Advice Offered on Preparing for EHR Incentives

BY MARY ELLEN SCHNEIDER

In less than 6 months, doctors can begin to qualify for tens of thousands of dollars in incentive payments from the federal government for using electronic health record technology. Many physicians are asking: How do I get ready?

The first step, experts agree, is to prepare your practice. Implementing an electronic health record (EHR) effectively is only partly about the technology, said Mary Griskewicz, senior director for ambulatory information systems at Healthcare Information and Management Systems Society (HIMSS), a non-profit organization.

Most of the work is about reengineering the practice, assessing and changing processes and workflows. "This is not a small task, in particular for small practices," she said.

And before practices jump into an implementation, Dr. Steven Waldren, director of the Center for Health IT at the American Academy of Family Physicians, suggests that they examine their motivation for using an EHR. He cautioned physicians not to do it just to take advantage of the new federal incentives.

Physicians who qualify as "meaningful

users" of EHR technology through the Medicare program can receive up to \$44,000 over 5 years, and those who qualify through the Medicaid program can earn about \$64,000. But that may not cover the

costs of a new system, Dr. Waldren said, so physicians should have other reasons for making the switch.

"They shouldn't be doing this for the \$44,000," Dr. Waldren said. "They should be

doing it because they believe it's the right thing to do for them, their practice, and their patients. Without that, you don't have the commitment to make it actually happen."

Once a practice has decided to buy an EHR and laid the ground work with the staff, numerous challenges remain. For example, under the HITECH Act, which established the EHR incentive program, physicians can qualify only if they are meaningful users of certified EHR technology. While the government has released regulations defining meaningful use requirements, as well as requirements for certification, there are cur-

rently no certified products on the market. The first products are expected to gain certification sometime this fall, according to the Office of the National Coordinator for Health Information Tech-

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MS. GRISKEWICZ

nology, which is shepherding this effort.

But the current lack of certified products shouldn't keep physicians from shopping for a system now, experts said. One way to deal with it

is to build a guarantee of certification into the contract with the vendor. Physicians just need to be sure to get any assurances in writing, Dr. Waldren said. And they need to be clear on the terms of the guarantee. For example, will the guarantee allow you to get your money back if the vendor fails to become certified or does it allow you to withhold payments until the vendor becomes certified?

Physicians also should look to include service level agreements in their contacts with vendors, Dr. Waldren said. This ensures that the practice will get specific levels of support within certain time frames. If the company fails to deliver on the promised level of service, the practice might be able to make reduced payments or hold payments until that service level is met. These agreements could become important, Dr. Waldren said, since vendors are likely to be very busy as more practices adopt EHRs over the next few years.

When choosing an EHR product, consider whether the software will fit in with the workflow of the practice and whether it is usable by everyone in the office.

One way to answer some of those questions is to talk to clinicians at other practices who have already implemented the product. It's best to try to find practices that are similar to your own, Ms. Griskewicz said. And ask about integration issues such as how the system will work with existing billing software or how it can help the practice to handle future regulatory changes such as the switch from ICD-9 to ICD-10, she said.

As physicians consider their options, the key is to get educated, Ms. Griskewicz said. She advises seeking out trusted sources such as the Centers for Medicare and Medicaid Services and their medical professional societies, many of which are offering free Webinars, and other online information.

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