



Advancing Public Health Outcomes Through Information Technology

Meaningful Use And Impact on Immunization Outcomes

**ALASKA
IMMUNIZATION
PROGRAM**

**SCIENCE+SAFETY+CENTS
MAKING IT ALL ADD UP**

MAY 10-11, 2011 - ANCHORAGE MARRIOTT

Objectives



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- Meaningful Use: What does it mean?
- How it impacts Electronic Health Record (EHR) use
- What it means to VacTrAK
- What it means to improved immunization rates

“Meaningful Use” – ARRA / HITECH Act



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- American Recovery and Reinvestment Act (ARRA)
- FRAMEWORK for Health Information Technology Economic and Clinical Health Act (HITECH)
- Cash incentive for physician and hospital providers who demonstrate “meaningful use” of an electronic health record (EHR).

HITECH Act



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Centers for Medicare & Medicaid Services (CMS)

- Holds funds - \$43,000,000,000
- Begin in 2011 and gradually phase down.
- By 2015 - show positive outcomes in patient care or Medicare penalties.

Payment Incentives

- Purchase certified EHR or expand current EHR use
- Exchange health information
- Report quality measures

Meaningful Use Expectations - 2011



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- > 400,000 eligible Medicare providers
- > 100,000 eligible Medicaid providers
- > 5,000 hospitals



Premise of EHR Incentive Plan

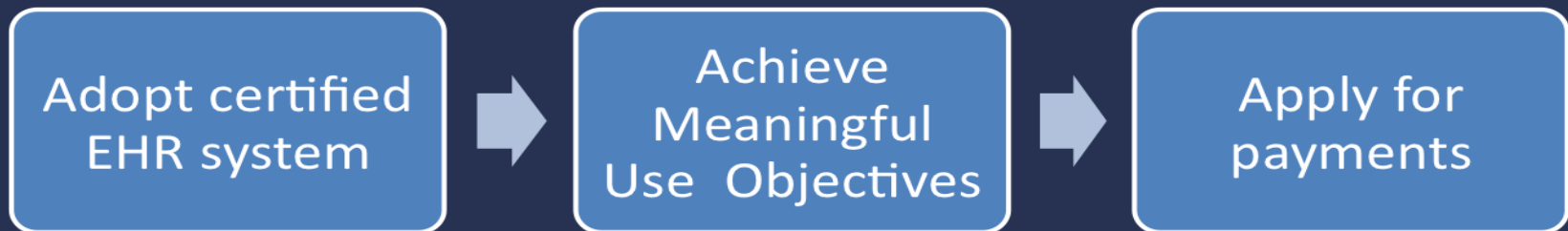
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- Demonstrated adoption of **certified** Electronic Health Record (EHR) technology
 - CCHIT certification
 - Meets meaningful use criteria
- Demonstrated **meaningful use** of the certified EHR technology
 - Direct relationship between use of EHR and improved healthcare outcomes



Pathway to Provider Incentives

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CCHIT-certified
or new certifying
bodies yet to be
named

Stage 1:
25 measures;
17 require only
attestation

Either Medicaid
or Medicare
program -
determined by
provider's billing



Immunization Requirements

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Stage 1

- Perform at least one test of EHR capability to submit electronic data to immunization registries, where required and accepted
- Electronically record, retrieve, and transmit immunization data to immunization registries in accordance with the applicable state-designated standard format.

➤ Stage 2

- Expand to bi-directional communication with public health agencies.

Stage 3

- Demonstrate improved coverage rate in the provider's population.

CASH Incentives



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Funds - awarded to provider



Provider reviews EHR products



Funds - Provider purchases EHR



Provider demonstrates immunization outcomes



Funds Returned – No positive outcomes demonstrated





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The Players



EHR Vendors

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- New revenue source
- Competing for provider's funds – “Pick Me!!”
- Meet / exceed standards now to compete for early purchases
- Sudden interest in VacTrAK
 - Testing
 - Endorsement
- EHR tools need to support provider's ability to demonstrate + outcomes
- Criteria does not specify the + immunization outcomes have to be demonstrated through use of EHR alone.
- Has no control over State Immunization Registries required fields / data quality standards



Providers

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- Opportunity to buy or expand EHR
- Penalties imposed if cannot prove + outcomes
- May want more functionality than EHR can offer
- May want / need VacTrAK data to improve provider's immunization coverage #s
- May need VacTrAK to demonstrate + outcomes
- May have increased interest in VacTrAK tools
 - Monitor / Measure / Motivate patients
- Sees VacTrAK as a source to populate a new EHR with immunization data



- Source of immunization data
- Established data quality processes
- Public Health expertise
 - Know and uphold ACIP recommendations
 - Vaccine steward
 - Motivated by clinical / preventative health outcomes alone
- History with interoperability
- Growing data standards from EMR vendors

EHR Functionality - ? To Ask



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- Can you document:
 - Vaccine manufacturer, lot number and expiration date
 - VFC participation
 - At the patient level – how they qualify for VFC
 - At the vaccine level – is this dose from VFC
 - Guardian information
 - Some have Guarantor or Responsible party
- Does it forecast needed vaccinations
- Can you pick vaccines from a choice list?

EHR Functionality - ? To Ask



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- Can it send vaccination data to VacTrAK?
 - Do you have to send data manually?
 - Can it send data automatically?
- Can it receive immunization data back from VacTrAK?
 - Where does it display that information?
 - Does the EHR deduplicate vaccinations?
- Is there additional cost for interface to send data to VacTrAK?
 - One time fee or fee plus annual support fee?
- How are vaccine codes kept up to date?



Next – Meaningful Use Stage 2

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- Still being developed
- Recommending more immunization management function in EHRs
 - To send appropriate data to State registries
 - To support immunization clinical decision support
- Move toward true “meaningful use”
 - Connection between use of health IT and improved outcomes)
- Includes rigorous expectation for Health Information Exchange (HIE)

Online Resources



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Get information, FAQs, tip sheets and more at CMS' official website for the EHR incentive programs:

➤ www.cms.gov/EHRIncentivePrograms

Learn about certification and certified EHRs,

➤ <http://healthit.hhs.gov>



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