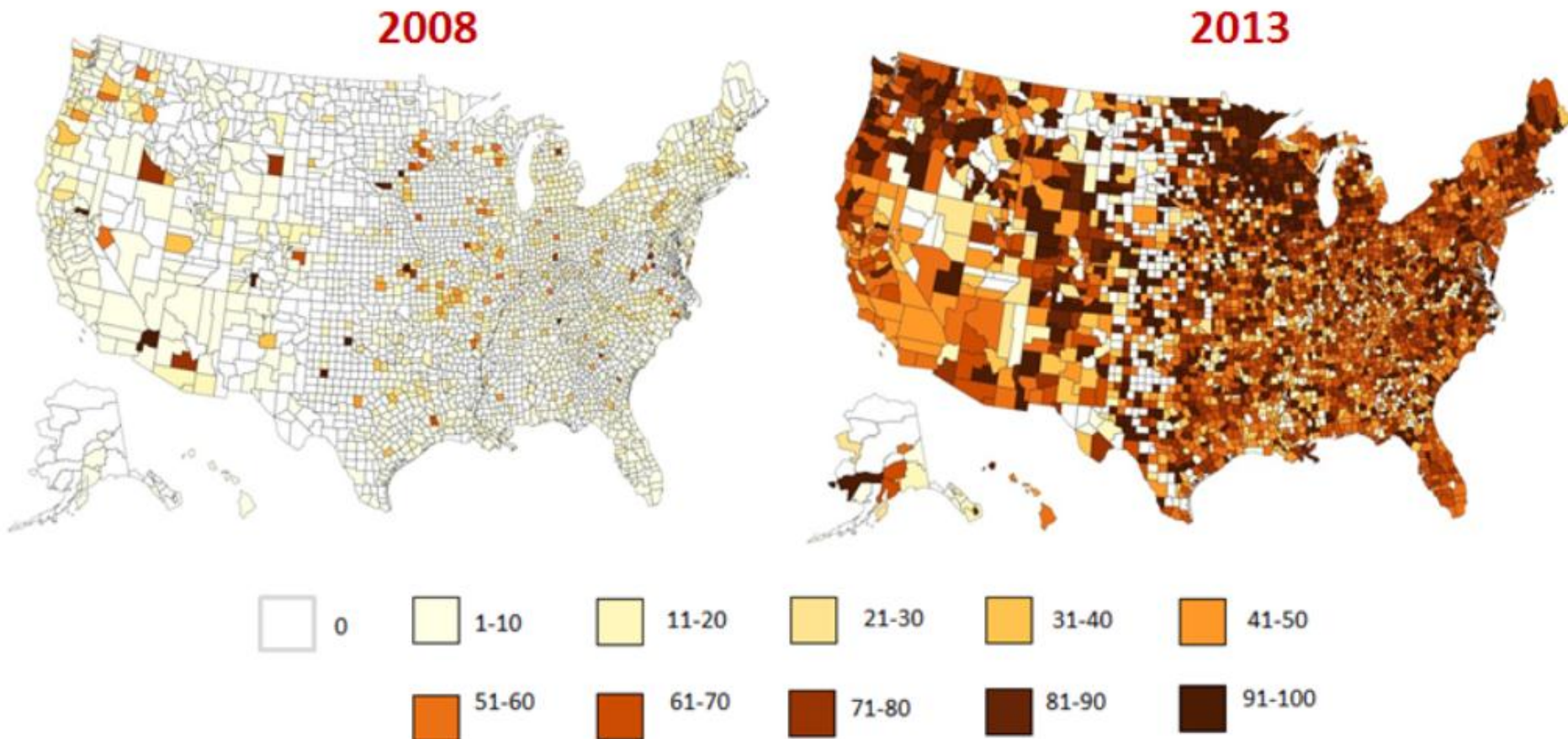
December 2013



Click [here](#) for animated version

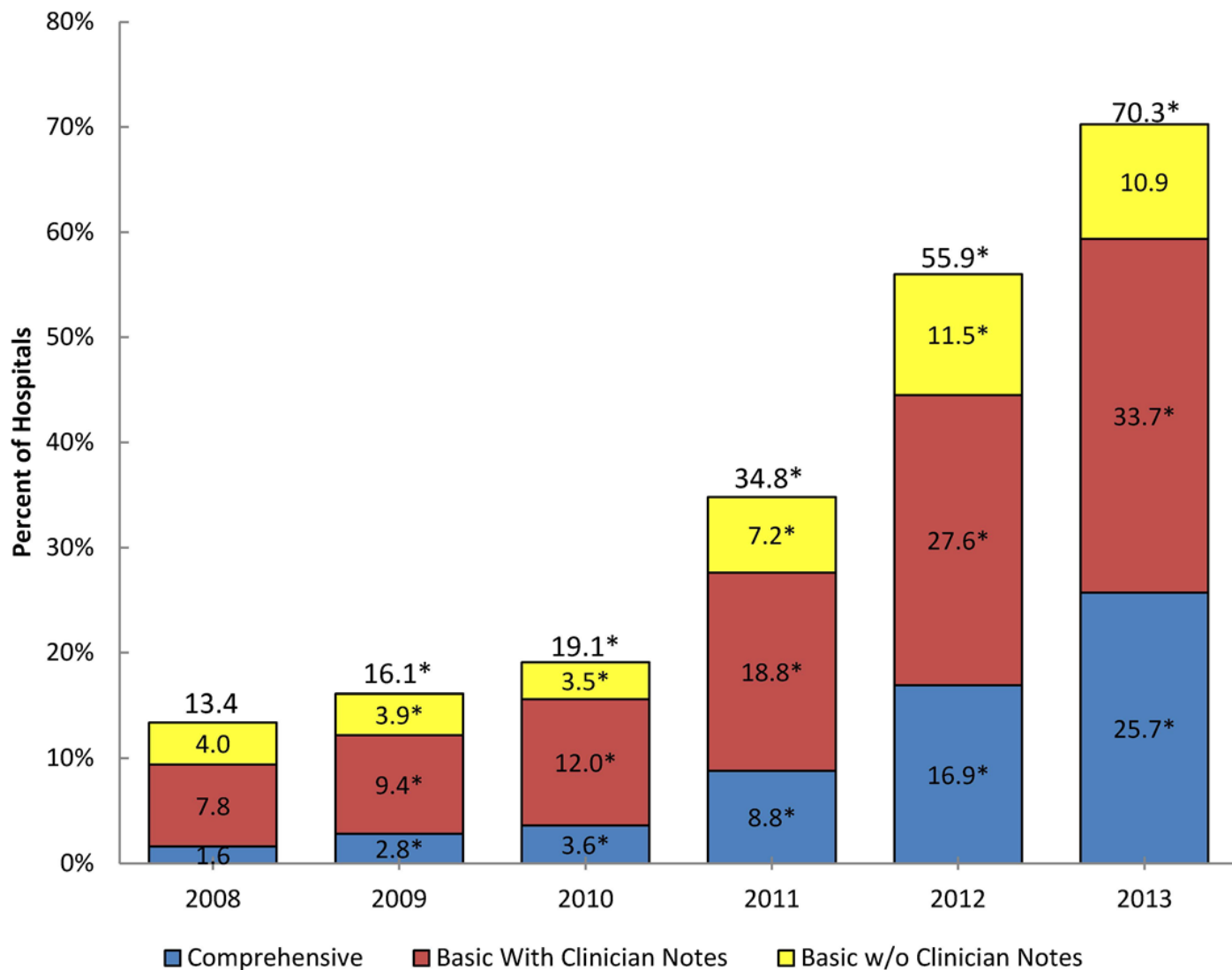
Percent of Physicians e-Prescribing through an Electronic Health Record: 2008-2013

Putting the I in HealthIT
www.HealthIT.gov



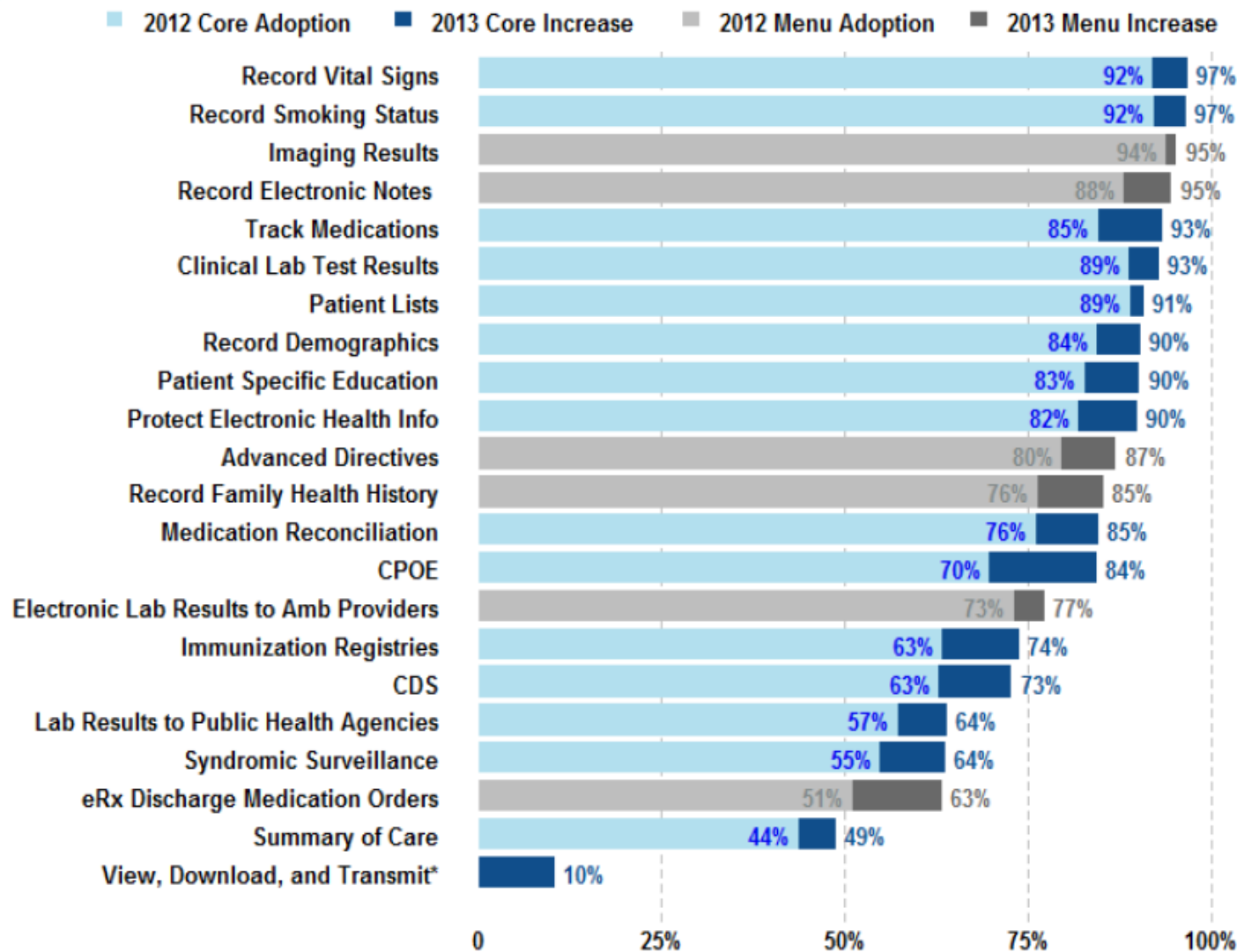
Click [here](#) for animated version

Trends in EHR adoption show increasing use of advanced functionality (survey data)



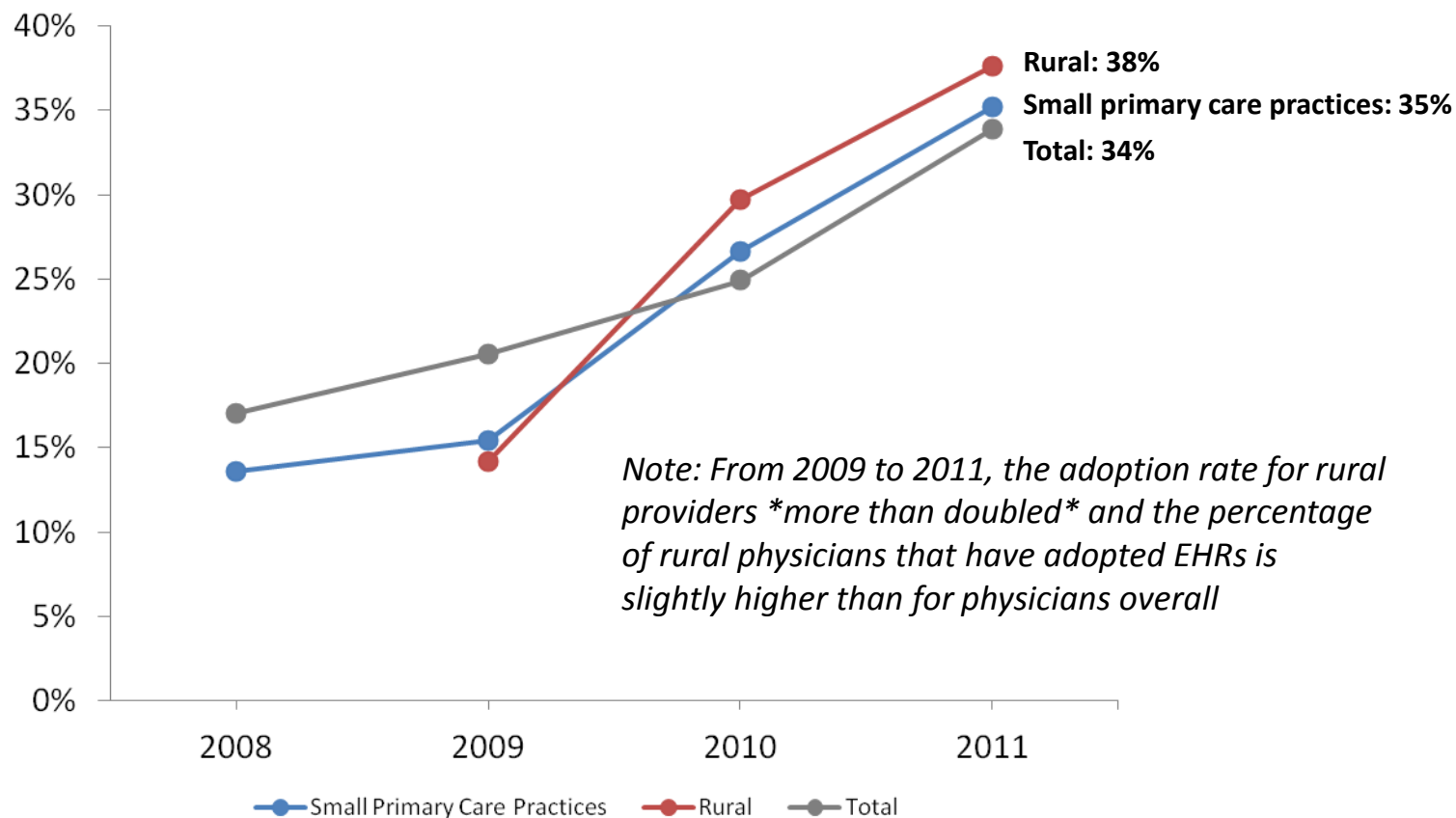
Hospital adoption of computerized capabilities to meet meaningful use stage 2 objectives, 2012-2013 (survey)

Most stage 2 functionalities had over 50 percent adoption rates



How Are We Doing in Rural Areas?

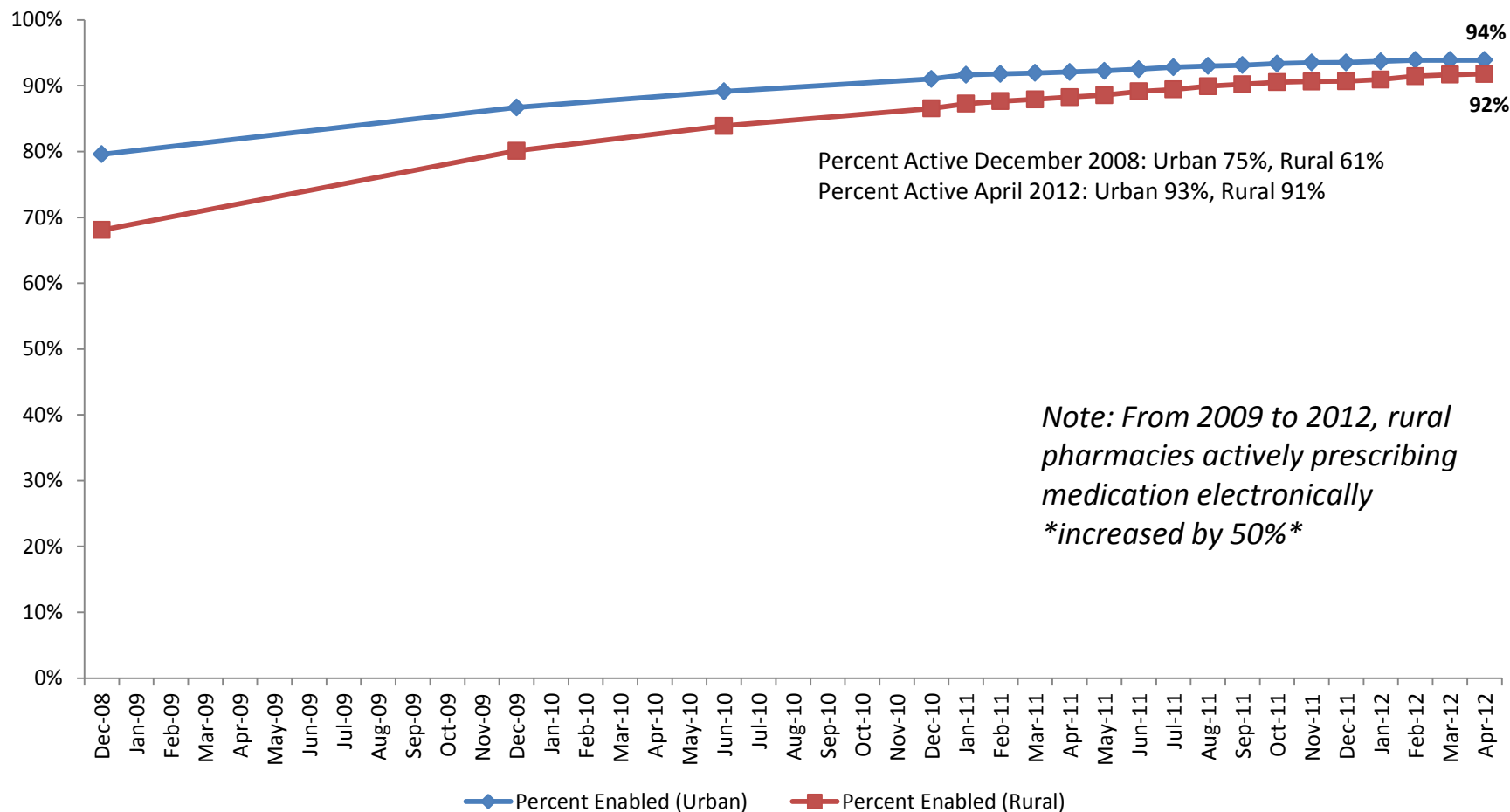
Basic EHR adoption among office-based physicians in rural areas and small primary care practices



Rural refers to physicians in a county outside of a Metropolitan Statistical Area. Small primary care practices refer to primary care physicians in practices with 10 or fewer physicians. Data source: National Ambulatory Medical Care Survey (NAMCS) Electronic Health Record Supplement mail surveys, 2008-2011.

How Are We Doing in Rural Areas?

Percent of Pharmacies in Urban and Rural Counties Enabled on the Surescripts Network

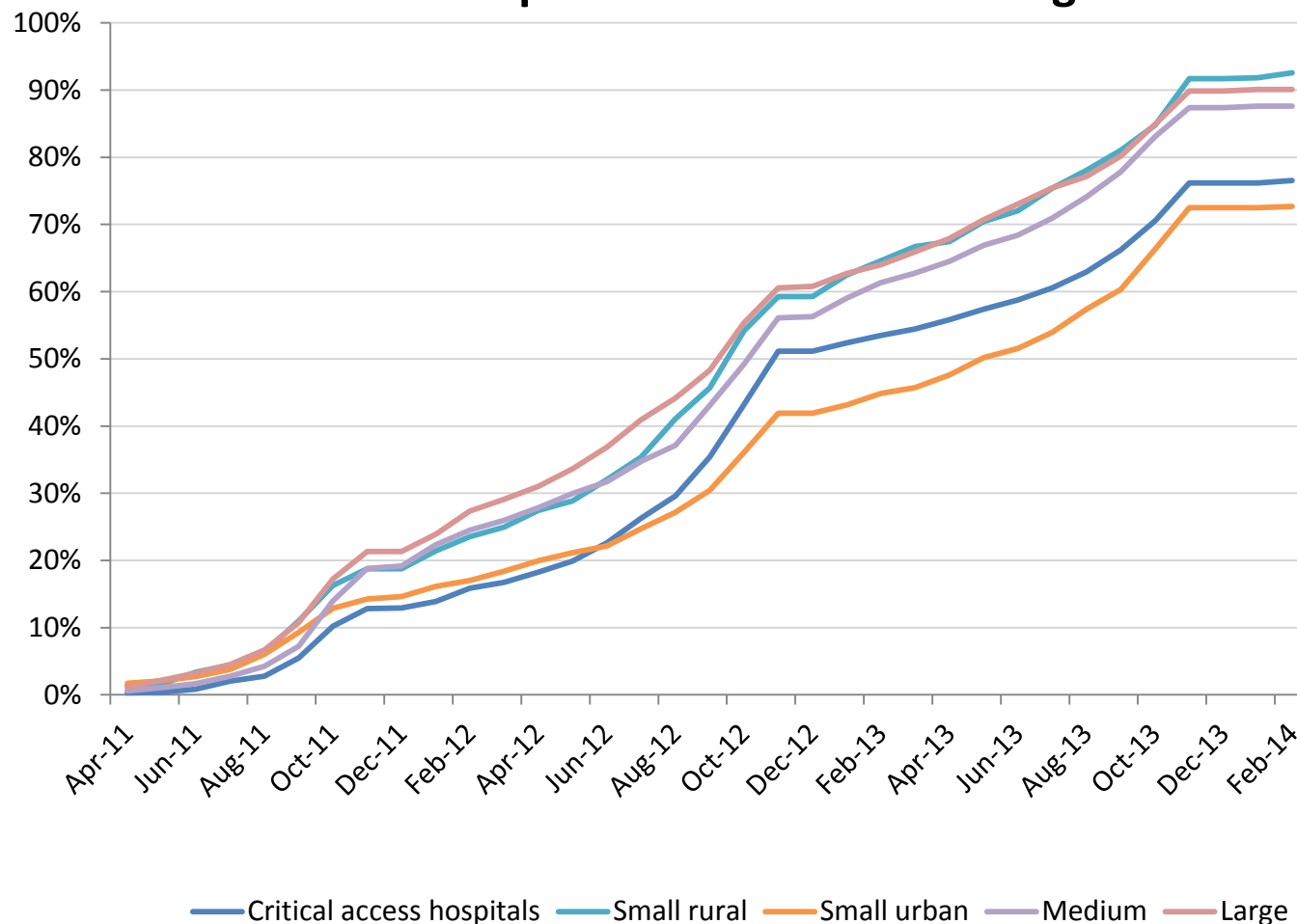


Medicare and Medicaid Electronic Health Record (EHR) Incentive Programs

Percent of Hospitals Attested to the EHR Incentive Program

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Percent of Hospitals Attested to MU Stage 1



SRHs lead in Meaningful Use attestations, but CAHs and Small urban hospitals lag behind.

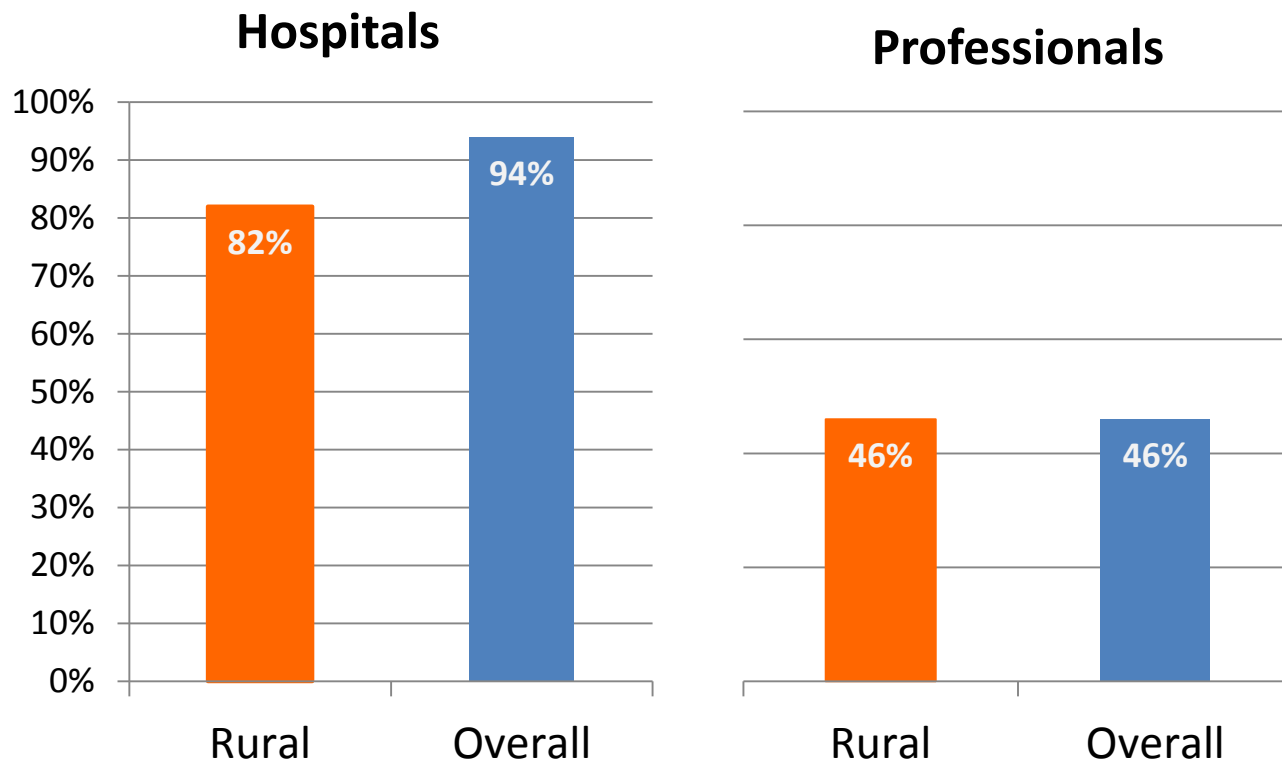
Figure identifies hospitals (n=4,918) based on CMS Division of National Systems Certified Hospital list and CMS EHR Incentive Program payment status.

04/11/2013

Payment Rates of Rural and Overall for Hospitals and Professionals

November 2013

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Rural professionals are participating in the EHR Incentive Programs at roughly the same rate as the national trend.

However, rural hospitals are lagging behind the overall trend.


Dashboard.HealthIT.gov

Accelerate Meaningful Use Among CAHs and Small Rural Hospitals



In 2012, we issued a [nationwide challenge](#) calling for “all hands on deck” to see 1,000 (60 %) small rural and CAHs to achieve Meaningful Use by 2014

Accelerate Meaningful Use: Challenges for Small Rural & CAHs

For this critical resource, the path is not easy

Accelerate Meaningful Use Among CAHs and Small Rural Hospitals

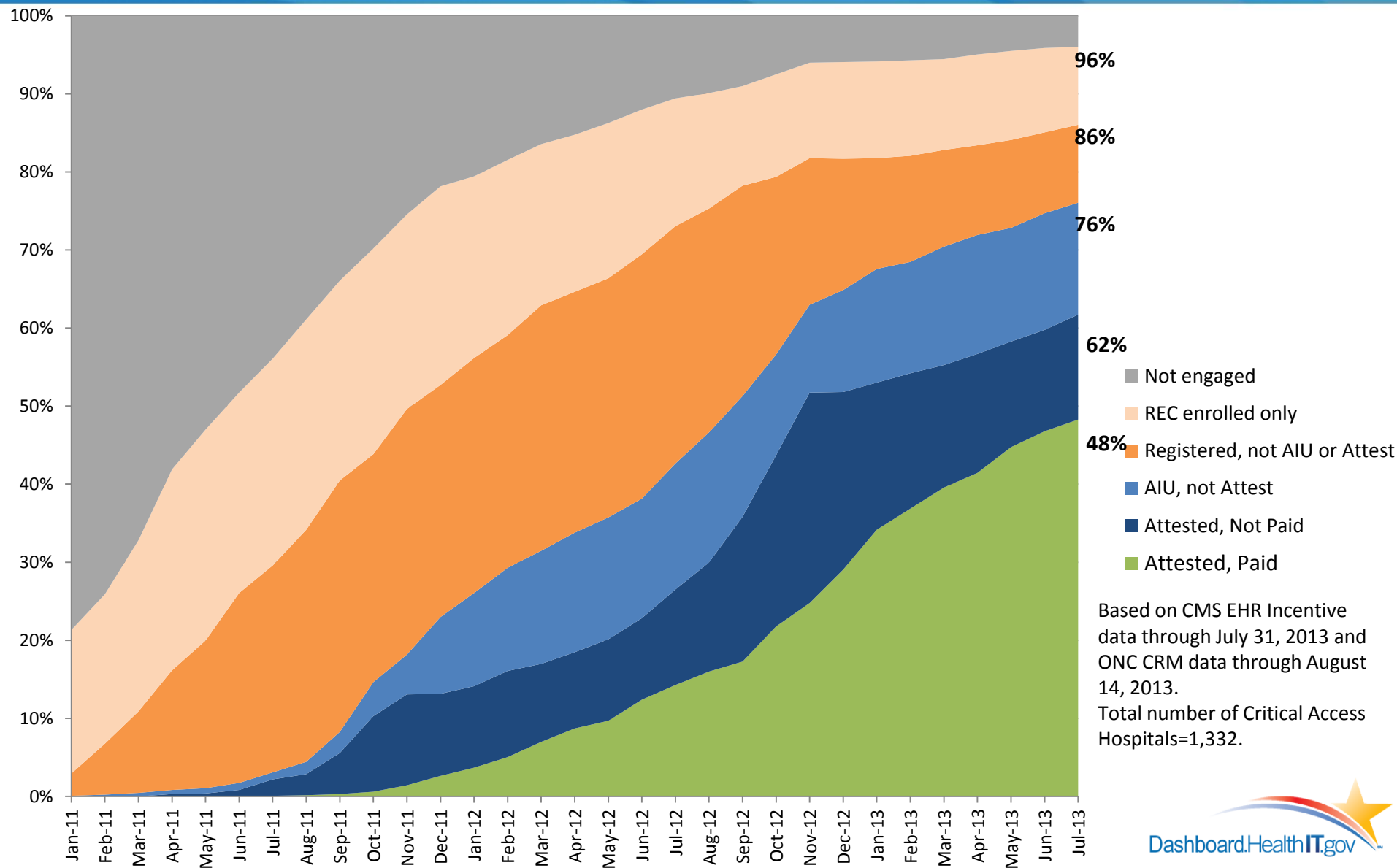
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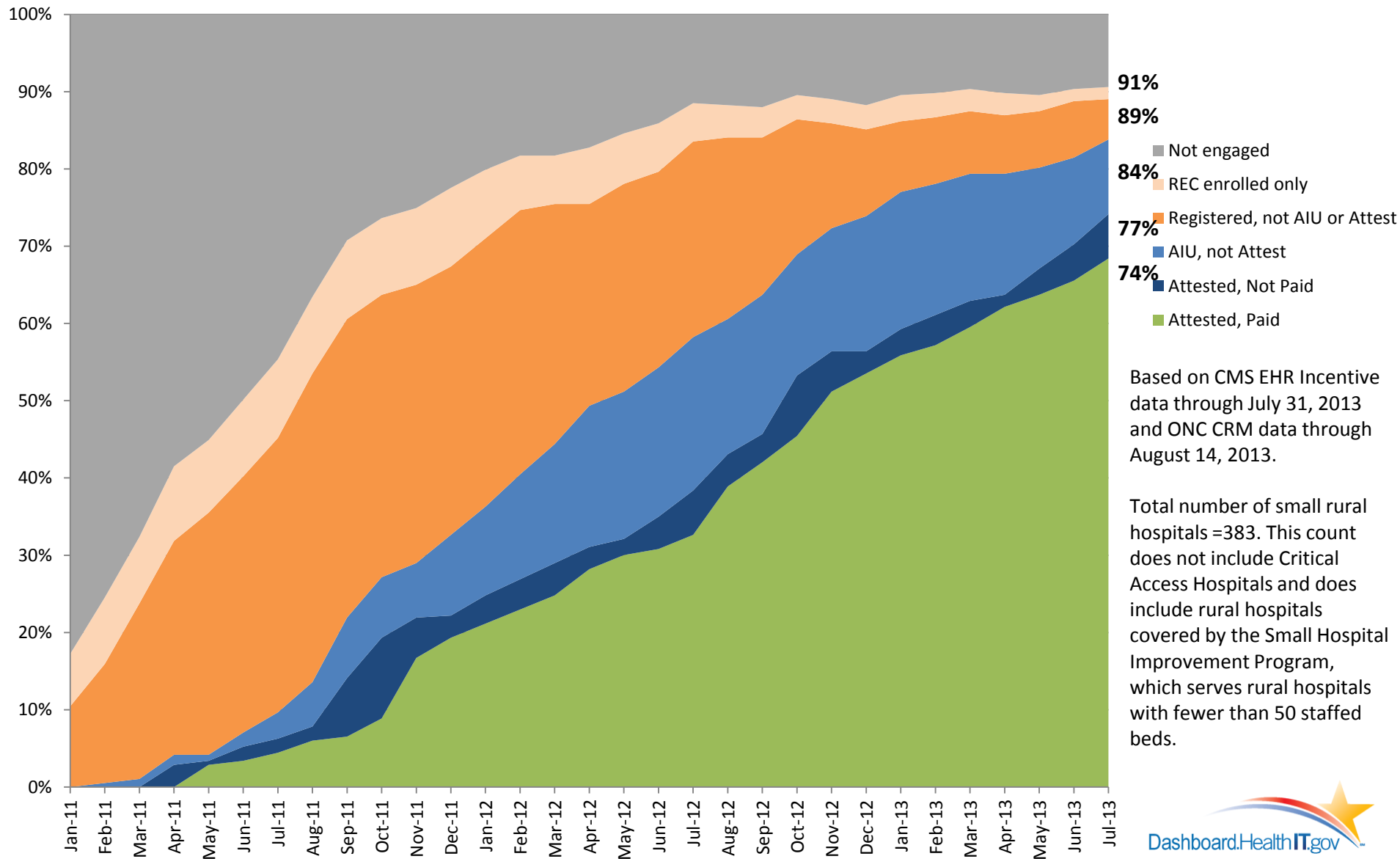
CAHs and other small, rural hospitals had
achieved Meaningful Use

- Over 1,100 (65%) as of July 31, 2013
- Over 1,400 (82%) as of November 30, 2013

Progress Over Time Among Critical Access Hospitals

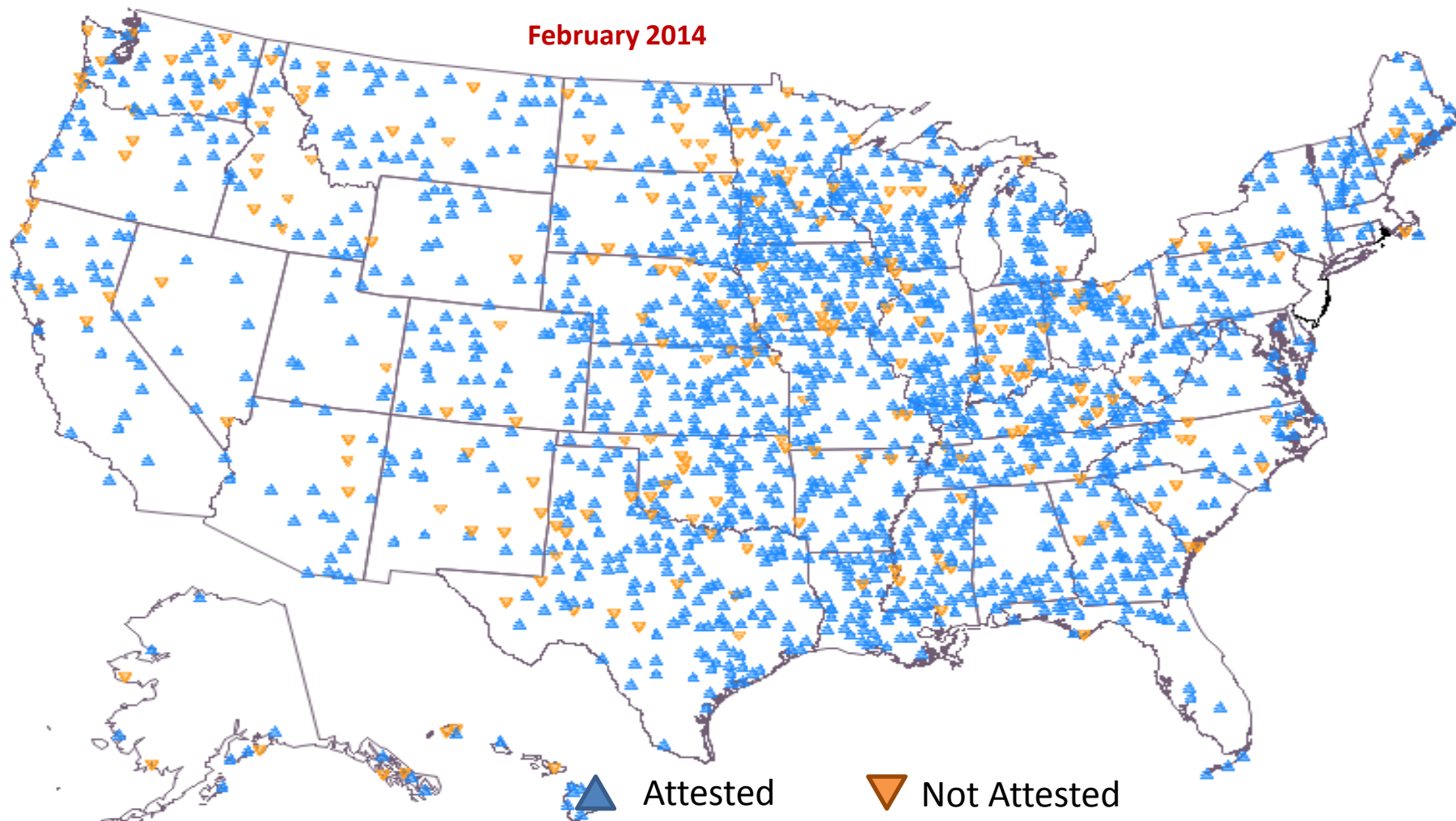


Progress Over Time Among Small Rural Hospitals (non Critical Access Hospitals)



87 Percent of CAHs/SRHs Attested to MU Stage 1

February 2014



Map identifies SRHs and CAHs (n=1,772) from the American Hospital Association and determines attestation status based on CMS EHR Incentive Program.

Critical Access and Rural Hospital Champion Award

| 2012 | 2012 | 2013 | 2013 |
|--|--|---|--|
| Barry Little Bill Sonterre Brock Slabach Chuck Christian Harry Wolin Jac Davies Joe Wivoda Kay Gooding Kevin Driesen | Louis Wenzlow Lynette Dickson Melissa Hungerford Patricia Alafaireet Patricia Dombrowski Paul Kleeberg Phil Deering Randy McCleese | Roger Holloway Sally Buck Shanti Wilson Tammy Flick Terry Alexander Terry Hill Val Schott Kathy Whitmire | Bill Menner David Willis Ed Gamache Jessica Zufolo Kendra Siler-Marsiglio Mark Renfro Marty Fattig Norma Morganti |

- White House Rural Council
- Streamline programs serving rural America
 1. Funding , Broadband & Workforce
 2. Serving Rural veterans



Expand Funding for Rural Health IT

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ONC and USDA Rural Development launched an initiative to expand funding for CAHs and rural hospitals.

FY 2013 Pilots: Over \$38 Million in funding to CAHs and rural hospitals across 4 states.

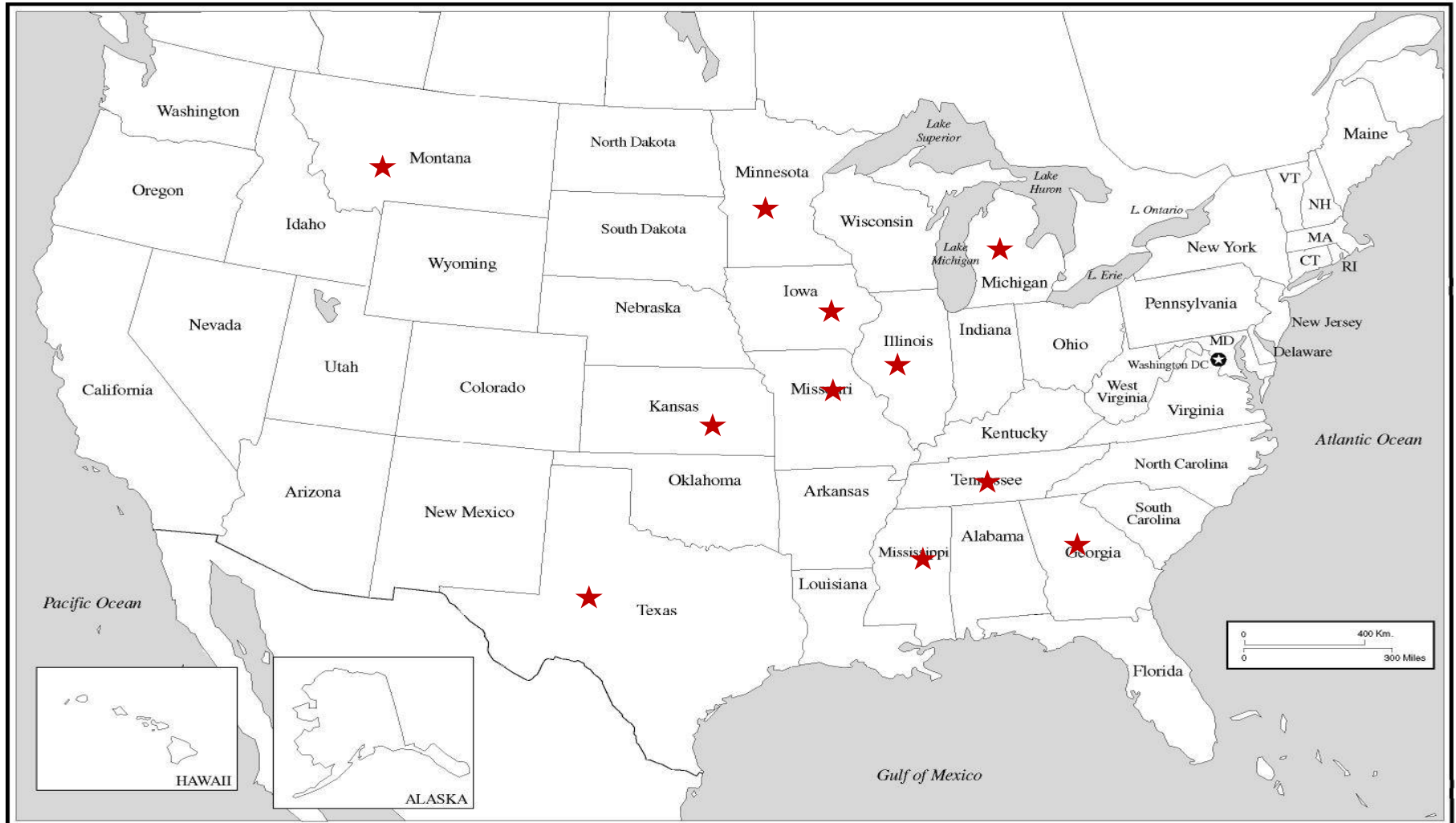
FY 2014: ONC and Rural Development are taking this initiative to scale in additional states.



Office of the National Coordinator for
Health IT

Current Project Locations

The United States



ONC/VA Leveraging Health IT to Improve Care Coordination and Quality for Rural Veterans

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The Veteran Initiated Electronic Care Coordination

ONC and VA's Office of Rural Health launched an initiative to leverage Blue Button technology and health information exchange to improve care coordination and quality for rural veterans and highly rural veterans that wish to seek care both within the VHA system as well as at their local rural clinic or hospital.

See our White House blog [posting](#)



Defining
EXCELLENCE
in the 21st Century

Office of the National Coordinator for
Health IT

Current Project Locations

The United States



Tools and Resources for Critical Access and Rural Hospitals

www.HealthIT.gov/RuralHealth




HealthIT.gov > For Providers & Professionals > Help Center > Rural Health Resources

Rural Health Resources

Resources for Critical Access Hospitals and Small Rural Hospitals

Learn more about the benefits of health IT and take the first step toward implementation and attaining meaningful use.

[How to Implement EHRs for CAHs and Rural Hospitals >](#)



HealthIT.gov

Newsroom | Help Center | Multimedia

Providers & Professionals | Patients & Families | Policy Researchers & Implementers

Benefits of EHRs | How to Implement EHRs | Privacy & Security | EHR Incentives & Certification | Health Information Exchange (HIE)

Success Stories & Case Studies

HealthIT.gov > For Providers & Professionals > Help Center > Rural Health Resources > Rural Implementation Steps

Rural Implementation Steps

- 1 Assess your Organization Readiness**
The first step in EHR implementation is to conduct an assessment of your current organization and its goals, needs, and financial and technical readiness. With an accurate view of your level of preparedness, your organization can design an implementation plan that meets the specific needs of your organization.
[Go to Step 1 >](#)
- 2 Plan Your Approach**
Planning draws on the information gathered during the assessment phase, to outline the organization's EHR implementation plan.
[Go to Step 2 >](#)
- 3 Select or Upgrade to a Certified EHR**
There are a number of steps involved in choosing the right EHR system for your organization. Eligible health care professionals and eligible hospitals must use certified EHR technology in order to achieve meaningful use and qualify for incentive payments. Looking to make your current EHRs meaningful use compliant? Start here.
[Go to Step 3 >](#)
- 4 Conduct Training & Implement an EHR System**
EHR implementation involves the installation of the EHR system and associated activities, such as training, mock "go-live," and pilot testing.
[Go to Step 4 >](#)
- 5 Achieve Meaningful Use**
The final phase of EHR implementation includes successfully attesting to demonstrating meaningful use of EHRs, and reassessing what you have learned from training and everyday use of the system.
[Go to Step 5 >](#)
- 6 Continue Quality Improvement**
Emphasizes continuous evaluation of your organization's goals and needs post-EHR implementation to continue improving workflows that achieve the individual organization's goals while leveraging the functionality of electronic health records (EHRs).
[Go to Step 6 >](#)

Get involved

Contact:

Leila Samy, Rural Health IT Coordinator

leila.samy@hhs.gov

Share:

Tools, resources and best practices

www.healthit.gov/ruralhealth

For more information:

- [Overview](#) of collaborative rural health IT efforts 2010-2013
- Latest blog postings about 1) [HHS/USDA](#) collaborative rural health IT funding workshops and 2) [HHS/VA](#) projects to improve care coordination and quality for rural veterans.

The Office of the National Coordinator for
Health Information Technology



Thank you!

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Beth Schindele

Director, Quality Insights of Delaware - REC

- REC focus on assisting smaller practices who are working with limited resources and who would most likely be late adopters of EHR technology.
- Challenges facing eligible professionals.
- Solutions & tools used to assist others in attesting to Meaningful Use.





Debbie Geiger RN BSN

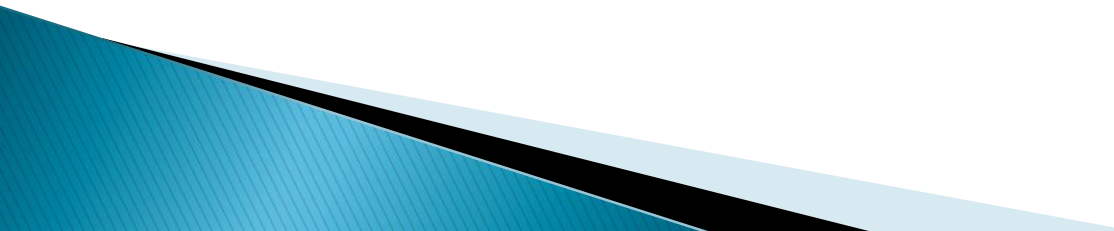
Challenges as a CAH

- Vendors and certification
- Physician perspective
- Physician champion
- Documentation

Stage 2 implementation

- How to succeed
- Administration Support
- Team Work and Planning

PCMH

- Software capabilities
 - 2 types of software
 - Duplicate documentation
 - Inability to pull reports
- 

Panel Discussion

Thoughts on Meaningful Use
Stage 2 & ONC/CMS's recent
proposed rule ([view here](#))



Panel Discussion

How to succeed in Stage 3 and beyond?



Q&A

To ask a question or make a comment,
submit via the chat feature.

*Slides are available for download at
www.ehidc.org under 'New Resources'*





Running Toward Risk: The Challenge for Healthcare Systems in the Post-ACA Era

Join us on **Wednesday, June 25th** for a complimentary webinar to learn challenges facing healthcare providers who are entering an era in which stand-alone strategies will prove insufficient in managing the new demands of public and private payers. The emergence of risk-based models of payment has prompted providers across the care continuum to re-think the type of risk they are willing to bear, and the types of collaboration they need to succeed under such models.

[Register Here >>](#)

Key differences between these risk models will be identified, and the critical decision variables that health systems must consider in determining which risk model offers the best chance for success. The session will address:

- The policy and market imperatives that are driving health systems to pursue risk-based contracts.
- The tactical use of episodic risk models as part of a comprehensive population-based risk strategy.
- The importance of post-acute care (PAC) providers in either risk model, as well as case studies of hospital-PAC collaborations that target at-risk populations for improved care transitions and care coordination.
- The critical metrics of success for such partnerships to measure performance and drive continued improvement.

Speaker:

Erik Johnson, Senior Vice President, Avalere Health

Sponsored by:

Avalere Health

| | |
|-----------|-----------------------------|
| Date: | Wed, Jun 25, 2014 1:00PM ET |
| End Date: | Wed, Jun 25, 2014 2:00PM ET |



eHEALTH INITIATIVE
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Next Policy Workgroup Webinar

Tuesday, July 15th

2:00 - 3:00 pm (ET)

If you want to hear more about a particular topic,
please email your suggestions to Nadeen at
nadeen.siddiqui@ehidc.org

About eHealth Initiative

- Since 2001, eHealth Initiative is the only national, non-partisan group that represents all the stakeholders in healthcare. Represent over 15 different stakeholder groups and 39 states across the nation.
- Mission to promote use of information and technology in healthcare to improve quality, safety and efficiency.
- Last year, over 4500 individuals attended our events and 500+ individuals participated in our national councils and workgroups
- eHealth Initiative focuses its research, education and advocacy efforts in four areas:
 - Data and Analytics
 - IT Infrastructure to Support Accountable Care
 - Technology for Patients with Chronic Disease
 - Data Exchange & Interoperability





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