

ESTABLISHING WIDESPREAD ADOPTION OF ELECTRONIC HEALTH RECORDS AND ELECTRONIC PRESCRIBING IN PENNSYLVANIA



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EXECUTIVE SUMMARY

The use of electronic health records (EHRs) and electronic prescribing (eprescribing) has emerged, as a solution to the industry's challenge in accessing clinical information from numerous disconnected clinical databases at the time the information is needed. It is clear that a key requirement for success in the adoption of health information technologies and health information exchange is the active involvement of clinicians. A further measure of success is the degree to which health care clinicians use the information available to impact the delivery of care.

Throughout the great State of Pennsylvania there are numerous examples of EHR and eprescribing adoption and utilization. These stories need to be told. Physicians, pharmacists, payers, and patients are looking for real life examples showcasing the benefits and value of implementing these solutions as well as the incremental steps to take for long-term success. Pennsylvania's hospitals and health systems are outpacing hospitals nationally in their adoption and use of clinical HIT systems. Out of all states in the U.S., Pennsylvania ranked 12th based on the number of prescriptions routed electronically as a percentage of total eligible prescriptions in 2006 according to a survey conducted by SureScripts³.

The widespread adoption and use of electronic health records and electronic prescribing results in a win-win strategy for patients, physicians, health care providers, pharmacists and payers, working together in partnership to ensure a safer, more efficient and cost effective healthcare delivery environment for all. This paper dispels myths regarding healthcare provider adoption of health information technologies and outlines a series of steps health care policymakers, payers, venders and providers should take to ensure the widespread use of these vital technologies. Pennsylvania eHealth Initiative (PAeHI) stands ready to move the adoption of EHRs and electronic prescribing in concert with the following recommendations:

1. Adoption incentives such as tax credits, grants and loan programs to assist healthcare providers and support physicians in the initial installation of EHR and eprescribing solutions;
2. Use incentives such as pay-for-performance programs, reductions in malpractice insurance premiums and group discounts from healthcare IT suppliers should be put in place to help reduce and underwrite the ongoing operating cost of these systems;
3. Policy incentives and programs can include accreditation programs such as JCAHO 2005 Hospitals' National Patient Safety Goals, employer programs such as Leapfrog and others, and Medicare support for economic incentives;
4. Advancement of, and adherence to, a single set of national health IT, privacy and security standards and policies such as CCHIT certification of inpatient and ambulatory EHRs;
5. Increase broadband availability and choice in order to increase access to clinical health information exchange and to drive down related communication costs;

6. Funding of regional health information organizations (RHIOs) for incorporating electronic prescribing to help promote regional networks of pharmacies and physicians to use electronic prescribing leveraging networks currently established through RxHub and SureScripts;
7. Non-economic incentives or mandates for payers to push them to fund electronic prescribing efforts with the requirement that they support projects that include all regional payers, physicians and patient populations;
8. Use EHRs to replace current public health reporting burdens on health care providers such as immunizations and communicable disease registries;
9. Access to embedded decision-support functionality which is needed to be an integral part of today's eprescribing and EHR applications; and
10. Educate physicians, pharmacists and the public around the issues of using technology to improve patient safety and drive efficiencies.