



Health Information Technology Promotion Audioconference

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Agenda

- Introduction – John Iglehart, Founding Editor, *Health Affairs* and National Correspondent, *New England Journal of Medicine*
 - Health Information Exchange Overview – Shannah Koss, Director, Health Information Technology Practice, Avalere Health LLC
 - Moving Physicians Forward: Medicare’s Role – Sheera Rosenfeld, Manager, Health Information Technology Practice, Avalere Health LLC
 - Recent CMS HIT Initiatives – Kelly Cronin, Senior Advisor, Centers for Medicaid and Medicare Services
 - The Physician’s Perspective – John Tooker, Executive Vice President and Chief Executive Officer, American College of Physicians
 - Q&A
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Key Health Information Exchange Trends

- Emerging information exchange networks and initiatives
 - » Regional Health Information Organizations (RHIOs) and local health information initiatives to create, test and improve information exchange
- National infrastructure push - *use case* scenarios
 - » Federal request for proposals (RFPs) supporting: national health information network (NHIN) architecture prototypes, privacy and security solutions, standards harmonization, product certification; newly established American Health Information Community (AHIC) Advises and oversees infrastructure initiatives
- Tactical HIE government and industry initiatives
 - » e.g., eRx, EHR, PHR, CPOE, bar coding, RFID, remote monitoring
- Consumerism
 - » Fostered by cost shifting, HSAs, HRAs, employer incentives, health information access authorization
- Funding and incentives
 - » Pay-for-performance, grants and seed funding, technology give-aways and health plan network services

PBM: Pharmacy Benefit Management company
e-Rx: Electronic Prescribing
EHR: Electronic Health Record
PHR: Personal Health Record

RFID: Radio Frequency Identification
CPOE: Computerized Physician Order Entry
HSA: Health Savings Account
HRA: Health Reimbursement Arrangement



Major Barriers to HIT Persist

- Lack of uniform standards that promote interoperability and support health information exchange
- Public trust and support - privacy and security concerns
- Competing and conflicting technology evolution
- Technology obsolescence
- Misaligned incentives in the health care system
- Project scope – *Run before you walk?*
- Lack of financial incentives and meaningful funding to overcome high start up costs and promote HIT adoption (e.g., payment differentials, grants, loans)
- Federal leadership and coordinated public and private sector activities just forming
- Legislative hurdles

...And Adoption Still Lags...

- Health care is still a paper-based system
- Health care lags behind other industries in investment in technology
 - » Health care spends 2-3% of budget on IT compared to 11% for Banking, 8% for Retail
- Market uptake is unclear; reports vary on HIT usage
 - » 5-18% of physicians use e-prescribing
 - » <10% physicians use EHR
 - » <30% nationwide adoption of CPOE (full and partial implementation), although reports vary

Physicians Balancing the Demands

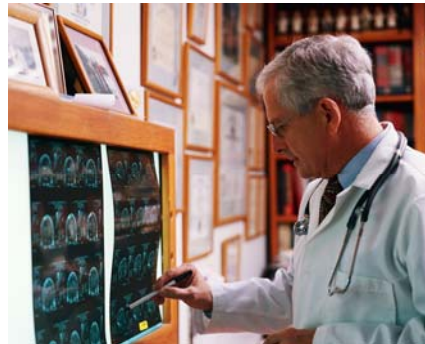
Reductions in Reimbursement

Consumer/Patient Expectations

Liability/Accountability

Quality measurement

Scope of Medical Knowledge



HIT and other capital investments – eRx, EMR, Administrative systems, Medical equipment

Pay-for-performance

■■■ Critical Perspectives from Today's Panelists

- CMS has a bigger role to play
- CMS has begun to engage
- The physician perspective