



## POLICY & PRACTICE

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### EHR Incentive Participation Lags

Cardiologists are interested in participating in the federal government's incentive programs for electronic health records – but are not signing up in droves, according to a July membership survey conducted by the American College of Cardiology. About half the 152 respondents to the randomized survey said they were currently participating or planned to participate in the EHR Incentive Program and 34% said they had registered. So far, though, only 18% had met eligibility criteria to receive the payments and 12% of that group had actually gotten a payment. Most of the respondents said they wanted the incentive program to be simpler. The survey shows that, "We still have a long way to go to helping members qualify for 'meaningful use' and to achieve more general participation in the EHR incentive program," Dr. Jack Lewin, the organization's CEO said in a statement. Full survey results will be published in the September/October issue of Cardiology Magazine.

### Equal-Visitation Right Gets Boost

The Department of Health and Human Services has unveiled new guidance for protecting hospital patients' right to choose their own visitors, including same-sex domestic partners. The rule estab-

lishing that right was finalized last November, and the guidance – which applies to all patients at hospitals that take Medicare or Medicaid patients – is intended to help hospitals understand and follow the policy. Hospitals now must explain to all patients their right to choose who may visit them during a hospital stay, as well as their right to withdraw such consent to visitation at any time. The guidance also supports enforcement of the right of patients to designate the person of their choice to make medical decisions on their behalf should they become incapacitated. "It is unacceptable that, in the past, some same-sex partners were denied the right to visit their loved ones in times of need," said HHS Secretary Kathleen Sebelius in a statement.

### Heart Failure Deaths Drop 50%

The death rate for hospital patients admitted for heart failure fell by 50% between 2000 and 2007, the Agency for Healthcare Research and Quality announced. The rate dropped from 55 deaths per 1,000 admissions to 28 deaths per 1,000, according to data from the 2010 National Healthcare Disparities Report. The drop in deaths was greatest among people aged 85 years or older, declining from 87 per 1,000 to 48 per 1,000, but there was a decline in all age groups.

For people age 65 or above, the rate dropped from 64 to 34 per 1,000. The death rate for the 45- to 64-year-old group declined from 28 to 15 per 1,000.

### New Blood Pressure Genes

Twenty-nine genetic variations across 28 regions of the human genome that influence blood pressure recently were identified by an international research consortium, according to the National Heart, Lung, and Blood Institute. In a paper published in Nature Genetics, the researchers found that the individual genetic variations increased the risk of hypertension by a very small amount, but that the risk was greatly increased when there were multiple variants. In all, 16 of the 29 variations were previously unrecognized and 6 were found in genes already suspected of having some effect on BP. The final 10 offered new clues on the regulation of BP. The 200,000 primary participants were of European extraction; that group also included participants in the Framingham Heart Study. The consortium conducted a follow-up analysis on 70,000 people of East Asian, South Asian, and African ancestry and found similar risks with the variants.

### Companies Hit as Antigeneric

Brand-name drug manufacturers have been actively discouraging generic drugs, the Federal Trade Commission said in a long-awaited report on the generic drug market. Brand-name makers often introduce their own generic versions of their products to discourage generic-focused companies from entering the market

when a patent runs out, the FTC said. The presence of an authorized generic tends to tamp down sales 40%-50% for a generic competitor, according to the report. "Some brand companies may be using the threat of launching an authorized generic as a powerful inducement for generic companies to delay bringing their drugs to market," FTC Chairman Jon Leibowitz said in a statement, adding that during such a delay, consumers must continue to pay for the brand-name drug. The report "proves what I have long suspected: that promotion of authorized generics can reduce the incentive for true generic companies to enter the market. That allows brand name companies to unfairly dominate the marketplace long after their patents have expired," Sen. Jay Rockefeller (D-W.Va.) said in a statement.

### Safety System Pilot Online

The FDA announced that it has launched a pilot of what it hopes eventually will be a major rapid-response electronic safety-surveillance system. The "Mini-Sentinel" is the pilot run but is no small effort, according to the agency. It includes 17 data partners and covers 99 million people, 2.4 billion medical encounters, and the dispensing of 2.9 billion prescriptions. The database should allow researchers to get answers to drug-safety questions within weeks, not months. Initial data on the Mini-Sentinel program was presented at the International Conference on Pharmacoepidemiology and Therapeutic Risk Management in mid-August.

—Alicia Ault

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