Part B Insider (Multispecialty) Coding Alert

ELECTRONIC HEALTH RECORDS: Act Fast to Apply to Medicare's Groundbreaking EHR Demonstration Project

The deadline looms for this P4P program

CMS is so hopeful that more health practices will adopt electronic health records that it would like to pay bonuses to a select few practices that use them correctly.

CMS launched its new Electronic Health Records (EHR) Demonstra-tion this year to show practices that EHRs can help them improve their healthcare delivery quality by streamlining their systems.

To make that dream a reality, CMS will oversee a five-year project that will compare 1,200 demonstration practices to 1,200 control practices to measure each group's performance on selected criteria.

CMS outlined the program's finer points during an April 23 open door forum, during which **Jodi Black**, a project officer with CMS's EHR demo group, explained the process.

Over a five-year period, the EHR demonstration project will include two implementation phases (each consisting of five years), and will take place at up to 12 locations (states or regions). CMS will recruit approximately 2,400 total practices (1,200 demonstration practices and 1,200 control practices).

- If you would like to apply to be considered as one of the 12 participating communities, keep in mind that the EHR demo program applies to small- to medium-sized practices with up to 20 practitioners who can bill Medicare. Medicare is seeking primary care practices, such as internal medicine, family practice and gerontology specialties, Black noted.

EHR measures: The program's pay-for-performance aspect won't kick in immediately, but by the end of the second year, the practices enrolled will be expected to use the EHR to perform the following four core functionalities: clinical documentation of patient visits or pro-gress notes, ordering of lab/diagnostic tests, recording test results, and recording prescriptions.

Clarification: -We don't mean that they necessarily need to have online ordering or online receipt of results directly from the lab, but it will require the documentation into the electronic health record that those services were ordered, what the results were, and that a particular prescription has been ordered,- Black said on the call. Those practices that use the EHR in a more sophisticated way, such as online interconnectivity with a lab, will score better and earn a higher incentive.

The study will include two separate incentive payments, the first for performance on the office systems survey (OSS), and the other on quality incentive payments for reporting/ performance on 26 clinical quality measures related to care for diabetes, coronary heart failure, coronary artery disease and preventive services. Practices won't be reporting on these quality measures until after the second year, giving participating practices time to understand the measures and how to report them. But in years three through five, the program will be a true pay-for-performance model, with payments tied to scores.

Practices can use the money that they earn through this incentive on anything they please, Black noted.

Want to be selected? At a minimum, the communities in contention for selection must not be participating in any competing or conflicting CMS demos (listed on the CMS Web site, www.cms.gov), and the geographic area must include

a sufficient number of practices, said **Mike Nelson,** director of CMS's National EHR Initiative, on the call. Since CMS will be seeking at least 200 primary care practices in each community, you-ll need at least that many in your region to be considered. In addition, CMS will seek a collaborative community and will look at the extent to which the community's other health insurers are likely to adopt similar programs.

CMS would consider your community -desirable- if other local programs might use the CMS measures for incentive programs, the community is part of the National Health Information Network site, the geographic area includes underserved populations, and the area has a mix of rural and urban populations, Nelson said.

The application deadline for practices interested is May 12, and the 12 communities that CMS selects will be announced in June. If you are interested in applying for the program or you want to get more information, visit www.cms.hhs.gov/DemoProjectsEvalRpts/downloads/2008_Electronic_Health_Records_Demonstration.pdf