Certified Dermatology EMRs to Debut in 2010

BY MARY ELLEN SCHNEIDER

y next fall, dermatologists will have a chance to purchase electronic medical record systems that have been certified specifically for use in dermatology practices.

The Certification Commission for Healthcare Information Technology (CCHIT) will give vendors the option to certify their office-based EMR products as having additional functions specific to dermatology. The CCHIT already offers op-

tional add-on certification in cardiovascular medicine and child health.

Certification for dermatology will begin in July 2010, and certified products should be out in the marketplace by fall 2010, according to



Dr. Mark Leavitt, chair of the CCHIT.

The dermatology certification option will help to address one of the biggest reasons that dermatologists have failed to widely adopt EMRs—their fear that they will get the wrong system, said Dr. Mark D. Kaufmann of the department of dermatology at Mount Sinai School of Medicine in New York and a member of the American Academy of Dermatology's Practice Management Task Force.

The AAD urged the CCHIT to establish this certification pathway with the goal of spurring greater adoption of EMRs among dermatologists, said Dr. Girish Munavalli of the department of dermatology at Johns Hopkins University in Baltimore and a member of the AAD's Medical Informatics Committee.

Adoption levels are estimated to be between 7.5% and 11% in dermatology, according to the AAD, putting dermatologists on the lower end of adoption rates among medical specialties.

With dermatology-specific functions now being certified by the CCHIT, dermatologists can know there are EMR products in the marketplace that will be able to meet their documentation needs, Dr. Munavalli said. "There is also an added layer of protection for practicing dermatologists to help protect against fly-by-night vendors, because there is a level of cost and commitment required on the part of vendors who seek the CCHIT certification."

But dermatologists who plan to purchase a certified EMR product still need to do their due diligence, he said. The certification process is an important first step in assessing a system, but it won't give physicians a full picture of whether a system will address their workflow issues, he said.

Dr. Kaufmann advised physicians to test

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DR. MUNAVALLI

EMR systems in real-world situations and not to rely on Webinars and other product demos offered by vendors.

Although dermatologists will have to wait more than a year if they want to purchase an EMR

that has been specifically certified for office-based dermatology practice, that should not keep them from adopting an EMR sooner, Dr. Leavitt said.

The financial incentives for adopting EMRs that were spelled out in the American Recovery and Reinvestment Act will be available only to physicians who demonstrate "meaningful" use of these systems over the next few years. That means that dermatologists will have to spend about a year implementing their EMR system before the first year of the incentives begins in 2011 if they want to receive the maximum bonus payments, Dr. Leavitt said.

Under the law, Medicare providers who are "meaningful" users of EMRs will be eligible to earn about \$44,000 over a period of 5 years. But the payments are front loaded and phase out over time. In addition, the law includes penalties for lack of adoption beginning in 2015.

Dermatologists who want to begin adoption now can look for vendors who have products that have been certified for general care and offer dermatology features. Another option is to purchase a system but make a portion of the payment contingent on updating the system once the dermatology functions have been certified.

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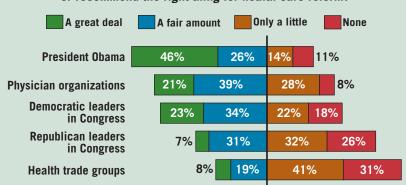
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Notes: Survey conducted Feb. 3-12, 2009, among a nationally representative random sample of 1,204 adults. "Don't know/Refused" responses not shown.

Source: Kaiser Family Foundation