



Meaningful Use

A Framework for Improved Patient Health & Care Delivery

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“Using QI to Implement EHR”
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Background

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- HITECH Act allocates \$34B to providers for EHR incentive funding
- Providers can receive incentive funding if they prove they are ‘meaningfully using’ their EHR
- Committees and subcommittees of the Office of the National Coordinator (ONC) are tasked with defining **meaningful use**



- **June**: the ONC Policy Committee released meaningful use recommendations for public comment
- **July**: CPCA, with the help of the EHR Meaningful Use workgroup, provided comments to the working meaningful use definition
- **Sept**: the ONC released the latest meaningful use recommendations for public comment; comments are under way.

What's Next?

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- **Nov/Dec 09:**
 - The ONC will forward their meaningful use recommendations to CMS
 - CMS will review the ONC recommendations, revise if necessary, and publish a proposed rule to define meaningful use and establish incentive program criteria
 - A 60 day public comment period will follow CMS publication of the rule

How Will This Impact My QI Program?



- Current meaningful use measures will require providers to:
 1. Improve quality, safety, efficiency & reduce health disparities
 2. Engage patients & families
 3. Improve care coordination
 4. Improve population & public health
 5. Ensure privacy & security protections for personal health information

Intersection of HIT & QI



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- EHR is an integral tool in supporting clinic QI goals; however, it is only a tool
- The QI strategies necessary to achieve meaningful use is what will get us to improved individual patient care and population health outcomes

Intersection of HIT & QI



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- These strategies may be part of broader clinic QI goals (e.g. Patient Centered Medical Home)
- You will hear about two of these QI strategies next, and how they have helped clinics position themselves for meaningful use incentives:
 - Panel Management
 - Population Management

CPCA

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Thank You.



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- Please welcome
Dr. Jason Cunningham and
Dr. Danielle Oryn