Definition of 'Meaningful Use' of EHRs Varies

BY JOYCE FRIEDEN

WASHINGTON — Just what exactly does "meaningful use" mean?

It sounds like a simple question, but a lot of money is riding on the answer. The Recovery Act, formally known as the American Recovery and Reinvestment Act, stipulates that for a physician to receive up to \$44,000 in financial incentives for purchasing an electronic health record (EHR), the record must be put to "meaningful use." Now the government has to come up with a definition of the term.

At a subcommittee meeting of the National Committee on Vital and Health Statistics, which was convened to discuss meaningful use, several speakers explained why having more physi-

cians adopt an EHR was so valuable.

"The financial meltdown ... has shown us how we as a nation need to totally transform the U.S. health care system,' said Helen Darling, president of the National Business Group on Health. "We have a fiscal crisis, not just a health crisis; we have to act urgently."

Dr. Elliott Fisher, professor of medicine at Dartmouth University, Hanover, N.H., started explaining the benefits of EHRs by noting that more health care is not always better care. "Gray area" dis-

cretionary decisions about when to refer to a specialist explain most of the regional differences in health care spending and are responsible for most of the health care overuse, he said.

The only way to reduce that overuse is to feed the information-gathered through EHRs-back to the physician "and start to have a conversation" about when certain tests or referrals are necessary, Dr. Fisher said.

Although everyone agreed that EHRs were valuable, speakers' definitions of "meaningful use" of them differed.

"Meaningful use EHRs are useful for reporting quality measures because they provide direct information and timely data. DR. RAPP

might vary by site of care as well as by type of care," said Dr. David Classen of the Computer Sciences Corp., whereas Dr. John Halamka of the Health Informa-

tion Technology Standards Panel, a government-funded group that helps ensure EHR interoperability, said his definition of meaningful use was "processes and workflows that facilitate improved quality and increased efficiency.'

Several panelists agreed that EHRs had to allow for three things in order to be used meaningfully: electronic prescribing, interoperability with other computers, and reporting on health care quality measures. EHRs are particularly useful for reporting quality measures

sponsibility cannot be accepted for clerical

or printer errors.

because they are a direct source of information and provide very timely data, said Dr. Michael Rapp of the Centers for Medicare and Medicaid Services.

Experts at the meeting also agreed in general that EHR systems need to be certified by a government-approved organization such as the Certification Commission for Healthcare Information Technology to meet the Recovery Act's requirements. But certification alone is not sufficient, because many parts of a certified EHR are not necessarily implemented, said Dr. Floyd Eisenberg, senior vice president for health information technology at the National Quality Forum.

The day after the subcommittee's 2-day meeting concluded, the Markle Foundation held a press conference to release a consensus document on the definition of meaningful use. The document was endorsed by a number of provider and advocacy groups, including the AARP, the American Academy of Family Physicians, the Joint Commission, and America's Health Insurance Plans.

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The consensus document provides a "simple" definition of patient-centered meaningful use: "The provider makes use of, and the patient has access to, clinically relevant electronic information about the patient to improve patient outcomes and health status, improve the delivery of care, and control the growth of costs."■

The consensus document is available at www.markle.org/downloadable_ assets/20090430_meaningful_use.pdf.

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