

Pursuit of Meaningful Use

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By Linda L. Kloss, RHIA, FAHIMA, chief executive officer

On January 13 the Centers for Medicare and Medicaid Services published a notice of proposed rulemaking containing the stage 1 criteria for meaningful use of certified electronic health records. As this is the prerequisite to receiving incentive payments provided through the American Recovery and Reinvestment Act, ensuring conformance is certain to be the focus for many hospital and medical practice leaders and for EHR vendors in 2010.

It needs to be the focus for HIM professionals, as well, because these objectives and measures are all about the capture and use of accurate data and information.

Meaningful Use Measures and HIM

Stage 1 measures, for example, require use of CPOE, the maintenance of a problem list of current and active diagnoses in ICD-9-CM or SNOMED, maintenance of a medication and allergy list, and the ability to exchange these and other data with another provider for care coordination.

For most organizations, these capabilities are not yet in place, and while the bar is modest at the beginning (a demonstration of the capability to exchange, rather than routine exchange), it will surely be raised in later stages.

Meaningful use will also drive applications designed to empower patients. For example, the objectives call for providing patients with an electronic copy of their health information within 48 hours. In "The Empowered Patient," HIM professionals describe the technical, operational, and cultural change necessary to deliver this type of increased patient access to information. It will be a challenging goal for many hospitals and practices, and it must be an important focus for HIM professionals.

Stage 1 criteria encourage structured data for problem and medication lists. In "Transcription and EHRs" Jay Cannon and Susan Lucci discuss the challenges of balancing physician productivity, satisfaction, and preferences with the need for structured, discrete data and meaningful EHR adoption. This is another challenge that meaningful use brings to the fore.

This month, penalties take effect for noncompliance with new breach notification rules, another ARRA provision that affects HIM. How well do you know the ins and outs of the rule? You can check your knowledge by working through the scenario below in "Notification Required?". There are more online at <http://journal.ahima.org>.

Notification Required?

In September 2009 the Department of Health and Human Services released an interim final rule describing a covered entity's responsibilities to notify victims of a breach to their personal health information. The new rule was the result of provisions in the American Recovery and Reinvestment Act. Penalties for noncompliance take effect February 22.

How well do you know the ins and outs of the rule? It's complicated, and there are many moving parts. Test your knowledge on the following breach scenario by selecting the one best answer.

Scenario

General Hospital recently provided Mr. J. Smith with a copy of his complete medical record from his last visit. Accidentally contained within the copies was the history and physical report of Robert Lewis. Mr. Smith, who

dislikes General Hospital, called the HIM department to report the misdirected history and physical, complaining that the mistake was just another example of the substandard practices at General Hospital.

Mr. Smith refused to return the history and physical. He insisted he would call Mr. Lewis personally to inform him of the hospital's incompetence. Further investigation revealed that Mr. Lewis is deceased. The hospital's records do indicate the name and address of Mr. Lewis's next of kin. In response to this breach the hospital should:

- a. Do nothing because Mr. Lewis is deceased
- b. ☐ Notify the hospital attorney; secure a court order and seize the records from Mr. Smith
- c. ☐ Notify Mr. Lewis's next of kin; notify the security incident response team; contact Mr. Smith and formally ask that he return the history and physical to the hospital
- d. ☐ Arrange for a face-to-face meeting with Mr. Smith to seek return of the history and physical

Preserving a Comprehensive View

A danger in focusing on the meaningful use criteria will be distraction from necessary functionality required for other needs. In "Still Seeking the Legal EHR" Michelle Dougherty and Lydia Washington remind us of the imperative to "maintain a sound record of care that supports the organization's business, compliance, and legal needs."

The Certification Commission for Healthcare Information Technology announced comprehensive certification services for EHRs (in addition to meaningful use criteria). Providers are well advised to invest in solutions that meet such comprehensive certification solutions.

This is the last "Inside Look" that I have the privilege to write. Yes, it has been a privilege to have this opportunity to preview each issue's feature articles and share my personal perspectives over the past 15 years. Thank you so much for listening.

I want to acknowledge AHIMA's very committed, award-winning *Journal* editorial and production team. They contribute so much to our collective learning, and I have learned so much from them.

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