

Update on Meaningful Use, Certification of EHRs

The Office of the National Coordinator for HIT received updates July 16 from the work groups responsible for recommending definitions of both “meaningful use” and “certification.” The definitions are important because for a physician to receive federal stimulus money for health information technology, he or she must demonstrate meaningful use of a certified system. Physicians who do not do so by 2015 risk losing a portion of their payments.

To read the Meaningful Use Matrix, with highlighted updates from the July 16 recommendations, [click here](#)

To read the slides presented during the meeting, [click here](#).

(Slides from the Meaningful Use presentation begin on Page 16. Certification presentation begins on Page 69. This PDF totals 111 pages and also includes slides from presentations on health information exchange and standards and an overview of public comment received by the committee).

Below is a Colorado Medical Society summary of key new recommendations:

Meaningful Use:

- Requirements for accomplishing meaningful use should be based on an “adoption year” timeframe rather than a calendar year timeframe. Under this scenario, a new adopter in 2013 would be required to meet the expectations for the first adoption year (2011) to receive funding, not the higher expectations for 2013.
- The maximum incentive payment would continue to be based on the calendar year in which the provider first reported meaningful use, and he or she would be expected to meet all requirements by 2015, regardless of adoption year, or potentially lose a portion of Medicare payments.
- Add efficiency measures, such as percent of all medications entered into EHR as generic when generic options exist in the relevant drug class, and performing eligibility checks electronically.
- Measures should be appropriate to the specialty, and disease registries endorsed as a means of specialists showing meaningful use.

Certification:

- ONC should determine the criteria for certification, and multiple organizations should conduct the testing and certification. It should not be limited to CCHIT. Vendors will need certification from only one certifying organization.

- Criteria for certification should be limited to the minimum necessary to (a) meet the functional requirements of the statute and (b) achieve the meaningful use objectives.
- Criteria should be updated as the definition of meaningful use evolves.
- For self-developed software, an alternate certification process could be provided based on site inspection. Inspections could be done virtually, through remote access.

Keep in mind that these are only recommendations. The Centers for Medicare and Medicaid Services is not expected to issue the proposed rule for meaningful use until December. The ONC will issue an interim rule for certification that same month.