

The New Reality of Meaningful Use

Save to myBoK

By Lynne Thomas Gordon, MBA, RHIA, FACHE, CAE, FAHIMA, chief executive officer

It wasn't that long ago.

In 2009, when the American Recovery and Reinvestment Act (ARRA) was unveiled, healthcare industry observers knew it was big. And it included something the industry had never seen before in the form of a program that would soon become known as "meaningful use." It took more than a year for the final meaningful use regulation to appear. But when it did emerge in 2010, the HIM profession had its work cut out for it.

It's only been a few years. Most people have cars and appliances that are older than ARRA. But it is striking, in retrospect, how a fundamental change in the landscape—a federal program to pay providers incentives for the use of electronic health records—has quickly become a familiar reality.

A New Opportunity to Excel

Meaningful use, officially known as the EHR Incentive Program, has put into action a number of forces that have important ramifications for the HIM profession: patient engagement, enhancing interoperability to enable health information exchange, public health reporting, and clinical quality measures, to name a few. As we developed AHIMA's strategic plan, the Board of Directors saw an important role for HIM in many of these areas. For instance, patient engagement is key, as AHIMA believes patients should be engaged in their own care, work as partners with providers, and be able to access and view their data online.

The intricacies of meaningful use and its associated issues represent an opportunity for HIM to excel. In many cases, HIM professionals are already doing work that furthers the goals of meaningful use. The challenge is to continue to maintain the delicate balance of providing value in the face of quality and cost pressures.

Tools for Success

The articles in this month's issue offer a snapshot of how far we've come with meaningful use, and how much more work there is to do as we approach the next stages of implementation.

In "[Meaningful Use Opens Up Its Deep End](#)," Mary Butler talks with providers and industry experts about stage 1 meaningful use in retrospect, as well as their hopes and concerns for stage 2.

As interest in integrating patient-generated data grows, there will be new opportunities and challenges for providers that HIM professionals can help unravel. William Van Doornik takes a look at this issue in "[Meaningful Use of Patient-Generated Data in EHRs](#)."

Though consumer adoption of personal health records (PHRs) may have been slow in the past, increased government focus on consumer engagement may soon change that. Lisa A. Eramo takes a look at how HIM can encourage consumer engagement in "[Renewing Interest in the PHR](#)."

Clinical decision support systems are part of the meaningful use mix as well. In "[The Five Rights of Clinical Decision Support](#)," Robert Campbell defines clinical decision support in terms of its relationship to meaningful use and where it has been most effective.

In the long run, individuals with skills in both HIM and informatics are likely to continue to be in demand. How that trend is reflected in education is the basis of William Hersh and Joanne Valerius's article "[A Tale of Two Professions](#)."

HIM professionals have the skill set to make the most of the meaningful use opportunity presented by the EHR Incentive Program. We must lead the effort or find the right partners to get the job done. We shouldn't wait—we are already the experts.

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