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HITPC Requests Public Comment for Stage 3 Meaningful Use

By Amy Joseph

Following on the heels of the final Stage 2 meaningful use regulations (see our commentary at http://health-law.com/wp-content/uploads/2012/09/EHR_Stage-2-Final_Rule-Final.pdf) the Health Information Technology Policy Committee (HITPC), a federal advisory committee that advises the U.S. Department of Health and Human Services (HHS), recently released its preliminary set of recommendations for Stage 3 meaningful use of electronic health records (EHRs). The recommendations address three main areas: meaningful use objectives and measures, quality measures, and privacy and security. Overall, HITPC recommends that “stage 3 is the time to begin to transition from a setting-specific focus to a collaborative, patient- and family-centric approach.”

Many of the recommendations tend to build on the Stage 2 objectives, by either increasing the threshold percentage to show meaningful use or by changing what was a menu objective in Stage 2 to a core objective in Stage 3. For example, one of the Stage 2 menu measures for eligible hospitals is that hospital labs send structured electronic lab results to the ordering provider for more than 20 percent of electronic lab orders received. For Stage 3, HITPC recommends that the threshold be raised, so that a hospital lab must send structured electronic clinical lab results to the ordering provider for more than 80 percent of the electronic lab orders received. As another example, one of the Stage 2 menu objectives for eligible hospitals is to record whether a patient who is 65 years or older has an advance directive. For Stage 3, HITPC recommends that this be a core objective.

Some of the recommendations are new for Stage 3, and many of those recommendations focus on increased patient engagement. For example, HITPC recommends a new Stage 3 objective that would provide patients with the ability to request an amendment to their record online. HITPC also recommends a new menu item, which would provide 10 percent of patients with the ability to submit patient-generated health information. Such patient-generated health information could address topics such as patient experience, patient created health goals, and pre-visit information.

HITPC is currently seeking public comment on its recommendations, and requests feedback on a number of specific topics. For example, HITPC is interested in gathering information about permitting providers to create a locally developed clinical quality measure as a menu item in lieu of an existing measure, to partially fulfill a provider’s meaningful use requirements. As one idea, HITPC states that the clinical quality measure could address high priority conditions for a provider’s local patient population. The concept is that such an arrangement could be mutually beneficial, because the provider can report on an issue that it believes is important, and CMS can

learn from these innovative clinical quality measures as it continues to develop meaningful use requirements. HITPC is interested in receiving feedback on the desirability and feasibility of this option.

As another example, HITPC is seeking comments on what security requirements should be addressed in Stage 3. In particular, HITPC is considering requiring providers to attest to implementing the HIPAA Security Rule provisions regarding workforce training and sending periodic security reminders. HITPC notes that this is one of the top 5 areas of HIPAA Security Rule noncompliance identified by the HHS Office for Civil Rights.

Interestingly, HITPC also requests comments about allowing more flexibility for providers who achieve a close percentage of the various meaningful use requirements, but do not quite meet all the criteria to demonstrate meaningful use. HITPC seeks feedback as to whether such flexibility can be constructed without harming the overall goals of the EHR Incentive Program.

Comments will be accepted through January 14, 2013. The complete recommendations, along with instructions for submitting comments, is available here:

http://www.healthit.gov/sites/default/files/hitpc_stage3_rfc_final.pdf.

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