



***“Beyond e-prescribing:
Pharmacists' Opportunities to
Improve Patient Care through
HIT and Health Information
Exchange***

MPhA Midwinter Conference

January 24, 2010

Today's Objectives

- Describe how national HIT priorities are set and the most promising opportunities for pharmacists to “connect” to them.
- Define common HIT terms.
- Provide an overview of federal programs created through the Recovery Act (stimulus bill/HITECH provisions) to accelerate the adoption and “meaningful use” of health information technology.
- Describe Minnesota efforts to enable health information exchange and review opportunities for pharmacists to get involved.

Today's Objectives

- Understand opportunities for pharmacists to improve medication use when enabled by HIT interoperability and patient-specific electronic medical record (EMR) access.
- Describe specific examples of patient information available in EMR's and how and where it a pharmacist can be use this information to improve medication outcomes, including medication therapy management (MTM), care transition, medication reconciliation and monitoring.
- Understand increased privacy protection in light of increased adoption of electronic health records (EHRs) including:
 - changes in HIPAA under HITECH focusing on changes for business associate agreements, new breach notification requirements and increased federal enforcement activity.
 - the Minnesota Health Records Act of 2007 and the role of a record locator service to encourage electronic exchange within the state.
 - importance of a robust compliance program to manage privacy requirements.

Your Colleagues

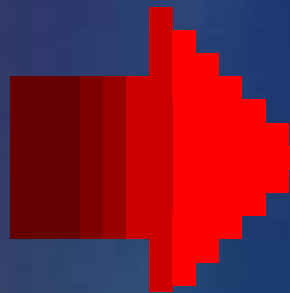
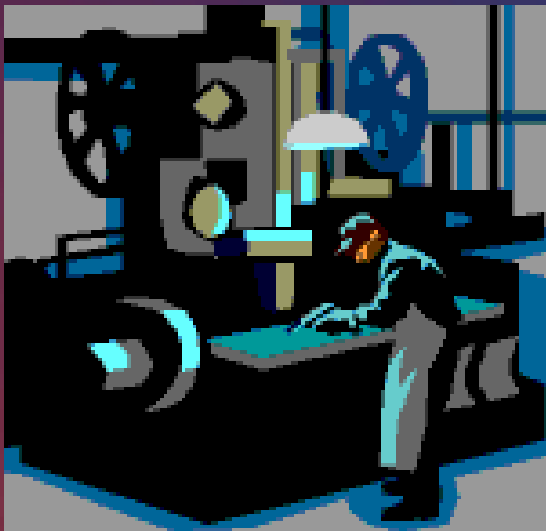
- Marsha K. Millonig, BS Pharm, MBA
- Michael A Hawton, Project Manager, MN e-Health Initiative
- Steve Simenson, BPharm, FAPhA, FACA, President of Goodrich Pharmacies
- Kari M. Bomash, JD, Associate, Dorsey and Whitney LLP

10,000 feet to ground level in about 60 minutes....

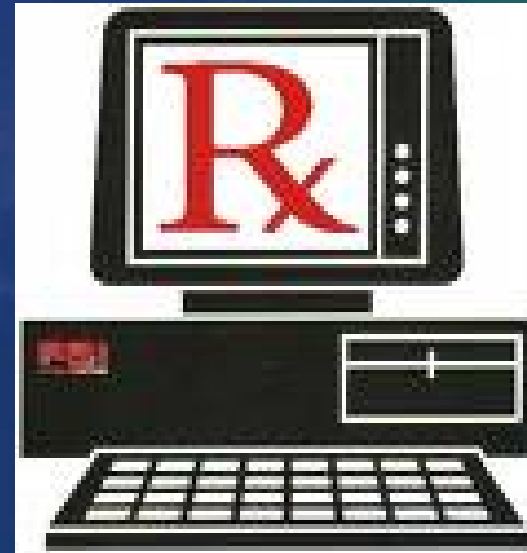


In our professional careers...

- ...we have witnessed the transition from the industrial age to the information age.



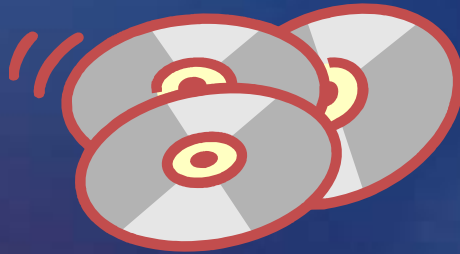
From typewriters to computers



Moore's Law...Gordon Moore 1965

- Since the invention of the integrated circuit in 1958, the number of transistors that can be placed inexpensively on an integrated circuit has increased exponentially, doubling approximately every two years.
- Almost every measure of the capabilities of digital electronic devices is strongly linked to Moore's law: processing speed, memory capacity, even the number and size of pixels in digital cameras.

Moore's law in real life...



- “If we had similar progress in the automotive technology, today you could buy a Lexus for \$2. It would travel at the speed of sound, and go about 600 miles on a thimble of gas.”

–John Naisbett



It can be exhausting!



The American Recovery and Reinvestment Act of 2009

- Invests \$ 49 Billion to expand the use of HIT
- It is estimated that 90% adoption will result in a savings to the health care system of 10 –15%
- Reimbursement for HIT implementation will be based upon Meaningful Use
 - Use of government certified technology
 - Use in ways that promote safety and quality
 - Consistent reporting of data from the practice
- Full adoption of Electronic Health Records by physicians is currently estimated at 16%
- HHS goal for use of Electronic Health Records by physicians in 2012 is 40%

The American Recovery and Reinvestment Act of 2009

- Goal –utilization of electronic health record for each person in the US by 2014
- HIT Adoption
 - Incentives to individual physician practices and hospitals
- Infrastructure
 - Policy
 - Standardization
 - Criteria for approved EHR and HIT Systems
- Research and Development
- Integration of information technology into clinical education
 - Integrate HIT with clinical education
 - Financial assistance to establish or expand medical informatics
- Consumer Health Information
- Strengthen Federal privacy and security laws

Electronic Medical Record “Carrot and the Stick”

Adoption Yr	Year 1 Incentive	Year 2 Incentive	Year 3 Incentive	Year 4 Incentive	Year 5 Incentive	Payment Reduction
2011-12	\$ 18,000	\$ 12,000	\$ 8,000	\$ 4,000	\$ 2,000	-
2013	\$ 15,000	\$ 12,000	\$ 8,000	\$ 4,000	-	-
2014	\$ 15,000	\$ 12,000	\$ 8,000	-	-	-
2015	-	-	-	-	-	1%
2016	-	-	-	-	-	2%
2017	-	-	-	-	-	3%
2018	-	-	-	-	-	3- 4%
>2019	-	-	-	-	-	3 – 5%