



The Office of the National Coordinator for  
Health Information Technology



## HITECH Update: Feet on the Ground and Head in the Clouds

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Deputy National Coordinator for Programs & Policy  
Office of the National Coordinator for Health IT  
Department of Health & Human Services  
Washington DC



*NENIC 10<sup>th</sup> Annual Symposium*  
*05-11-12*

Putting the **I** in **HealthIT**  
[www.HealthIT.gov](http://www.HealthIT.gov)

# Opportunities & Challenges

## An Update from the ONC



- The Time is Now for Health IT
- Health IT as the Means, not the End
- Meaningful Use Stage 1 Attestation Update
- HITECH Program Updates
- Putting the “I” in Health IT Campaign
- Consumer eHealth
- Challenges and Prizes program
- Meaningful Use of Meaningful Use
- Dialog



- President Bush's goal in 2004  
*"... an Electronic Health Record for every American by the year 2014. By computerizing health records, we can avoid dangerous medical mistakes, reduce costs, and improve care."*

- State of the Union address,  
Jan. 20, 2004



- Executive order established the Office of the National Coordinator for Health Information Technology (ONCHIT) as part of the Dept of Health & Human Services (HHS)
  - *Dr. David Brailer appointed the first National Coordinator*

# The Time is Now ...



- President Obama's goal in 2009  
*"To lower health care cost, cut medical errors, and improve care, **we'll computerize the nation's health records in five years**, saving billions of dollars in health care costs and countless lives."*

- First Weekly Address  
Jan. 24, 2009



- February 17, 2009 – the American Reinvestment and Recovery Act (ARRA – Stimulus Bill) is signed into law
  - *HITECH component of ARRA provides an incentive program to stimulate the adoption and use of HIT, especially EHR's*
  - *Dr. David Blumenthal appointed the new National Coordinator*

# American Recovery & Reinvestment Act of 2009 (Stimulus Bill)



- HR 1 -- 111<sup>th</sup> Congress
- \$787 Billion
- Highly partisan vote
- Healthcare gets \$147.7 Billion
  - \$87B for Medicaid
  - \$25B for support for extending COBRA
  - \$10B for NIH
  - **\$19B directly for HIT**



**HITECH = Health Information Technology  
for Economic and Clinical Health**

# Increasing public & government attention on Safety & Quality

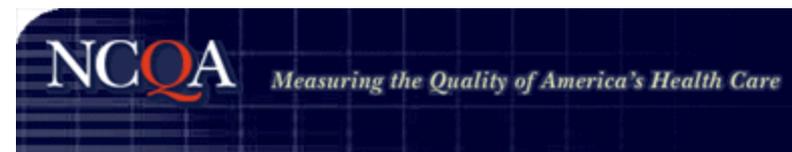


The Washington Post

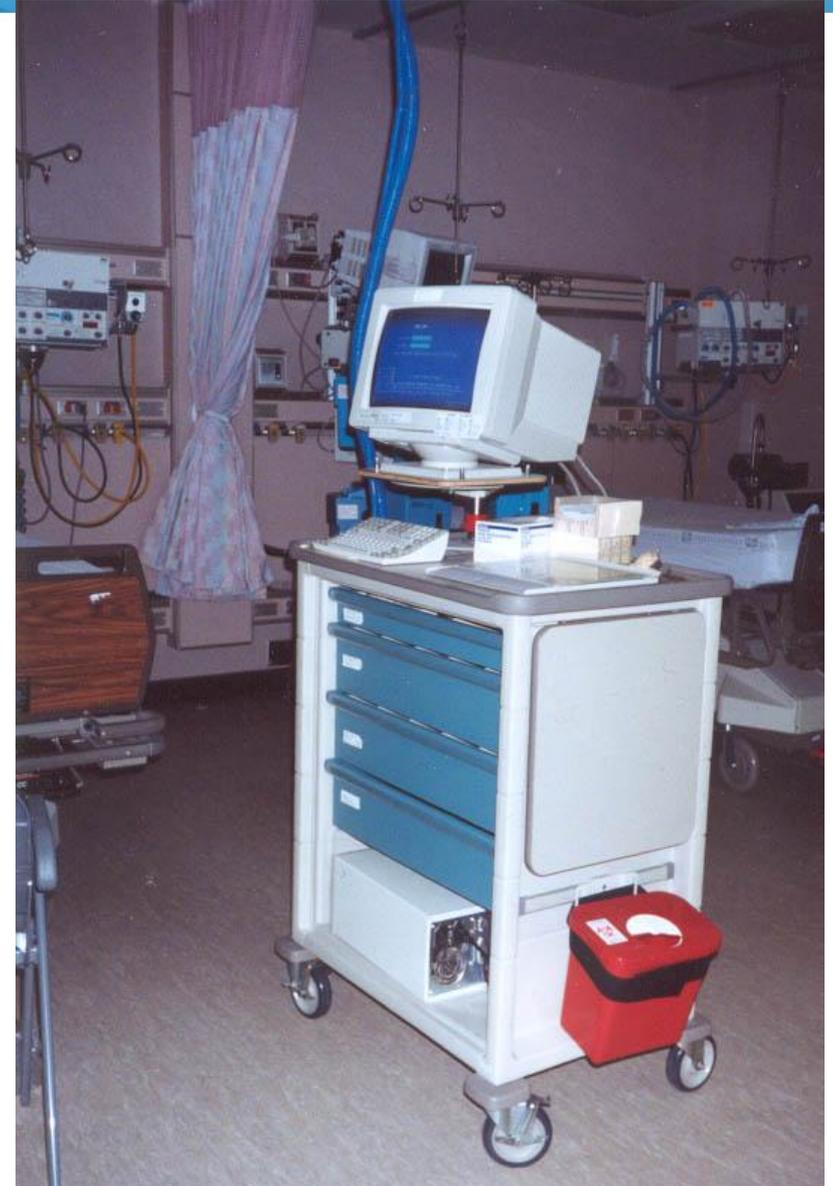


The New York Times

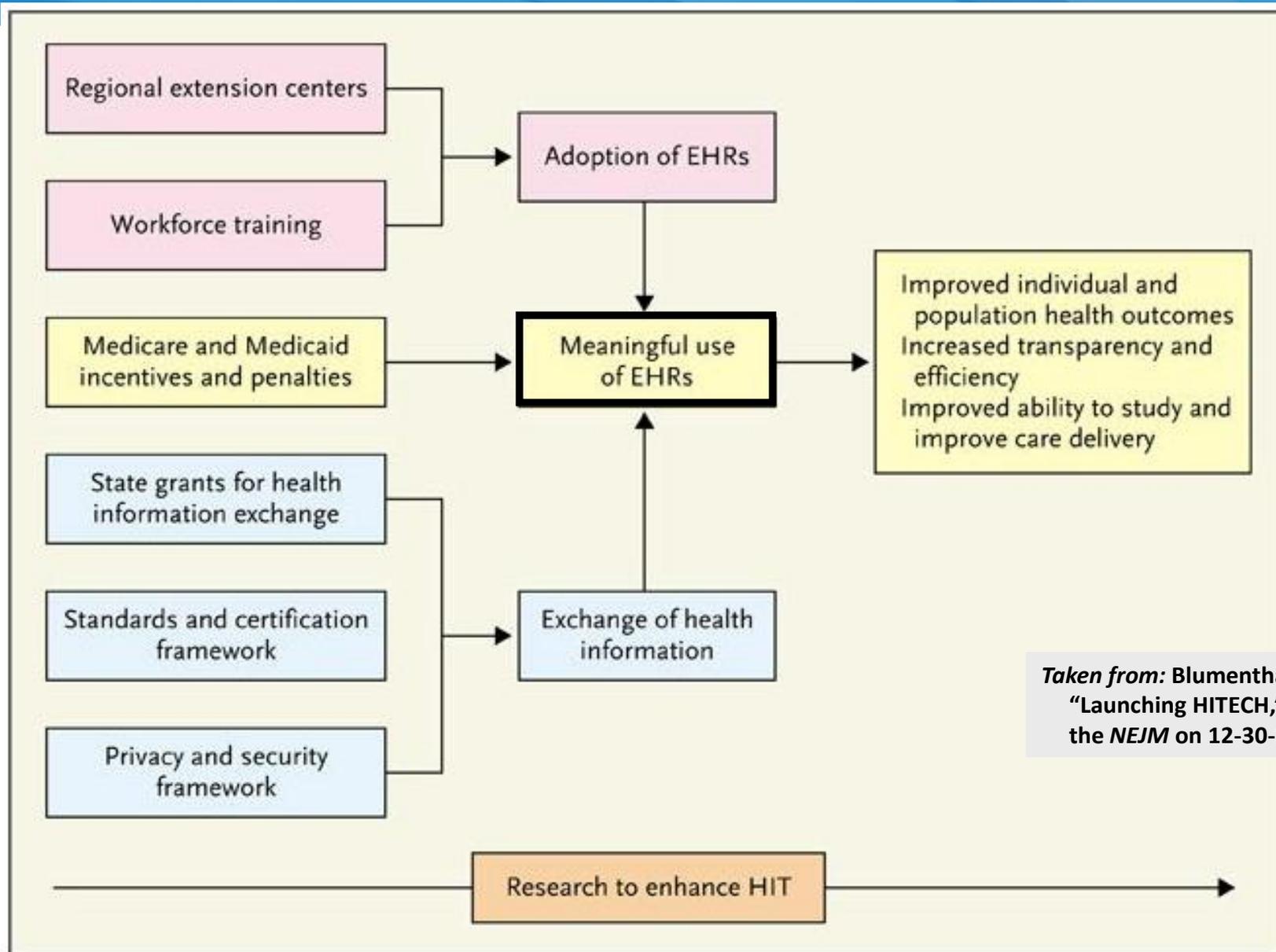
THE WALL STREET JOURNAL.



We've come a long way ...



# HITECH Framework for MU of EHRs



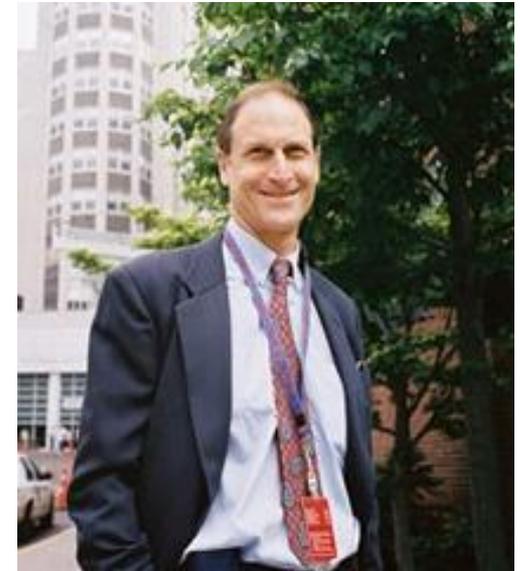
*Taken from: Blumenthal, D.  
"Launching HITECH," posted by  
the NEJM on 12-30-2009.*

# HIT as the means, not the end



**Dr. David Blumenthal, previous National Coordinator of HIT, emphasizes**

***“HIT is the means, but not the end. Getting an EHR up and running in health care is not the main objective behind the incentives provided by the federal government under ARRA. Improving health is. Promoting health care reform is.”***



- At the National HIPAA Summit  
in Washington, D.C.  
on September 16, 2009

# A Remarkable Journey



# 2012: The Year of Meaningful Use



## HealthIT Buzz

The Latest on Health Information Technology from ONC

### 2012: The Year of Meaningful Use

March 26, 2012, 5:00 pm / Dr. Farzad Mostashari / National Coordinator for Health Information Technology

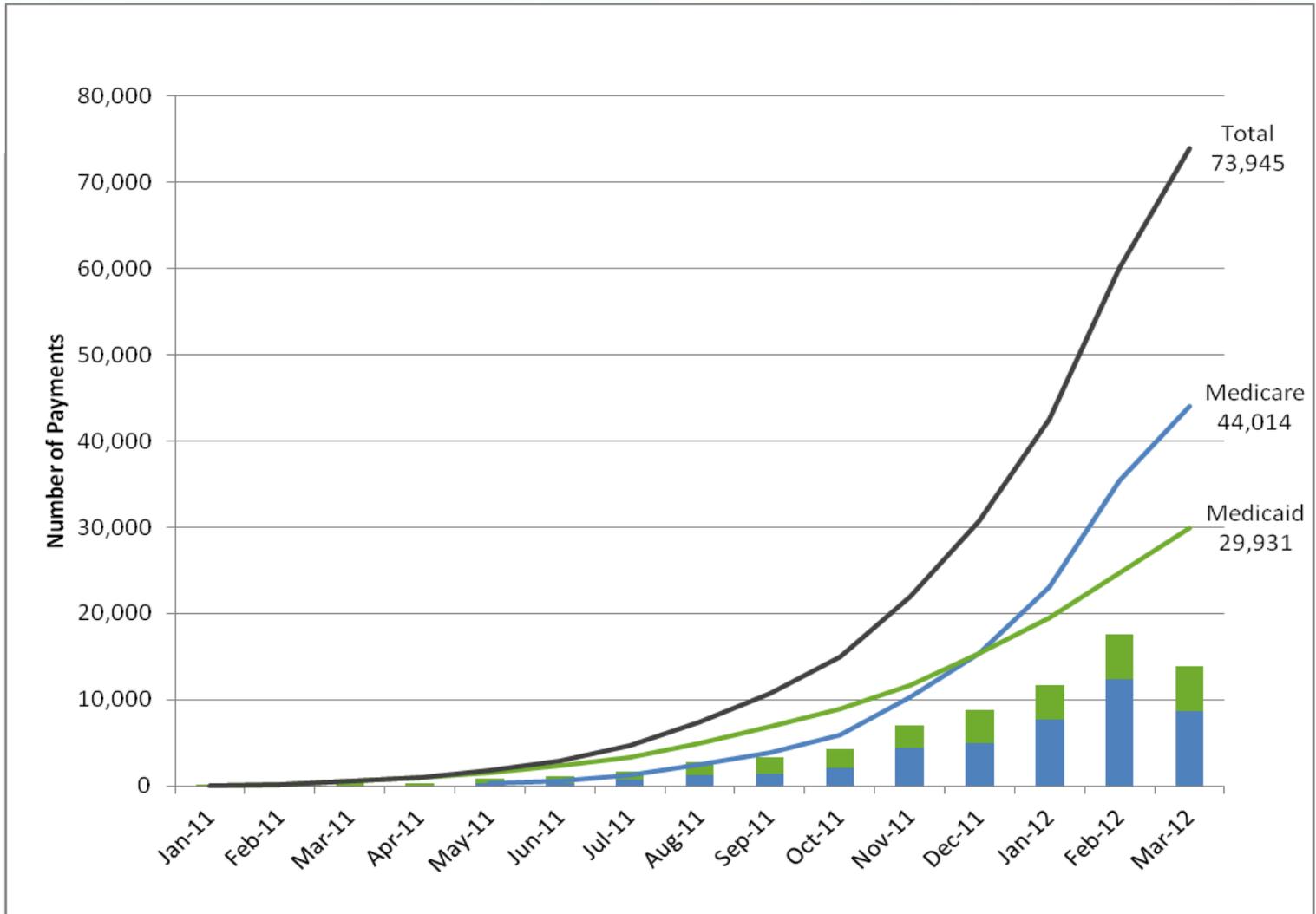
Health IT plays a central role in building a 21<sup>st</sup> Century health care system—where care is safer, better coordinated, and patient-centered, where we pay for the *right* care, not just *more* care. Increasing the adoption and use of health IT is crucial, so we've set an ambitious goal for 2012: get 100,000 health care providers paid under the Medicare and Medicaid Electronic Health Record (EHR) Incentive Programs by year's end. For us to succeed, we need you—the states and our many other health IT partners—to join us in this effort.

[Read Full Post](#) | [Comments \(4\)](#) | [Share](#) |



# Audience Response Question #1

# Number of EHR Incentive Payments Made to Eligible Professionals as of March 31, 2012



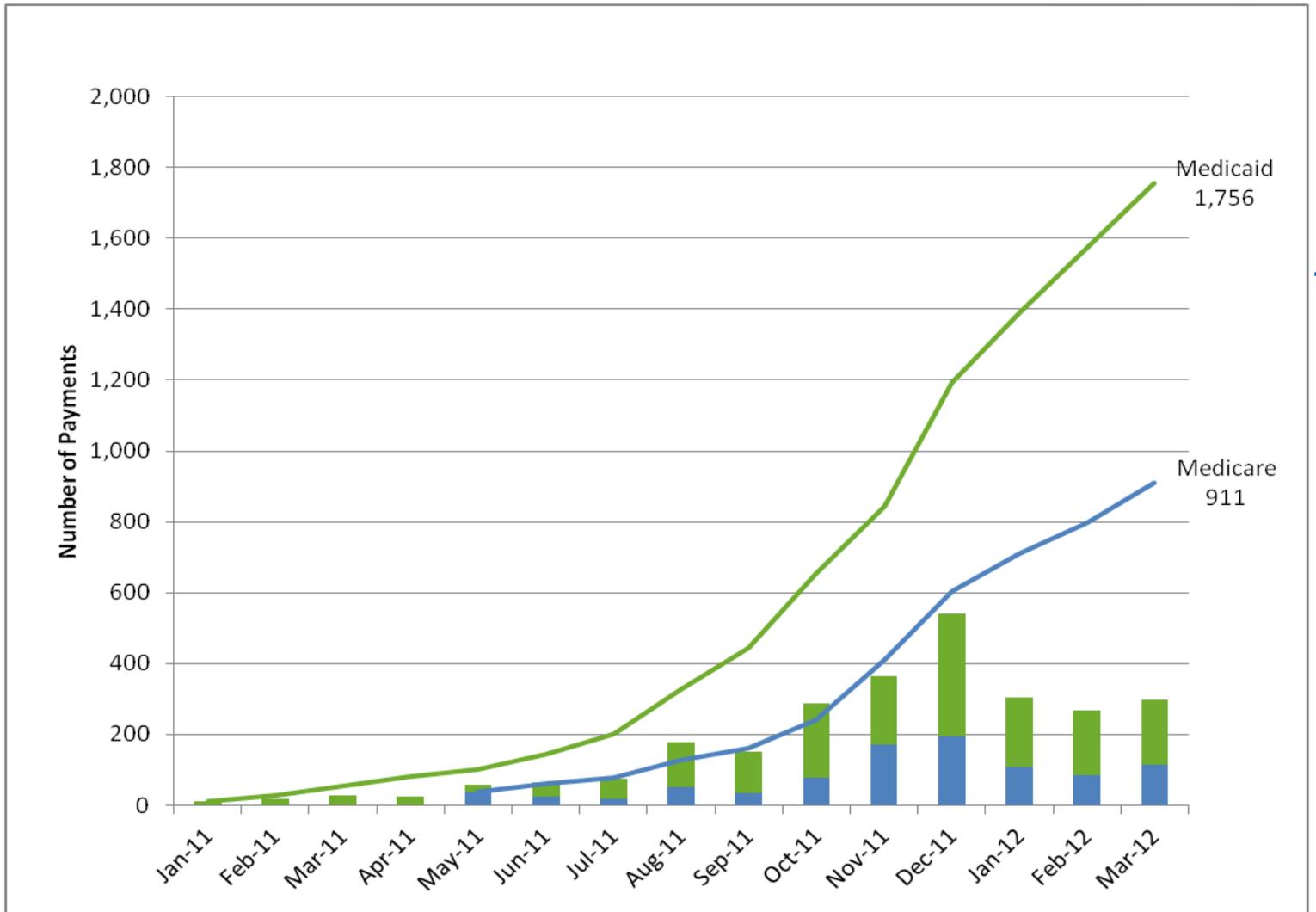
15%

Note: Medicaid payments are for adopting, implementing, or upgrading EHR technology.  
 Medicare payments are for the meaningful use of certified EHR technology.



## Audience Response Question #2

# Number of EHR Incentive Payments Made to Eligible Hospitals as of March 31, 2012



**Total  
45%**

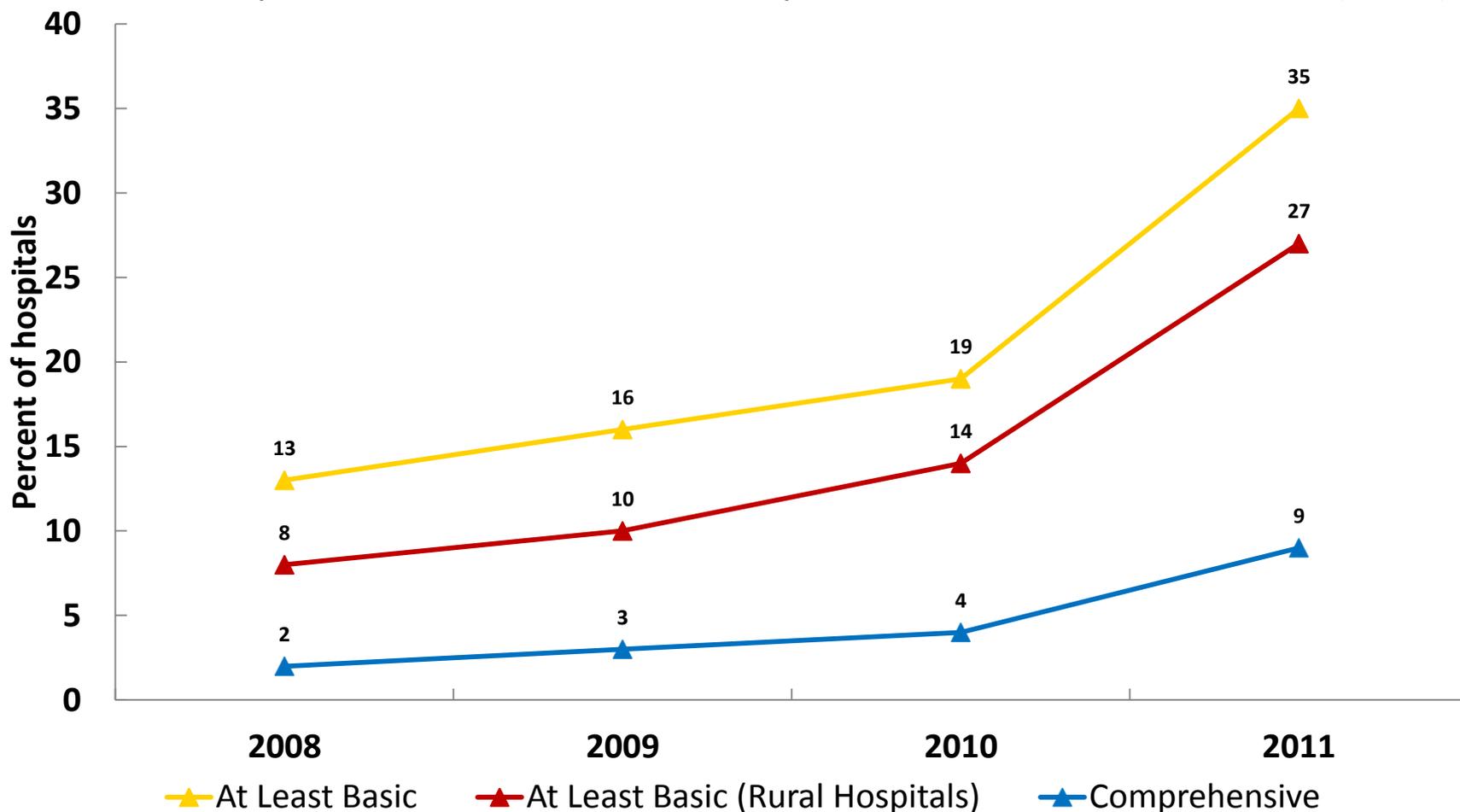
Note: Medicaid payments are for adopting, implementing, or upgrading EHR technology. Medicare payments are for the meaningful use of certified EHR technology. 566 hospitals have received payments under both Medicare and Medicaid. Source: CMS EHR Incentive Program

# 2011 AHA Survey Data



## Key points – in one year, from 2010 to 2011:

- Hospitals increased their use of Basic EHRs from 19% to 35% (84%)
- Hospitals doubled their use of Comprehensive EHRs from 4% to 9% (125%)



# Changes to HIMSS EMRAM



United States EMR Adoption Model <sup>SM</sup>			
Stage	Cumulative Capabilities	2011 Q3	2011 Q4
Stage 7	Complete EMR; CCD transactions to share data; Data warehousing; Data continuity with ED, ambulatory, OP	1.1%	1.2%
Stage 6	Physician documentation (structured templates), full CDSS (variance & compliance), full R-PACS	4.4%	5.2%
Stage 5	Closed loop medication administration	7.1%	8.4%
Stage 4	CPOE, Clinical Decision Support (clinical protocols)	13.2%	13.2%
Stage 3	Nursing/clinical documentation (flow sheets), CDSS (error checking), PACS available outside Radiology	46.1%	44.9%
Stage 2	CDR, Controlled Medical Vocabulary, CDS, may have Document Imaging; HIE capable	12.6%	12.4%
Stage 1	Ancillaries - Lab, Rad, Pharmacy - All Installed	5.9%	5.7%
Stage 0	All Three Ancillaries Not Installed	9.6%	9.0%

2011 Q1 & 2

28%

23%

45%

27%

32%

Data from the HIMSS Analytics™ Database © 2012

n=5,299 n=5,337

# Update on Other ONC Initiatives



- Regional Extension Centers - 62 to support physician adoption
- Health Information Exchange - 56 state programs
  - Standards & Certification interoperability specifications
  - Privacy and Security
- Beacon Communities – 17 demonstration projects of EHR value
- SHARP Research Projects – 4 HIT adoption breakthrough advances
  - Security – University of Illinois at Urbana
  - Patient-Centered Cognitive Support – University of Texas
  - Application & Network Design - Harvard
  - Secondary Use of EHR Data – Mayo Clinic
- Workforce Training Programs to support HIT education
  - University Based Programs – 9 universities Consumer eHealth
  - Community College Consortiums – 5 regions
  - Curriculum Development & Competency Exam
- Consumer eHealth

# Regional Extension Centers (RECs)



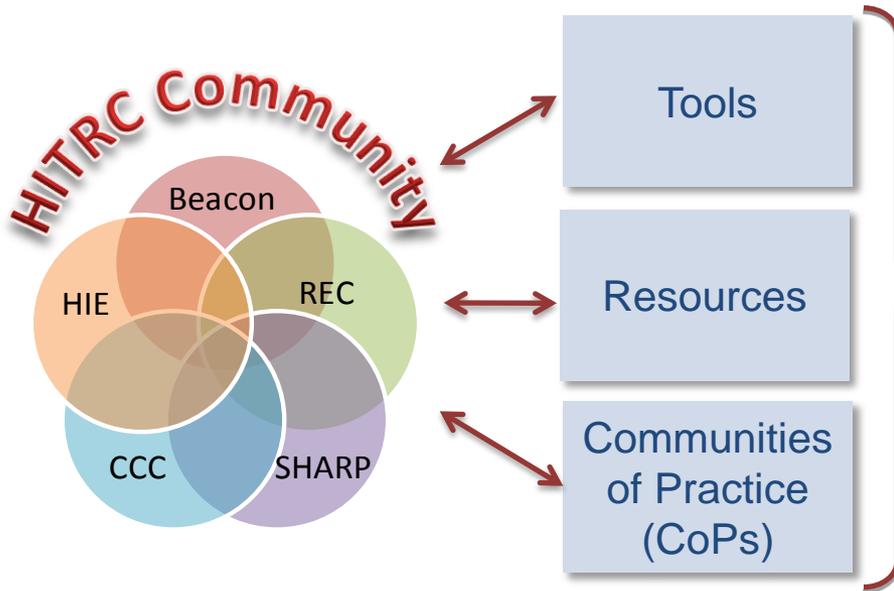
Over 132,000 primary care providers are working with a Regional Extension Center to achieve Meaningful Use

This includes

- Over 40% of all primary care providers in the nation
- Over half of all primary care providers working in rural locations
- Small providers are having successes at getting on EHR systems
- Working with 963 Critical Access Hospitals (CAHs) and 85 rural hospitals, all of whom have 25 beds or less



Work with REC  
community and shares  
knowledge



Work with external  
communities and shares  
knowledge





## FOCUS

Give providers viable options to meet MU exchange requirements for Stage 1 and 2 MU

- E-prescribing
- Care summary exchange
- Lab results exchange
- Public health reporting
- Patient engagement



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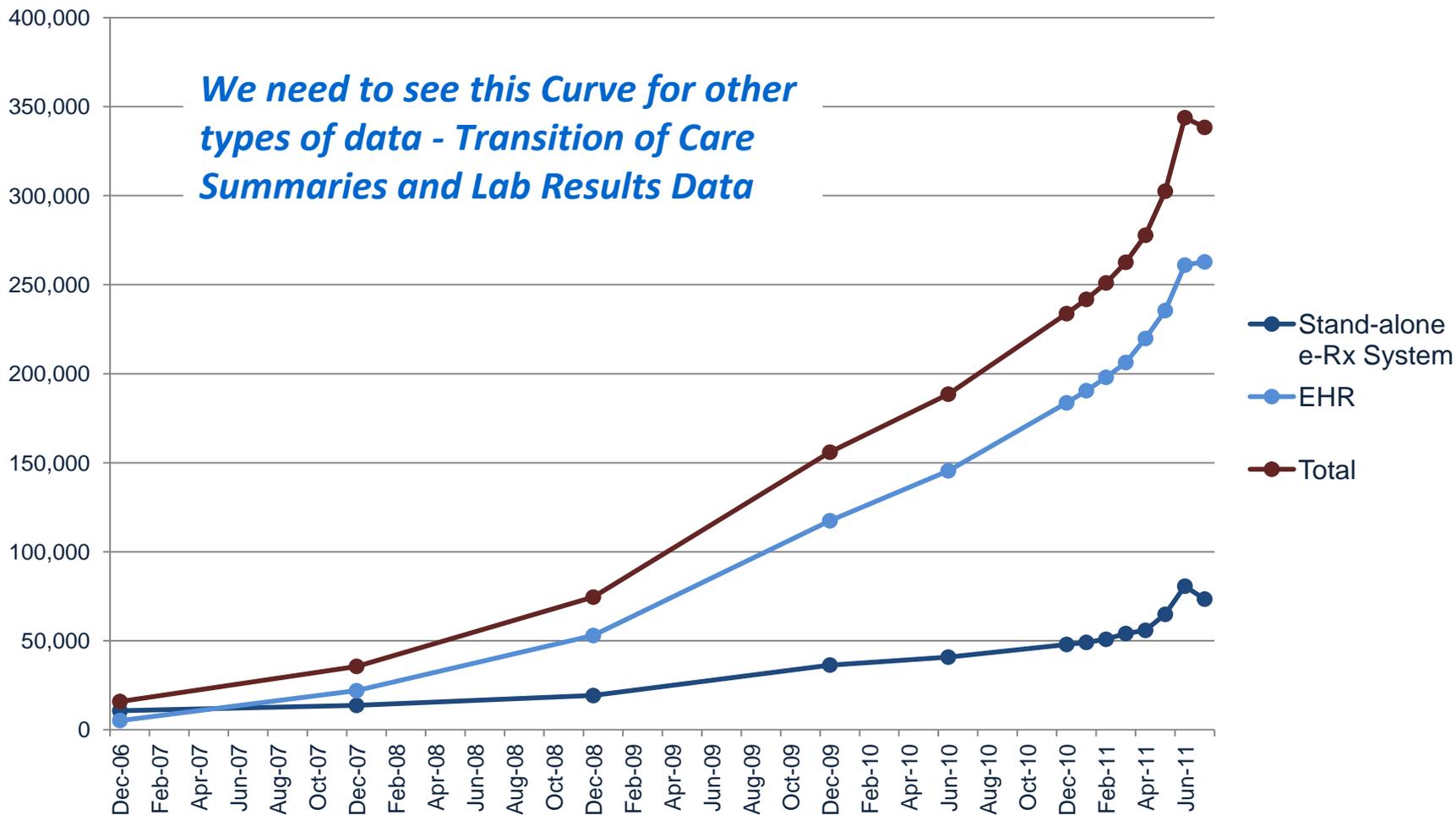
## APPROACH

- Make rapid progress
- Build on existing assets and private sector investments
- Every state different, cannot take a cookie cutter approach
- Leverage full portfolio of national standards

# Health Information Exchange (HIE)



## Number of e-Prescribers in US by Method of Prescribing





## 17 communities each funded ~\$12-15M over 3 yrs to...

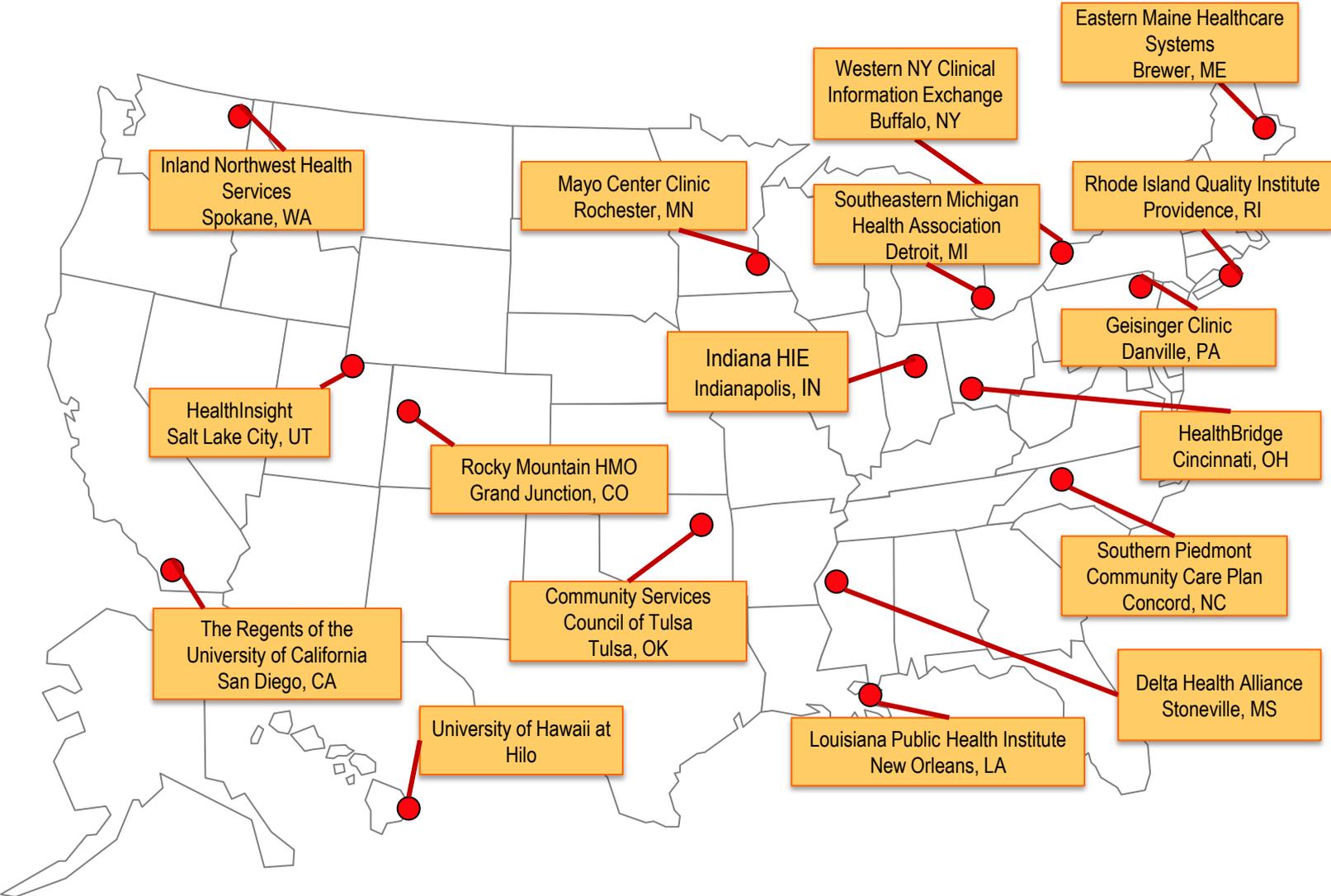
- **Build and strengthen** health IT infrastructure and exchange capabilities - *positioning each community to pursue a new level of sustainable health care quality and efficiency over the coming years.*
- **Demonstrate improvement** in cost, quality, and population health - *translating investments in health IT in the short run to measureable improvements in the 3-part aim.*
- **Test innovative technologies** - *accelerating evidence generation for new approaches in care delivery, performance measurement, technology integration and the like.*



Beacon Community Program

The Office of the National Coordinator for  
Health Information Technology

# 17 Beacon Communities



# One Beacon Story from San Diego



LINK: <http://www.sandiegobeacon.org/overview-video>

# SHARP – Strategic Health IT Advanced Research Projects



SHARPS

**Security of Health IT** - Innovations in security and privacy required to build public trust in health IT systems



Automated complex decisions around health record exchange, assuring regulation compliance



Developed techniques to analyze health records access logs to catch policy violations



**Patient-Centered Cognitive Support**  
– Innovations in health IT usability and clinical decision support



Piloted Rapid Usability Assessment Protocol for EHRs



Comparing usability across EHR systems via Usability Lab



**Healthcare Applications** – New health IT architectures enabling substitutable applications



Created **SMART platform** – a test-bed for the substitutable app development



SMART-enabled i2b2, a data analytics platform, and Indivo, a PHR



**Secondary Use of EHR Data** – Enabling exchange through creating tools, services for large-scale data sharing



Conversion and normalization of lab messages & medication orders



Extraction of medication from narrative clinical documents

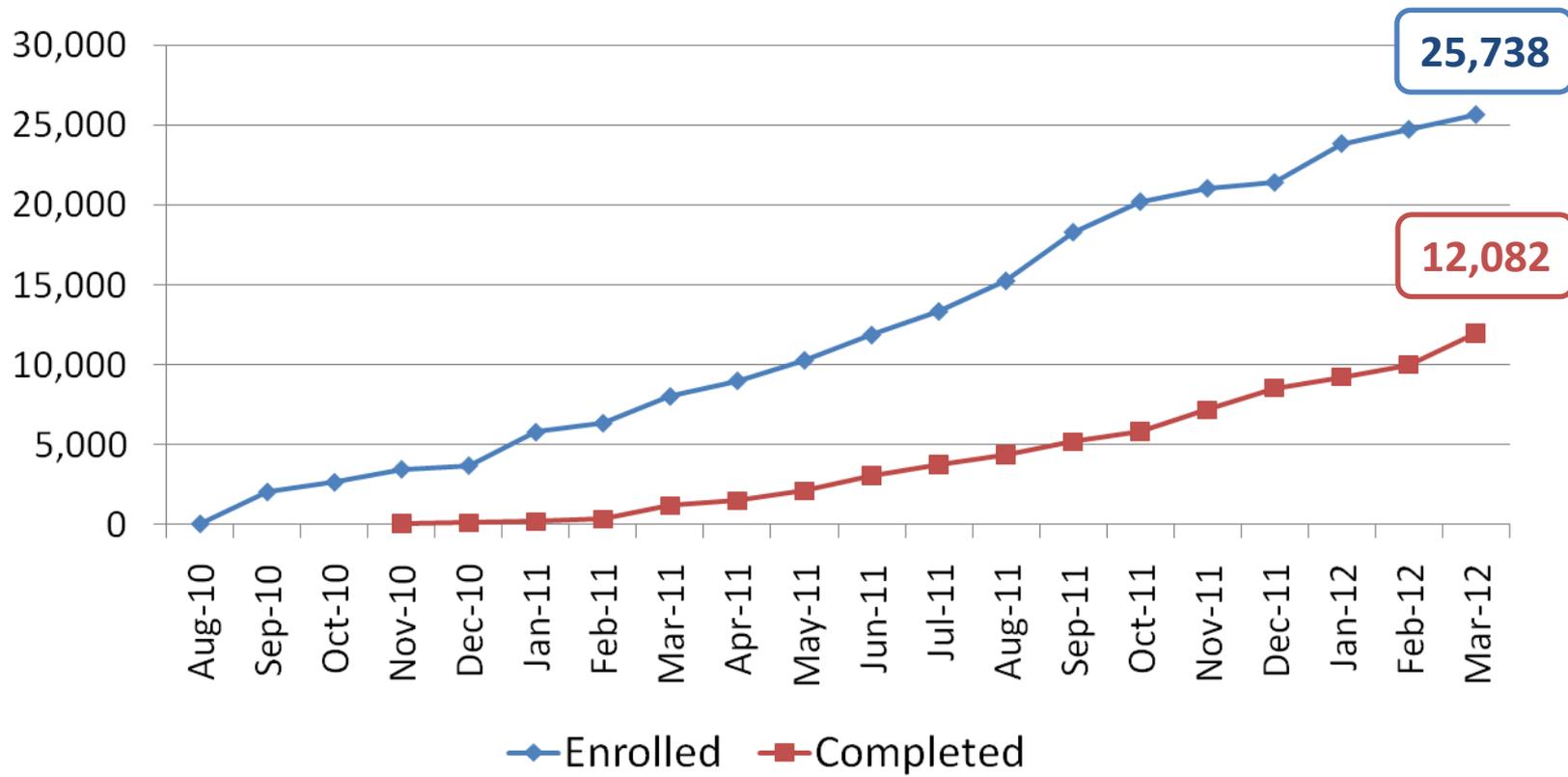


## Audience Response Question #3

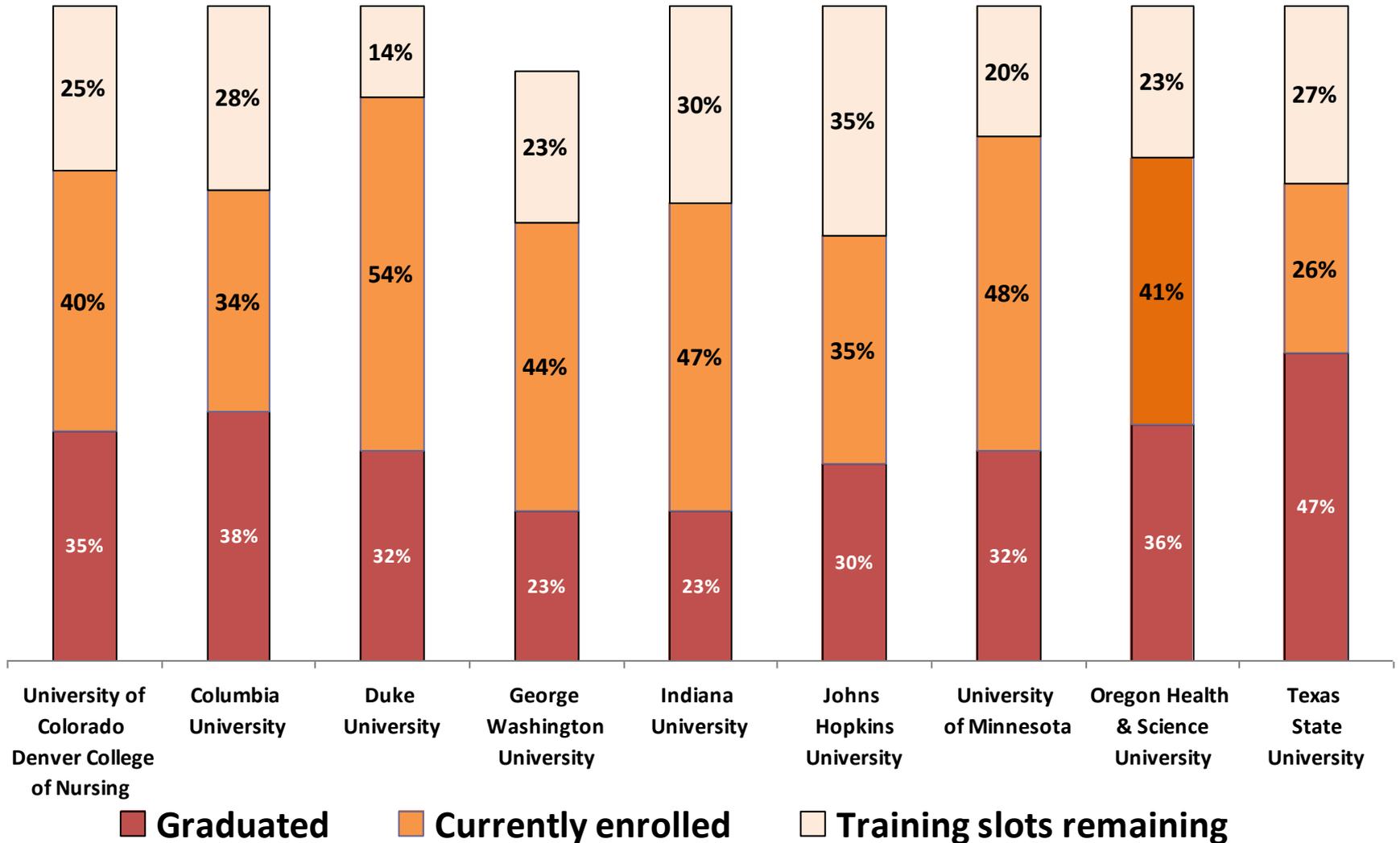
# Community College Consortia Workforce Training



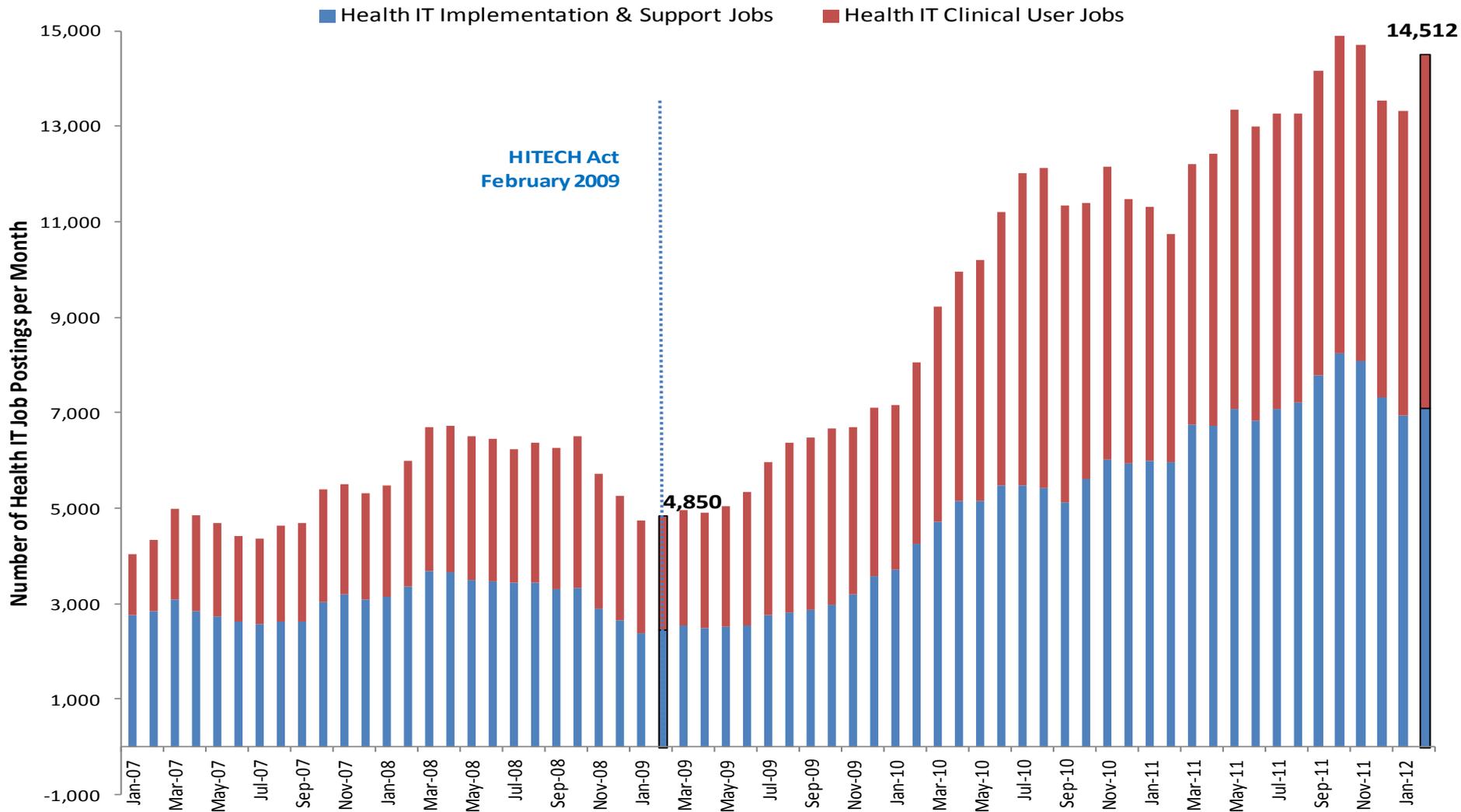
## Students Enrolled and Students Completed (Cumulative)



# University-Based Workforce Training as of 3/31/12: 571 graduates (34%)



# Online Job Postings Have Grown Substantially



# HealthIT.gov website (for providers)



Office of the National Coordinator (ONC) | Blog | Campaign Toolkit | Contact | Get Email Updates



in Partnership with the  
**National Learning Consortium**

Newsroom ▾ | Help Center ▾ | Multimedia

Search

## Providers & Professionals

Patients & Families ▸

Policy Researchers & Innovators ▸

▸ Benefits of EHRs

▸ How to Implement EHRs

▸ Privacy & Security

▸ EHR Incentives & Certification

▸ Information Exchange

▸ Case Studies & Data

## I have the information I need at my fingertips with health IT

Find out how health IT can help you improve patient care, lower costs, and save time.

[Learn More >](#)



1 2 3 4 ||

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### Take the First Step Toward EHR Implementation

Whether you're just starting to think about

### Achieve Meaningful Use

Already have an EHR System? Learn about the meaningful use objectives that

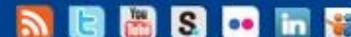
### Get Local Technical Help

The EHR adoption process can be overwhelming. But you don't have to do it

# HealthIT.gov website (for patients)



Office of the National Coordinator (ONC) | Blog | Campaign Toolkit | Contact | Get Email Updates



Newsroom ▾ Multimedia

Providers & Professionals ▸

**Patients & Families**

Policy Researchers & Innovators ▸

Basics of Health IT

E-Health

Benefits of Health IT

Protecting Your Privacy & Security

Health IT Stories

Frequently Asked Questions

“ I beat cancer so I could dance with my daughter at her wedding.”

— *Dave deBronkart, Stage IV Kidney Cancer Survivor*

[Learn More >](#)



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## Benefits of Health IT

Over the past 20 years, our nation has undergone an extraordinary transformation due to information technology (IT). Until now, relatively



## Connecting Children and Pregnant Women to Health Coverage and Information

The Centers for Medicare & Medicaid Services (CMS) is

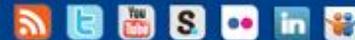
## The Future of Health Care: Electronic Health Records



# HealthIT.gov website (for informaticians)



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[Patients & Families](#) ▸

[Policy Researchers & Innovators](#)

Our launch of this section within HealthIT.gov is ongoing, and this landing page is temporary. Please keep checking back for updates and new information for Policymakers & Researchers.

## Stage 2 Meaningful Use

The U.S. Department of Health and Human Services (HHS) announced the release of proposed rules for meaningful use Stage 2.

[Learn More](#) ▸



### RECENT UPDATES

**ONC Data Brief: Adoption of EHRs Increasing**



### COMMITTEE NEWS

**Federal Advisory Committees (FACAs)**



### Health IT in the News

- March 25, 2012  
[Better Information and Better Outcomes Through Health IT](#)   
*ACC in Touch Blog*

# Putting the “I” in Health IT Campaign



Office of the National Coordinator (ONC) |

Newsroom |

Blog |



335



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“I am the future of health care.”

Putting the I in HealthIT



Providers & Professionals >

Patients & Families >

Policy Researchers & Innovators >



## “I found cancer earlier.”

**Jennifer Brull, M.D.** Prairie Star Family Practice, Plainville, KS  
Member, Meaningful Use Vanguard Program for leadership in electronic health record adoption

Regularly scheduled screenings can make the difference in catching colon cancer early, before it becomes invasive. Electronic health records showed me where there were gaps in my preventive care and let me set up automatic reminders for colon cancer screenings. As a result, screening rates for my patients went from 37% to 81%.

You can pursue Dr. Brull's path to meaningful use of electronic health records by:

- Scheduling a consultation with your local Regional Extension Center: [www.healthit.gov/rec](http://www.healthit.gov/rec)
- Registering for the Medicare and Medicaid Electronic Health Record Incentive Programs: [www.cms.gov/EHRincentivePrograms](http://www.cms.gov/EHRincentivePrograms)

Putting the **I** in Health**IT**  
[www.HealthIT.gov](http://www.HealthIT.gov)

The Office of the National Coordinator for Health Information Technology



## “I'll never go back to paper records.”

**Larry Garber, M.D.** Fallon Clinic, Worcester, MA  
Member, Meaningful Use Vanguard Program for leadership in electronic health record adoption

Doctors can't make good decisions if they don't have the right information. With an electronic health record, I can see all the information I need, in a meaningful way, when I have to make a decision about my patient's care.

**Better data. Better decisions. Better patient care.**

You can pursue Dr. Garber's path to meaningful use of electronic health records by:

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The Office of the National Coordinator for Health Information Technology



**“ I BEAT CANCER  
SO I COULD  
DANCE AT MY  
DAUGHTER’S  
WEDDING. ”**

**Dave deBronkart**

Cancer Survivor / Health IT Advocate

Putting the **I** in **HealthIT**  
[www.HealthIT.gov](http://www.HealthIT.gov)

  
The Office of the National Coordinator for  
Health Information Technology



**ePatient Dave**

Cancer Survivor and Proud Father



**“ I’M ADVOCATING  
COORDINATED CARE.”**

**Nikolai “Kolya” Kirienko**

Crohn’s Disease Patient / Health IT Advocate

Putting the **I** in Health**IT**   
[www.HealthIT.gov](http://www.HealthIT.gov)



The Office of the National Coordinator for  
Health Information Technology



**Nikolai “Koyla” Kirienko**

Crohn’s Disease Patient and Trailblazer

**“ I WANT MY KIDS TO HAVE THE BEST CARE.”**

**Lillianne Smith**  
Diabetic Wife & Mother / Health IT Advocate

Putting the **I** in Health**IT**   
[www.HealthIT.gov](http://www.HealthIT.gov)

  
The Office of the National Coordinator for  
Health Information Technology



**Lillianne Smith**

Diabetes Patient and Loving Mother

# Consumer eHealth Pledge Program

[www.healthit.gov/pledge](http://www.healthit.gov/pledge)



250+ organizations have Pledged to provide access to personal health information for 100 million (1/3) of Americans...

## PLEDGE

to Empower Individuals to be Partners in Their Health Care

### Who is Pledging IT?

Augue porttitor, nunc scelerisque, porta uma, in augue arcu, mattis, integer sociis vel elementum, magna phasellus sit ultricies tincidunt porttitor! Ridiculus vel cum ut. Hac sed hac montes nec, lectus a ut tempor. Mus. Pulvinar dis egestas sed rhoncus, lectus amet turpis. Habitas ac magna pulvinar, cursus, egestas dis turpis placerat, lorem.

[View All >](#)

### Take the Pledge

Enim dignissim augue et enim ut cursus hac in augue ultrices duis aenean dignissim parturient, integer tincidunt dignissim parturient. Nisi partur, uma pellentesque adipiscing porttitor parturient turpis arcu.

**PLEDGE NOW >**

This is a voluntary program. Pledging does not signify endorsement by ONC or HHS.

 <b>ANA</b> <small>AMERICAN NURSES ASSOCIATION</small>	<p>American Nurses Association</p>	 <b>ANI</b>	<p>Alliance for Nursing Informatics</p>	 <small>Beth Israel Deaconess Medical Center</small>	<p>Beth Israel Deaconess Medical Center</p>
 <small>Children's Hospital Boston</small>	<p>Children's Hospital Boston</p>	 <small>CHIME II FALL-GTD FORUM</small> <small>Registration is Now Open</small>	<p>The College of Healthcare Information Management Executives (CHIME) Continua Health Alliance</p>	 <small>Cleveland Clinic</small>	<p>Cleveland Clinic</p>
 <small>Consumers Union</small> <small>Nonprofit Publisher of Consumer Reports</small>	<p>Consumers Union</p>	 <small>Continua</small> <small>HEALTH ALLIANCE</small>	<p>Continua Health Alliance</p>	 <small>Dossia</small>	<p>Dossia</p>
 <small>EHRA</small> <small>Electronic Health Record Association</small>	<p>EHRA: HIMSS Electronic Health Record Association</p>	 <b>FLOYD</b>	<p>Floyd Medical Center</p>	 <small>GE</small>	<p>GE Healthcare</p>
 <small>HARBIN CLINIC</small>	<p>Harbin Clinic</p>	 <small>HealthBridge</small>	<p>Cincinnati Beacon Text4Health Program in partnership with HealthBridge</p>	 <small>HRBA</small>	<p>Health Record Banking Alliance</p>
 <small>Healthrageous</small>	<p>Healthrageous</p>	 <small>Microsoft HealthVault</small>	<p>Microsoft HealthVault</p>	 <small>HIMSS</small>	<p>Healthcare Information Management Systems Society</p>
 <small>IATRIC systems</small>	<p>IATRIC Systems</p>	 <small>INDIANA HEALTH INFORMATION TECHNOLOGY, INC.</small>	<p>IHIT Indiana Health Information Technology, Inc.</p>	 <small>intel</small>	<p>Intel</p>
 <small>KAISER PERMANENTE</small>	<p>Kaiser Permanente</p>	 <small>National eHealth Collaborative</small>	<p>National eHealth Collaborative</p>	 <small>NATIONAL HEALTH COUNCIL</small>	<p>National Health Council</p>

# ANI Pledge to Support Consumer eHealth



## **Alliance for Nursing Informatics Pledge to Support the Consumer eHealth Program *September 12, 2011***

*Bonnie Westra, PhD, RN, FAAN, ANI Co-chair (AMIA Representative)  
Judy Murphy, BSN, RN, FACMI, FHIMSS, ANI Co-Chair (HIMSS Representative)*

The [Alliance for Nursing Informatics](#) (ANI) advances NI leadership, practice, education, policy and research through a unified voice of nursing informatics organizations. We transform health and health care through nursing informatics and innovation. ANI is a collaboration of organizations that represents more than 5,000 nurse informaticists and brings together 28 distinct nursing informatics groups globally. ANI crosses academia, practice, industry, and nursing specialty boundaries and works in collaboration with the nearly 3 million nurses in practice today. Nurses touch the lives of patients in every setting, estimated to be about 18 million patients annually.

In order to effectively achieve health outcome improvements, patients and families will

# ANI Pledge on Facebook



## NEW! ANI Pledge to Support Consumer eHealth

I'm an RN and  
use a patient  
portal.  
Do you?



Alliance for Nursing Informatics

I'm an RN and  
use a PHR.  
Do you?



Alliance for Nursing Informatics

Nurses are the most-trusted health professionals and have a long history of patient advocacy. We expect nurses to have a significant impact on consumer participation in Health IT to increase use of Personal Health Records and Patient Portals from 10% today to over 25% in the next 2 years.

[Explore our new Consumer Engagement tab](#)

[Take the ANI Pledge to use eHealth on Facebook now](#)

I'm an RN and  
use a PHR.  
Do you?



Alliance for Nursing Informatics

## ANI Pledge to Support the Consumer eHealth Program

68 likes · 7 talking about this

✓ Liked

Message



Non-Profit Organization

ANI encourages you to start a PHR and post your experience. As nurses, we are in a unique position to effectively encourage patients to use PHRs and similar health IT tools to engage more fully in their health and health care

About

I'm an  
use



68

Photos

Likes

# Investing in Innovation (i2)



- ONC's Challenges and Prizes program spurring private-sector innovation and engaging developers to address health problems that touch **every person in America:**
  - Care Transitions
  - Cancer Research
  - Heart Disease
  - Population Health
  - Sexual Abuse
  - Disabilities
- Over 100 new applications developed
- Winners have received **\$195,000** in prizes
- Over 25 new challenges planned





## As a Health Care Provider

- **TREAT** high blood pressure and cholesterol in your patients.
- **TREAT** appropriate patients with Aspirin.
- **ESTABLISH** and **DISCUSS** with patients their specific goals for treatment and the most effective ways that they can help control their risk factors for heart disease and stroke.
- **COACH** your patients to develop heart-healthy habits, such as regular exercise and a diet rich in fresh fruits and vegetables, and stress reduction techniques. Provide tools to show their progress and access to team members to help them succeed.
- **ASK** your patients about their smoking status and provide cessation support and medication when appropriate.
- **ASK** about barriers to medication adherence and help find solutions.
- **USE** health information technology, such as electronic health records and decision support tools, to improve the delivery of care and control of the **ABCS**.



# ONC/Million Hearts/American Heart Association Beat Down Blood Pressure Video Challenge



April 6, 2012, 11:36 am  
Erin Poetter

 Share |

***Share Your Story and Enter to Win by May 2, 2012! Also Follow Our Twitter Handle (#HealthIT4UBP)***

One in three adults in the United States has high blood pressure (a.k.a., “hypertension”) – Do You? Many people who have high blood pressure don’t know it, which is why it’s often referred to as the “silent killer.” High blood pressure damages the brain, heart, eyes, and kidneys while causing no symptoms.

Fortunately, there are steps that each of us can take to prevent or manage high blood pressure, and technology can help!

## **Beat Down Blood Pressure Video Contest**

To raise awareness about this silent killer and crowd source inspirational stories about how people are using consumer e-health tools and other health IT to partner with their physician to manage this disease, the Office of the National Coordinator for Health Information Technology (ONC) in partnership with Million Hearts, an HHS initiative to prevent a million heart attacks and strokes in five years, and the American Heart Association announce the ***Beat Down Blood Pressure Video Challenge*** (#HealthIT4UBP).

This is the second in a series of 2012 health IT video contests through which members of the public are incentivized to create a short, but impactful video sharing how they use health IT or consumer e-health tools to manage high blood pressure. This contest features cash prizes for the best patient/consumer stories that demonstrate use of consumer e-health tools to:

- Routinely monitor blood pressure,
- Take medication as prescribed, and/or
- Make lifestyle changes that reduce risks and enhance heart health.



## Beat Down Blood Pressure

### VIDEO CHALLENGE

FOLLOW



49 followers



19 days left to submit



\$5,500 in prizes



Rules

Enter a Video

Discussions

Resources

FAQ

Share how you use technology to help “know your numbers” and achieve blood pressure control.

ACCEPT THIS CHALLENGE

Get notified of important changes and opportunities for participants.



Get started: [explore resources](#) from [ONC](#), [Million Hearts](#), and the [American Heart Association](#)!

# Consumer Video Challenge Winners



The Year I'll Lose 5% Body Fat by Sharon Terry

<http://healthynewyear.challenge.gov/submissions/6359-2012-the-year-i-ll-lose-5-body-fat>

1-Minute Funky Style Resolution Rap

<http://healthynewyear.challenge.gov/submissions/6043-1-minute-resolution-funky-style>



## Audience Response Question #4

# Health IT: Helping to Drive the 3-Part Aim



## Better healthcare



Improving patients' experience of care within the Institute of Medicine's 6 domains of quality: *Safety, Effectiveness, Patient-Centeredness, Timeliness, Efficiency, and Equity.*

## Better health



Keeping patients well so they can do what they want to do. Increasing the overall health of populations: address behavioral risk factors; focus on preventive care.

## Reduced costs



Lowering the total cost of care while improving quality, resulting in reduced monthly expenditures for Medicare, Medicaid, and CHIP beneficiaries.



***Health Information Technology***

# Meaningful Use Building Blocks



## Stage 3

- Promote improvements in quality, safety and efficiency
- Decision support for national high-priority conditions
- Patient access to self-management tools
- Access to comprehensive patient data
- Improving population health

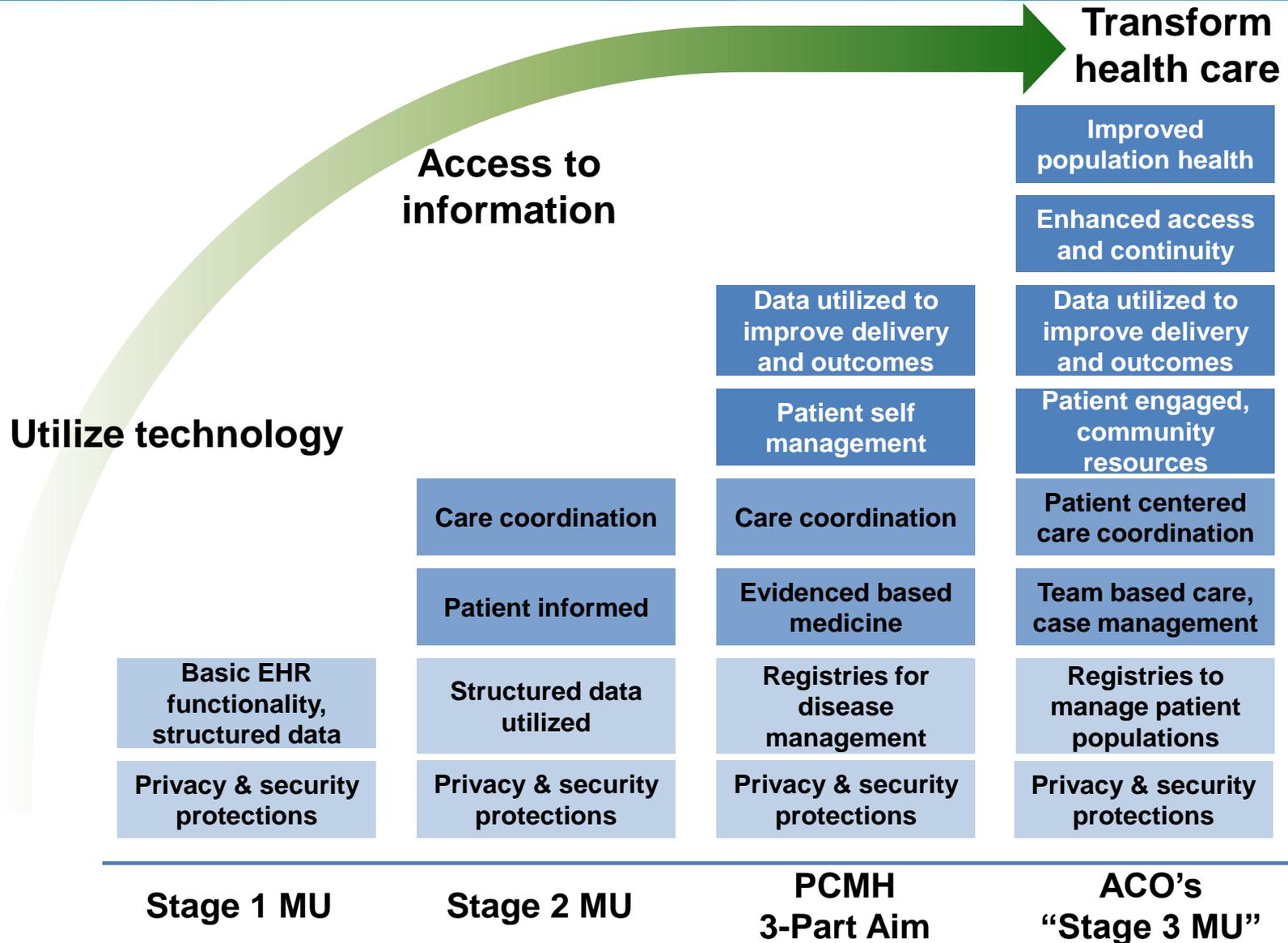
## Stage 2

- Expand upon the Stage 1 criteria to encourage the use of health IT for continuous quality improvement at the point of care and the exchange of information in the most structured format possible
- Applying the criteria more broadly to both the inpatient and outpatient hospital settings

## Stage 1

- Electronically capture health information in a structured format
- Use captured information to communicate that information for care coordination
- Implement clinical decision support tools
- Report clinical quality measures and public health information

# “Meaningful Use of Meaningful Use”



# How Health IT helps



- “Hard-wiring” evidence-based best practice
  - Order Sets
  - Care Plans
  - Clinical Decision Support (CDS)
  - Documentation Templates
  - Collection and Reporting of Clinical Quality Measures (CQM’s)
  - Data aggregation for new knowledge generation
- Facilitating access to information during encounters, between encounters and across care venues
  - Collect once, use many times
  - Anytime, anywhere access to patient information
  - Easy access to clinical reference data
  - Health information exchange (HIE)
- Patient / Consumer involvement
  - Patient as partner - Empowered
  - Participation in care – Compliance with care

# Stay Connected. Communicate and Collaborate.



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*Look at our past  
See what we've done  
Yet we've only just begun  
  
We've broken new ground  
Set out new frontiers  
Yes, this is our year  
  
This is our time  
This is our place  
Together we can innovate*

*Sharing ideas  
With open minds  
There's no other place of its kind  
  
Working together  
Tearing down walls  
Shaping the future for all*

**THE FUTURE IS NOW  
THIS IS OUR TIME.**



*Thank you!*

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