# Health Information Compliance Alert

## Case Study: Feds Highlight Industry Issues With Patient Matching

**GAO research suggests that lack of federal standards may be to blame.**

The use of EHRs allows for more efficient and informed care. However, a new report from the **Government Accountability Office** (GAO) suggests that modifications are necessary to improve the software - especially on the part of federal policymakers - before EHRs can truly assist providers with patient matching and coordinated care.

### What Is Patient Matching?

One of the most important things that intuitive EHRs can do is help practices complete a patient's health history. Patient matching refers to the sharing of health records between two or more providers using health IT and EHRs in a health information exchange (HIE). This clinical coordination uses demographic data to cross-check for patient inconsistencies and updates. Overall, patient matching ensures more streamlined, informed care.

"From an interoperability perspective, the ability to complete patient matching efficiently, accurately, and at scale has long been identified as a key element of the nation's health IT infrastructure," says **Steven Posnack, MS, MHS,** executive director of the **Office of Technology at the HHS Office of the National Coordinator for Health Information Technology** (ONC) in a blog post on the subject. "Patient matching is almost universally needed to enable the interoperability of health data for all kinds of purposes."

Posnack adds, "Patient matching also requires careful consideration with respect to its effect on patient safety and administrative costs."

### Here's the Problem

Patient matching has the potential to really improve healthcare and offer more options to both providers and patients, but EHRs aren't uniform and HIEs suffer because of this shortcoming, according to a new GAO study.

**Background:** A provision in the 21st Century Cures Act mandated the GAO report on patient matching, particularly because stakeholders found challenges with these records' exchanges and aimed to improve them, said the study. "GAO and others have reported that accurately matching patient health records is a barrier to health information exchange [HIE] and that inaccurately matched records can adversely affect patient safety or privacy," the report noted. The GAO conducted and compiled its results from an amalgam of sources, which included interviews with 37 stakeholders, ONC research, industry organizations' input, vendors' thoughts, and HHS' spin on health IT.

**Conundrum:** Providers rely heavily on their EHRs to "automatically match records based on the records' demographic information when receiving medical records electronically," the researchers discovered. However, even though health IT is regulated, there are a plethora of vendors and software options with different tools and offerings. This leads to clunky transfers of information from programs that don't match up, leaving much room for error when practices and hospitals try to confirm patients' data - and that's a problem.

"Inaccurate, incomplete, or inconsistently formatted demographic information in patients' records can pose challenges to accurate matching," said stakeholders. Manual input still happens when systems break down, clerical errors occur, and even stray dots, dashes, and hyphens impede successful HIEs.

**Another factor:** Not all providers use EHRs. According to ONC's "Quick Stats," about 86 percent of office-based physicians utilize EHRs with around 80 percent of that group using Certified EHR Technology (CEHRT), indicated the online resource. Hospitals have adopted at higher rates with 93 percent of rural hospitals using EHRs while small to large hospitals adopt at rates between 95 to 99 percent, ONC said.

See the ONC "Quick Stats" at [https://dashboard.healthit.gov/quickstats/quickstats.php](https://dashboard.healthit.gov/quickstats/quickstats.php).

**Here's GAO's Answer**

In addition to suggestions for stronger federal standards and vendor alignment, the GAO report presents stakeholders' findings and efforts to improve patient matching.

Here are some of the things stakeholders and the feds are doing to improve patient matching, according to the GAO report:

- Some stakeholders have implemented staff training on EHR input and patient data recording.
- Stakeholders believe that "common standards" would greatly impact the way demographic data is entered into EHRs. Suggestions on how to do this varied from "public-private" partnerships to stronger federal requirements for certifying EHRs.

**Endpoint:** The struggle with patient matching will likely continue, even with federal updates and implementations, stakeholders cautioned.

**Note:** Review the GAO report at [www.gao.gov/assets/700/696425.pdf](www.gao.gov/assets/700/696425.pdf).