

The Office of the National Coordinator for
Health Information Technology



HITECH: Then, Now and the Future

Claudia Williams
Director, State HIE Program

Putting the **I** in **HealthIT**
www.HealthIT.gov



- **Implement** using nimble, evidence-based, action-oriented processes
- **Impact** health and health care
- **Input** through open, transparent processes
- **Innovate** by letting the market compete
- **Include** the least powerful and most underserved and vulnerable

I am empowered

Health IT

IMPLEMENT

IMPACT

INPUT

INNOVATE

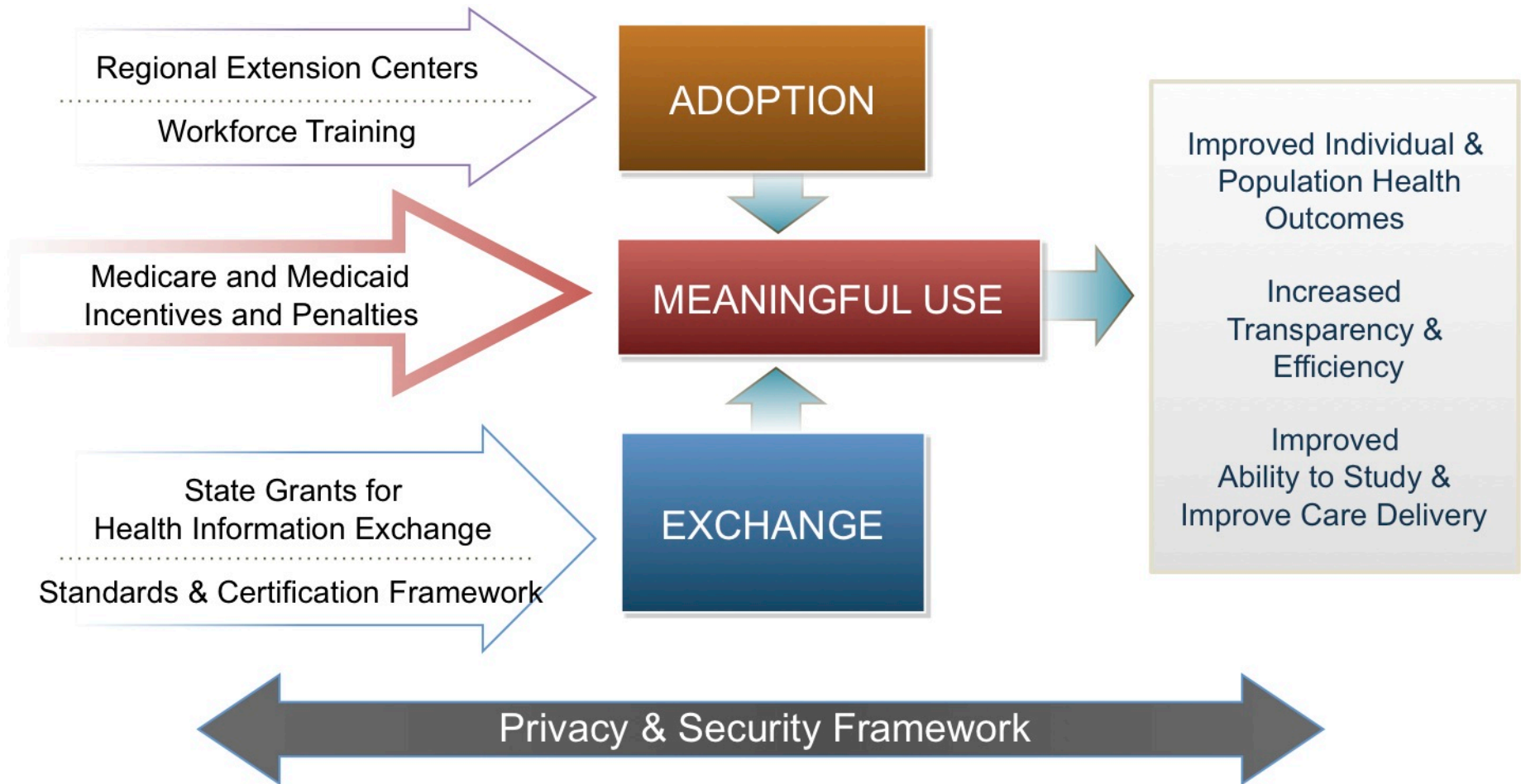
INCLUDE

I AM EMPOWERED

Putting the I in
Health **IT** 

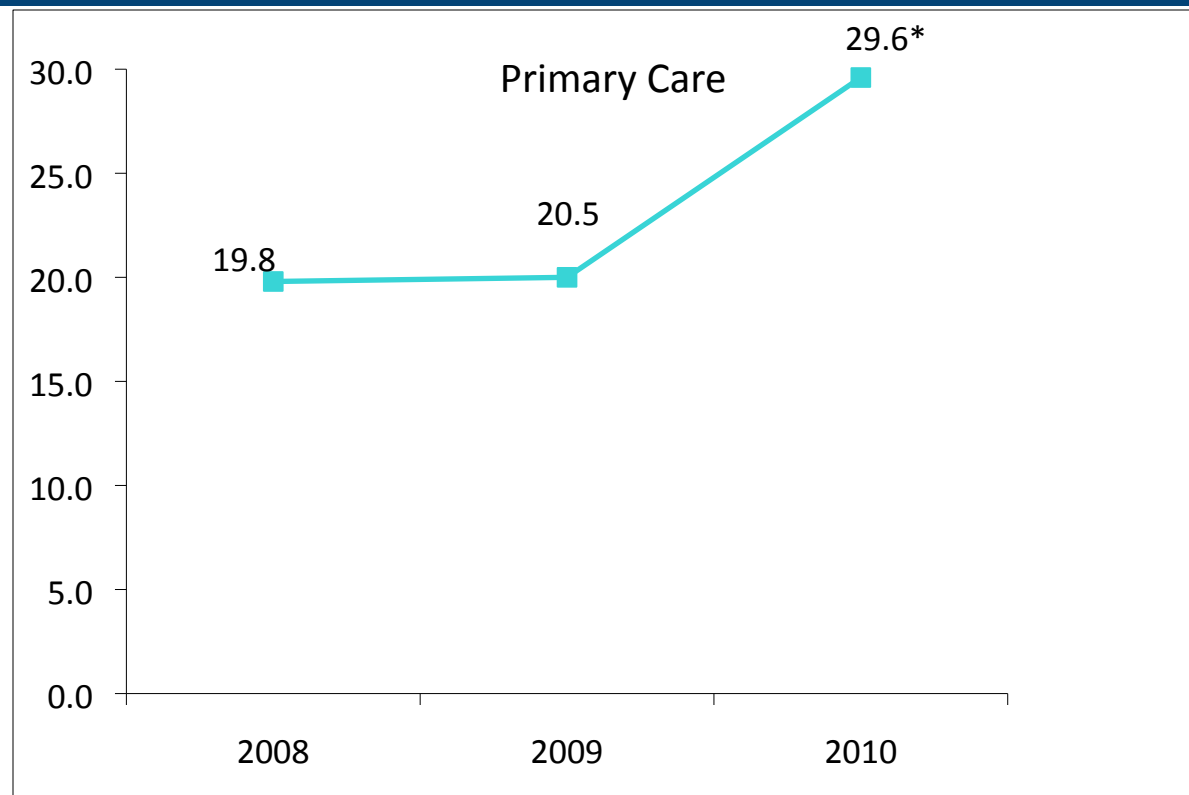
Robert Wallace
Cardiologist

HITECH Framework: Meaningful Use at its Core



- Final regulation published July 2010
- Summary Program Progress (as of May 11, 2011)
 - Total Medicare/Medicaid Payments: **\$190,327,316.95**
 - Total # Providers Registered for Medicare/Medicaid EHR Programs: **56,599**
 - Total Medicare Payments (number of providers/ amount): **320/\$75,856,912.84**
 - Total States Actively Participating in Medicaid EHR Program: **17** (14 made Medicaid EHR payments)
 - Total Medicaid Payments (number of providers/ amount): **541/\$31,175,626.05**

Percent of Office-Based Primary Care Practices
With at Least a “Basic” Electronic Health Record (2008-2010)



*The difference in estimates is significant between years 2010 & 2009; 2010 & 2008. at $p \leq 0.05$

Source: National Center for Health Statistics, National Ambulatory Medical Care Survey, 2008-2010

- **889 Certified EHR Products**

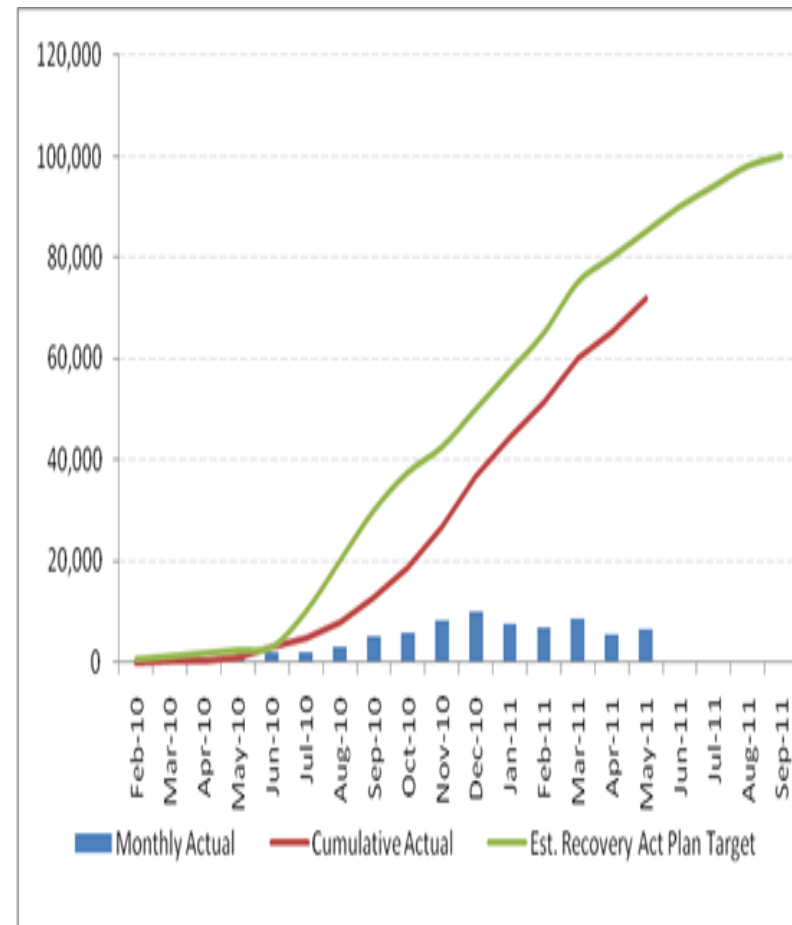
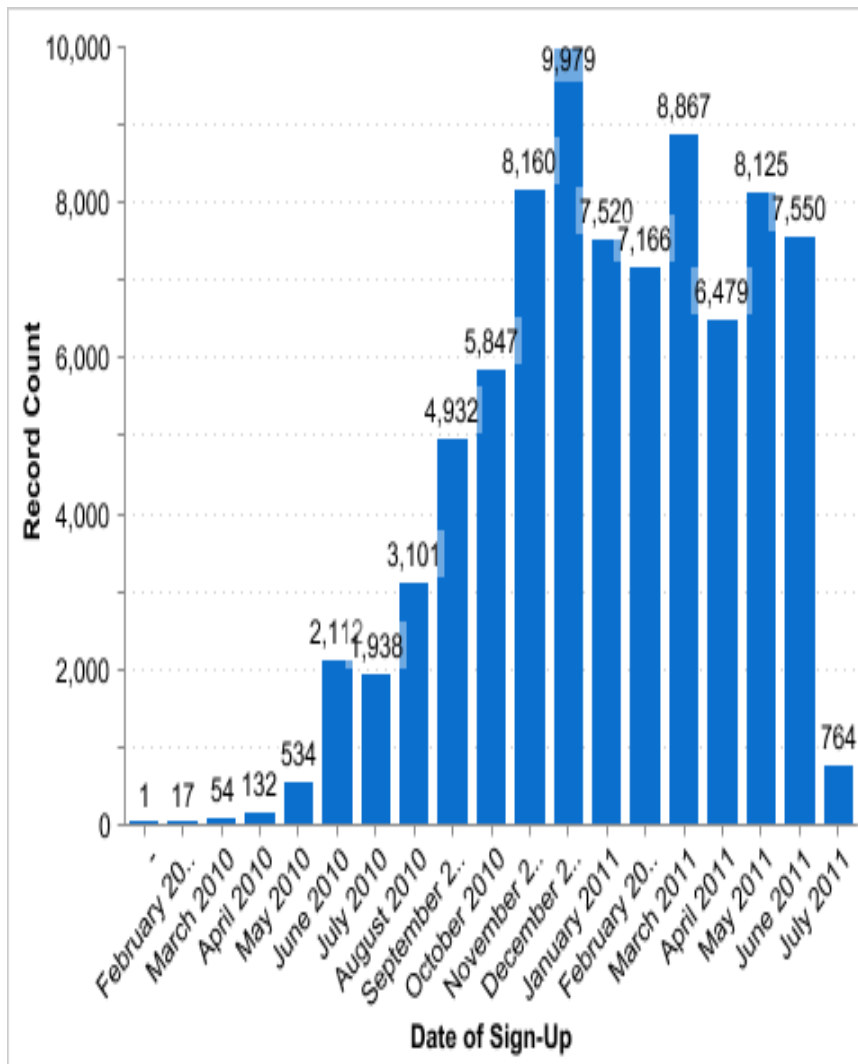
	Ambulatory	Inpatient	Total
Complete EHR	386	68	454
Modular EHR	204	231	435
Total	590	299	889

- **481 EHR Vendors**

- 61% are small companies (<51 employees)
- 10% are large companies (>200 employees)

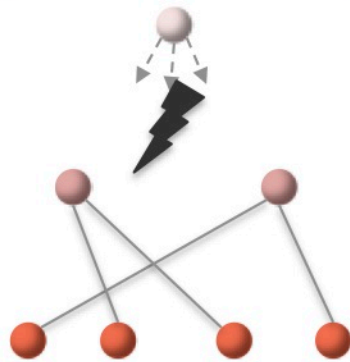
* Data is current as of July 8, 2011

Over 83,000 Providers Recruited By RECs and Counting



All 56 plans have entered the implementation phase

Elevator

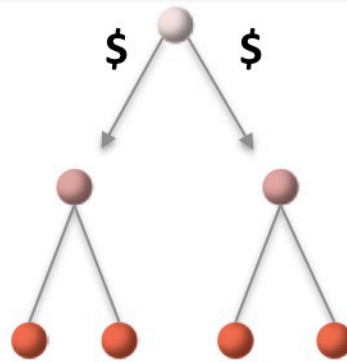


Rapid facilitation of directed exchange capabilities to support Stage 1 meaningful use

Preconditions:

- ✓ Little to no exchange activity
- ✓ Many providers and data trading partners that have limited HIT capabilities
- ✓ If HIE activity exists, no cross entity exchange

Capacity-builder

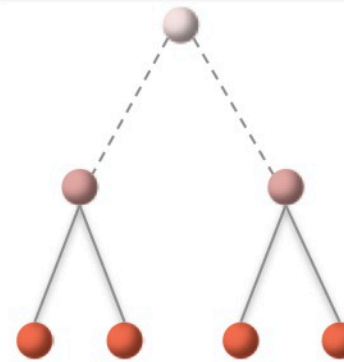


Bolstering of sub-state exchanges through financial and technical support, tied to performance goals

Preconditions:

- ✓ Sub-state nodes exist, but capacity needs to be built to meet Stage 1 MU
- ✓ Nodes are not connected
- ✓ No existing statewide exchange entity

Orchestrator

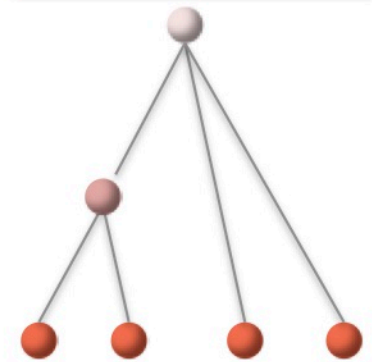


Thin-layer state-level network to connect existing sub-state exchanges

Preconditions:

- ✓ Operational sub-state nodes
- ✓ Nodes are not connected
- ✓ No existing statewide exchange entity
- ✓ Diverse local HIE approaches

Public Utility

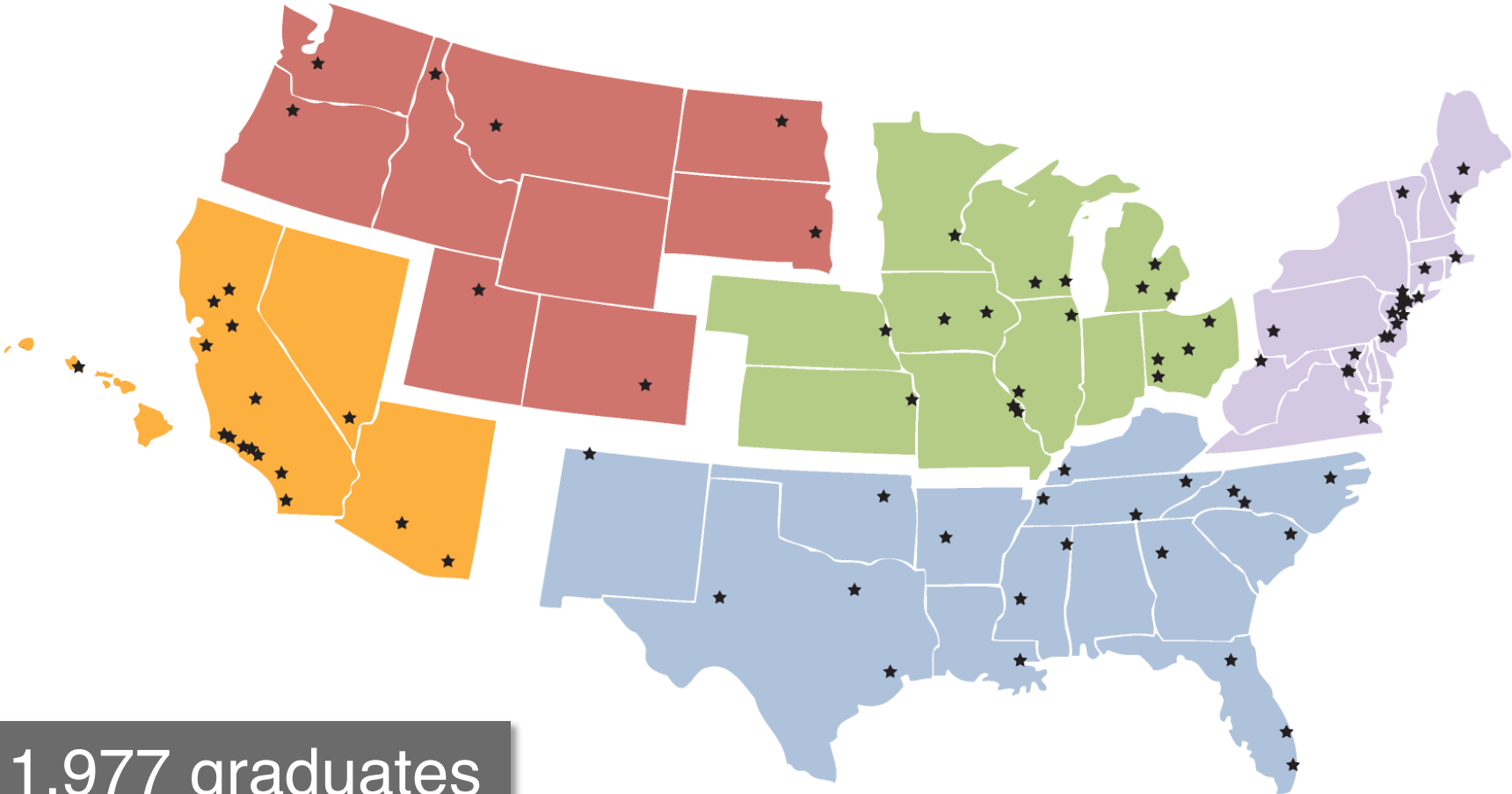


Statewide HIE activities providing a wide spectrum of HIE services directly to end-users and to sub-state exchanges where they exist

Preconditions:

- ✓ Operational state-level entity
- ✓ Strong stakeholder buy-in
- ✓ State government authority/ financial support
- ✓ Existing staff capacity

Community College Consortia



1,977 graduates

Privacy & Security: Actions to Date

Putting the I in HealthIT
www.HealthIT.gov



- Prevent sharing of health information without consent
- Strengthen communications about breaches
- More enforcement
- Expand patient rights to access their information

- Hard work ahead for all of us...
 - Learn from each other
 - Live in the real world – keep your “feet on the ground” and your “eye on the prize”
 - Embrace failures and learn from them



Health **T**

IMPLEMENT

Meta Alonso
Jamie's Mother

IMPACT

INPUT

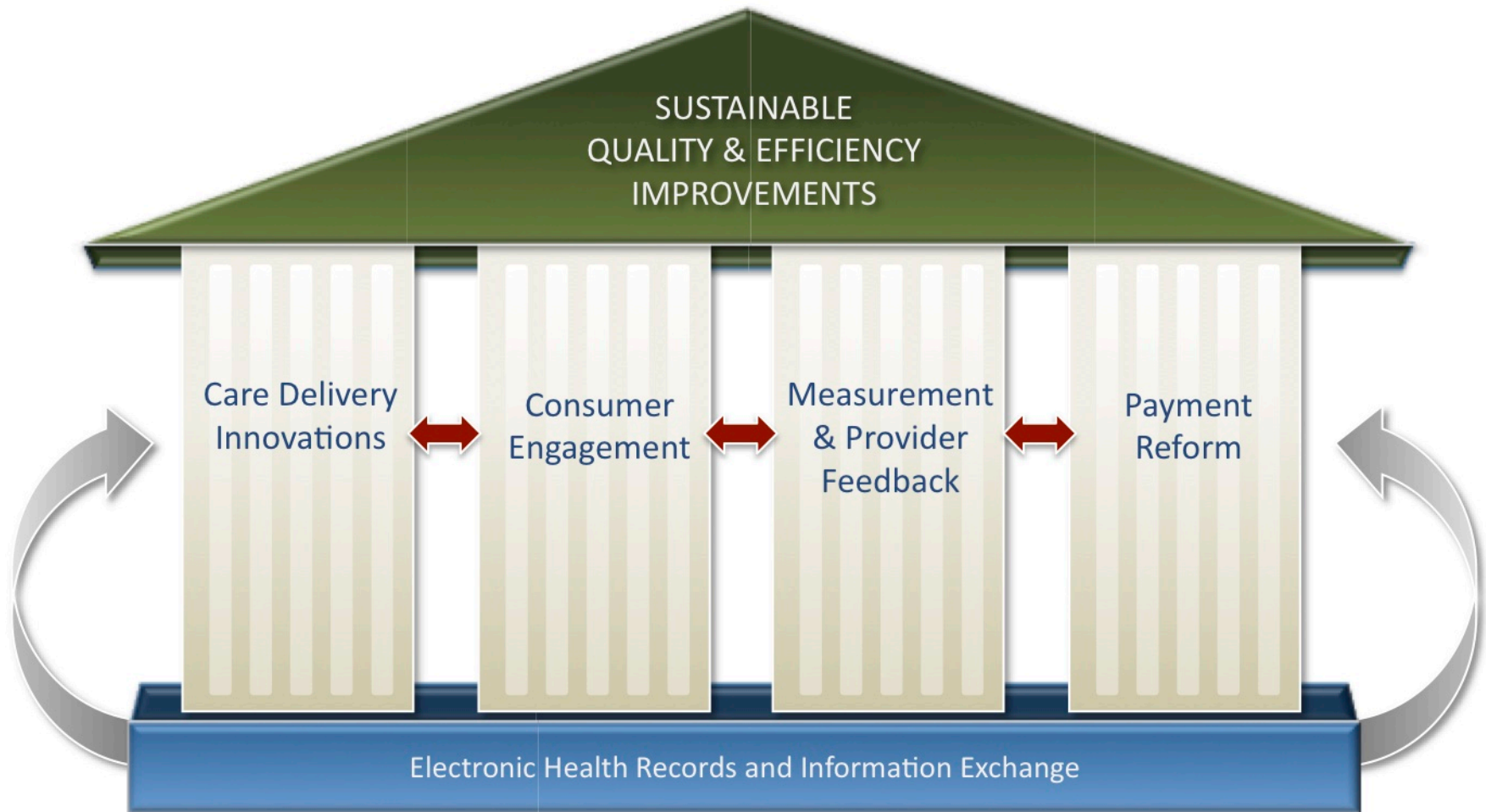
INNOVATE

Putting the I in

INCLUDE

Health **IT** 

I AM EMPOWERED



Aims

"These aims are not separate, but are interrelated and mutually reinforcing...Because of these connections, national priorities should contribute to the achievement of all three aims."

Better Care: Improve the overall quality, by making health care more patient-centered, reliable, accessible, and safe.

Affordable Care: Reduce the cost of quality health care for individuals, families, employers, and government.

Healthy People/Healthy Communities: Improve the health of the U.S. population by supporting proven interventions to address behavioral, social and, environmental determinants of health in addition to delivering higher-quality care.

Priorities

Making care safer by reducing harm caused in the delivery of care.

Making quality care more affordable for individuals, families, employers, and governments by developing and spreading new health care delivery models.

Promoting effective communication and coordination of care.

Working with communities to promote wide use of best practices to enable healthy living.

Promoting the most effective prevention and treatment practices for the leading causes of mortality, starting with cardiovascular disease.

Ensuring that each person and family are engaged as partners in their care.

Meaningful Use Is a Roadmap for Health Care Transformation

- Movement from volume (Fee for Service payment) to value (accountable care/ shared savings, value based purchasing, patient-centered medical homes, bundled payments)
- Requires health IT, and provides business case for investments in EHRs, HIE, and analytics
- Strong coordination at federal level
- Unique opportunity for “virtuous cycle”

Partnership for Patients: Better Care, Lower Costs

Putting the I in HealthIT 
www.HealthIT.gov

Secretary Sebelius has launched a new nationwide public-private partnership to tackle all forms of harm to patients.

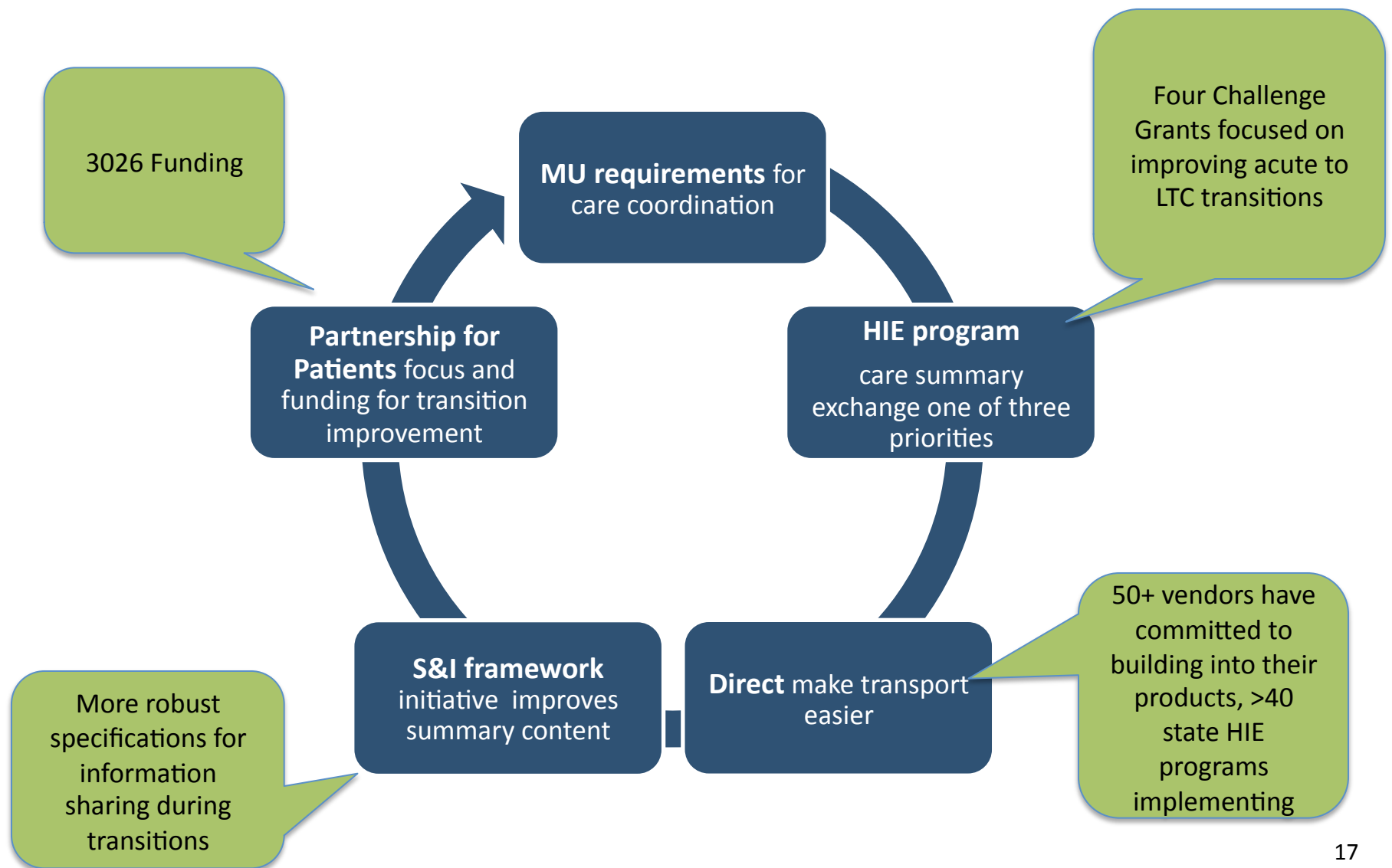


Goals

1. Keep patients from getting injured or sicker.
2. Help patients heal without complication

Potential to save up to \$35 billion dollars over three years

Care Transitions State HIE Breakthrough



Health IT

“I can show you IT works.”

IMPLEMENT

IMPACT

INPUT

INNOVATE

INCLUDE

I AM EMPOWERED

Melissa Rutala
MPH, Chief Executive Officer,
Regional Extension Centers

Putting the I in
Health IT 

- **405** public FACA meetings.
 - **18,225** man hours (assuming 3 hr meeting attended by 15 people)
 - 10 active workgroups
- Thousands of comments reviewed
 - **2,200** comments reviewed for Stage 1 Meaningful Use NPRM
 - Over **400** comments received for Stage 1 Standards and Certification Criteria NPRM
 - Hundreds of blog comments reviewed, including **422** comments received on Stage 2 MU recommendations and **55** comments on patient & family engagement Meaningful Use hearing

We received **241** comments from over **100** organizations including:

- ✓ Alliance for Pediatric Quality
- ✓ Alliance for Nursing Informatics
- ✓ Association of American Medical Colleges (AAMC)
- ✓ National Association of Chain Drug Stores (NACDS)
- ✓ Long Term Post-Acute Care (LTPAC) Health Information Technology (IT) Collaborative
- ✓ Federation of American Hospitals (FAH)
- ✓ American Physical Therapy Association (APTA)
- ✓ Health Level Seven International (HL7)
- ✓ Healthcare Information and Management Systems Society (HIMSS)
- ✓ McKesson Corporation
- ✓ Philips Healthcare
- ✓ American Medical Informatics Association (AMIA)
- ✓ GE Healthcare
- ✓ National Association of Community Health Centers (NACHC)



Putting the **IN** in Health **IT** 

IMPLEMENT

IMPACT

INPUT

INNOVATE

INCLUDE

I AM EMPOWERED

Direct Project: Secure Internet-based Direct Communication

Putting the I in HealthIT
www.HealthIT.gov



b.wells@direct.aclinic.org

Direct Project specifies a simple, secure, scalable, standards-based way for participants to send encrypted health information directly to known, trusted recipients over the Internet.



h.elthie@direct.ahospital.org

- **Simple.** Connects healthcare stakeholders through universal addressing using simple push of information.
- **Secure.** Users can easily verify messages are complete and not tampered with in travel.
- **Scalable.** Enables Internet scale with no need for central network authority.
- **Standards-based.** Built on common Internet standards for secure e-mail communication.

"I know more about my Health."

Health IT

IMPLEMENT

ChanMi Park
Mother of 2 and EHR Advocate

IMPACT

INPUT

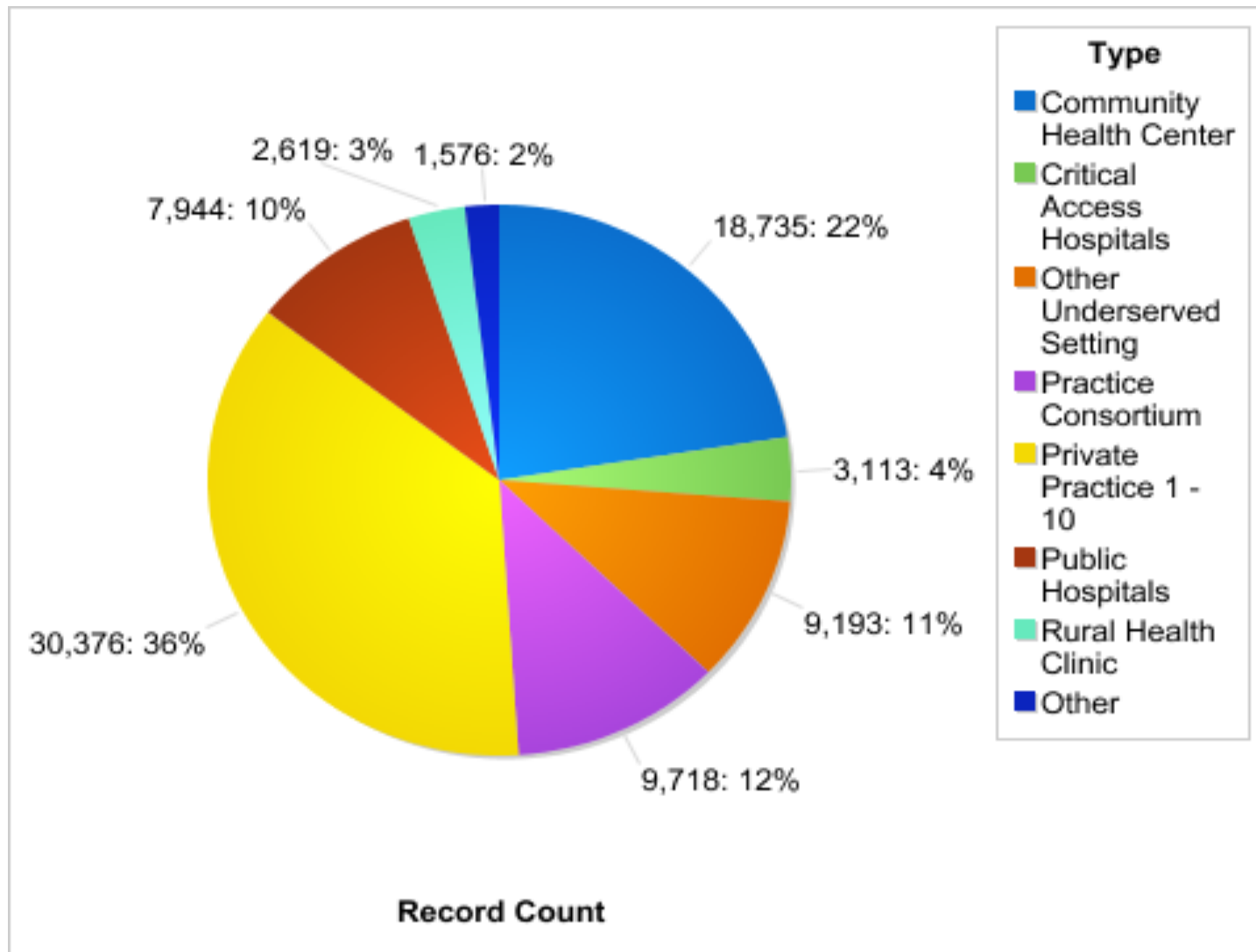
INNOVATE

INCLUDE

Putting the I in
Health IT

I AM EMPOWERED

Focus on Providers Caring for the Medically Underserved



Health

IT

IMPLEMENT

IMPACT

INPUT

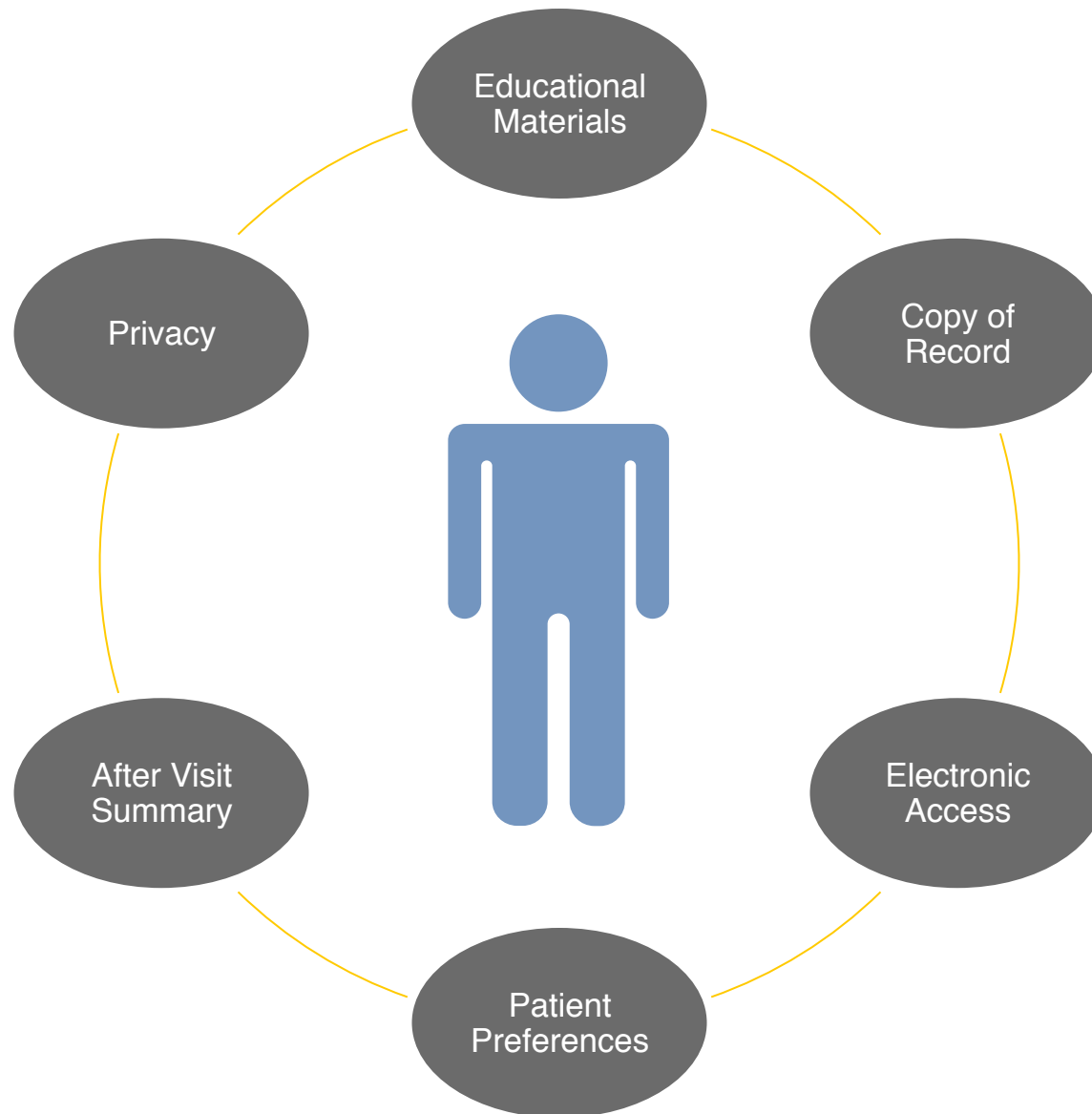
INNOVATE

INCLUDE

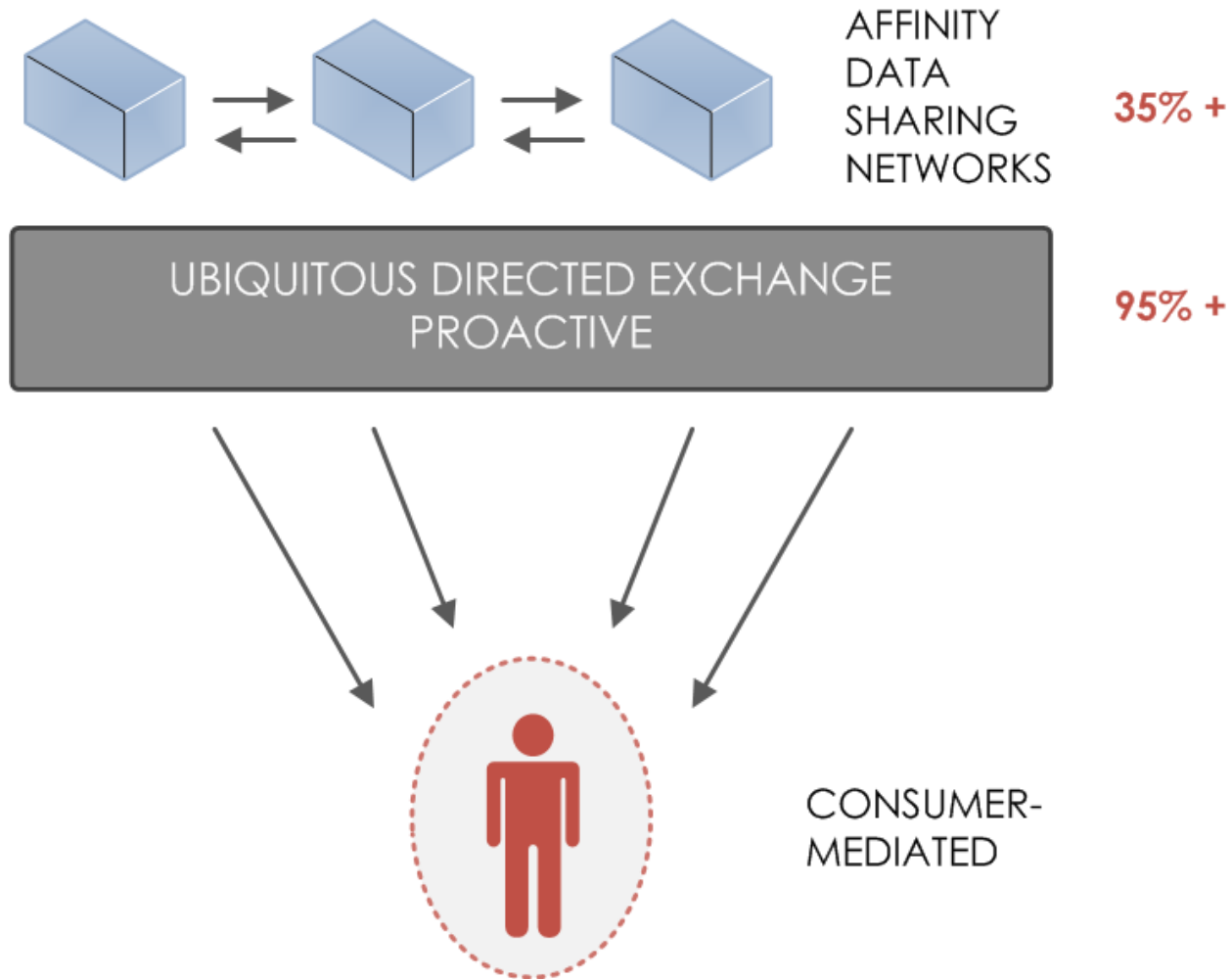
Putting the I in HealthIT 

I AM EMPOWERED

Putting the Patient in the Center



Health Information Exchange





- “Meaningful” patient choice for sharing identifiable health information through health information exchange
- Limitations of HIPAA
- Governing the privacy and security practices of “trusted intermediaries”
- Identification assurance and authentication

- Increase Access (Supply) of Patient Data
- Increase Demand
- Create Platform for Innovation

Our Challenge This Year

Impact

- Embrace Challenges

Implement

- Embrace failure, but share

Innovate

- Work with the market

Include

- Watch out for those that need it most

Input

- Be transparent

I am Empowered

- Put the patient in the center

Hold each other accountable