



Already, we have done more to advance the cause of healthcare reform in the last thirty days than we have in the last decade. [...] Our recovery plan will invest in electronic health records and new technology that will reduce errors, bring down costs, ensure privacy, and save lives.
~ President Barack Obama, Speech to Congress, February 24, 2009

On February 17, 2009, President Barack Obama signed into law the American Recovery and Reinvestment Act of 2009 (ARRA), also known as the economic stimulus plan or the stimulus bill. The Act aims to stimulate the US economy following the current economic downturn. One section of The Act, the HITECH Act, deals in part with electronic health records.

Within HITECH, 19.2 billion dollars will be allocated to health information technology. Of this amount, 17.2 billion will be paid to physicians through Medicare and Medicaid in the form of incentive payments. To receive up to \$44,000 from this Act, a physician must be a meaningful user of a certified EHR by 2014. It is in a physician's best interest to have adopted and obtained meaningful use of a certified EHR as soon as possible.

Physician incentive payments vary depending upon the year of adoption, but can begin as early as 2011, with the final year of payment being no later than 2016. Physicians qualifying for payments in 2011 or 2012 will receive five consecutive years of payments totaling \$44,000. Physicians qualifying for payments in 2013 will receive four consecutive years of payments totaling \$39,000. Physicians qualifying for payments in 2014 will receive three consecutive years of payments totaling \$35,000. No incentive payments will be made if a physician has not qualified by 2014. Nor will incentive payments be given after 2016. Additionally, if the physician is in a health professional shortage area, incentive payments will be increased by ten percent. Incentive payment for any given year may be in the form of a single consolidated payment or in the form of such periodic installments as the Secretary may specify. The following table describes this paragraph visually.

ARRA Physician Incentive Payment Plan table with columns: Qualify 2011, Qualify 2012, Qualify 2013, Qualify 2014, Adopt 2015+. Rows include years 2011-2017, TOTAL, and x10% Health Professional Shortage Area.

Representation of incentive payments provided to physicians based on adoption year.

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To qualify for the physician incentive payments, a physician must be a non-hospital-based physician who participates in the Medicare program. The ONC has until December 31, 2009, to develop satisfactory methods of determining meaningful EHR use including, but not limited to electronic prescribing plus other criteria to be determined, information exchange and interoperability, and clinical quality reporting. Clinical quality reporting can be completed through means which may include an attestation, submission of claims with appropriate coding, a survey response, or other means as specified by the Secretary. The physician must meet these requirements to the satisfaction of the Secretary.

If a physician is not a meaningful user of a certified EHR by 2015, the physician's Medicare fee schedule will begin to be reduced. For 2015, the schedule will be reduced to 99 percent; for 2016, the schedule will be reduced to 98 percent; for 2017 and each subsequent year, the schedule will be reduced to 97 percent. For 2018 and subsequent years, the schedule may be reduced no lower than 95 percent. There is an exception in the HITECH Act if compliance would result in a significant hardship. However, in no case may an eligible professional be granted an exemption for more than five years.

As you can see, there is still quite a bit of information to be determined. It is apparent, however, that the sooner a physician begins using a certified EHR, the more likely that physician is to be a meaningful user, and receive the maximum amount of incentives.

Glossary:

- HITECH Act – Health Information Technology for Economic and Clinical Health Act; made of up Title XIII of Division A and Title IV of Division B of the ARRA
- EMR vs. EHR – The Act does not distinguish between the two terms (Medical vs. Health), but does consistently use EHR
- CCHIT – Certification Commission for Healthcare Information Technology; a current method of EHR certification
- HHS – Department of Health and Human Services
- ONC – Office of the National Coordinator
- ONCHIT – Office of the National Coordinator for Health Information Technology; situated with the Department of Health and Human Services
- Secretary – Secretary of the Department of Health and Human Services
- *Qualified* EHR – an electronic record of health-related information on an individual that includes patient demographic and clinical health information, such as medical history and problem lists; must have the capacity to provide clinical decision support, support physician order entry, capture and query information relevant to healthcare quality, and exchange electronic health information with, and integrate such information from other sources
- *Certified* EHR – any qualified EHR that is certified according to criteria set by the National Coordinator in consultation with the Director of the National Institute of Standards and Technology

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