

Medi-Span® Clinical

Accelerating Meaningful Use Compliance

Improving quality, reducing costs and increasing access to healthcare through the meaningful use of health IT was the driving force behind the 2009 passage of the Health Information Technology for Economic and Clinical Health (HITECH) Act.

Under HITECH, hospitals and other eligible provider organizations that utilize certified technologies, in particular electronic health record (EHR) systems, and meet specific goals and objectives established by the Centers for Medicare and Medicaid Services (CMS) and the Office of the National Coordinator of Health Information Technology (ONC) will be eligible for a share of billions of dollars in incentive payments over the next decade.

It is a significant financial carrot, one that starts with a base payment to hospitals of \$2 million under the Medicare incentive program. Potential payments increase based on a formula that includes the number of annual inpatient discharges over 1,149 (up to 23,000, for a total base of \$6.37 million), Medicare share fraction and transition fraction. Hospitals that also qualify under the Medicaid incentive program can potentially double their incentive payments.

Equally significant is the financial stick that takes effect in 2015. At that time, hospitals that fail to demonstrate

meaningful use of health IT will not be eligible to receive incentive payments. Further, they will be subject to downward adjustments of their Medicare Inpatient Prospective Payment System (IPPS) rate.

Specifically, eligible hospitals that are not meaningful users by 2015 will be subject to a reduction in their IPPS standardized amount, which will apply to three-fourths of the percentage increase otherwise applicable. The proposed reductions are 33.3 percent in 2015, 66.6 percent in 2016, and 100 percent in 2017. The IPPS applicable percentage increase may also be reduced for a hospital's failure to submit data on quality measures in the amount of one-fourth of the applicable market basket update.

To demonstrate meaningful use, hospitals must meet specific criteria established by CMS and rolled out in three stages, each of which will require higher levels of adoption and utilization. Stage one criteria were issued in July 2010.

STAGE ONE CRITERIA

The final rules for stage one of meaningful use are divided into two sections:

- Core objectives that constitute an essential starting point for meaningful use of EHRs
- A menu from which providers can select additional tasks to implement in the first two years

Core objectives encompass the basic functions that enable EHRs to support improved healthcare, including the tasks essential to creating any medical record. One such task is entering key patient data, including vital signs and demographics, medications and allergies, problem lists of current and active diagnoses and smoking status.

Other core objectives focus on the use of clinical decision support tools for improved decision-making and avoidance of preventable errors. Others focus on electronic order entry, with an initial emphasis on prescriptions, and the provision of electronic versions of health information to patients.

The set of additional tasks, from which providers can choose any five to implement by 2012, is designed to give providers "latitude to pick their own path toward full EHR implementation and meaningful use." The menu includes the ability to perform drug-formulary checks, incorporate clinical laboratory results into EHRs, provide care reminders to patients, identify and provide patient education resources and employ EHRs to support care transitions.

To efficiently achieve stage one criteria, most provider organizations must deploy both an EHR system and

complementary software, such as drug information and drug interaction databases and medication decision support solutions.

MEDI-SPAN® SOLUTIONS

Medi-Span from Wolters Kluwer Health offers authoritative drug information in a variety of formats, including clinical decision support and disease suite modules, application programming interfaces (APIs) and standalone software applications. Specific options include:

- Drug information databases: Up-to-date and comprehensive, Medi-Span drug databases include product information and pricing, adverse effects, dosing and administration, indications, allergens, duplicate therapy, conflicts, medication order management, precautions, RxNorm cross-references, warning labels and patient education.
- API tools: Designed to help ensure interoperability, Medi-Span API tools include Drug Image and Imprint™, Drug Information Bridge™, Integrated Drug Facts and Comparisons™, Integrated MedFacts Module™ and Trissel's IV-Chek™.
- Price Rx®: This comprehensive, web-based drug-price analysis and reference information is easy to use and includes powerful analytical, formulary notification and reporting tools to drive greater user efficiency and productivity.
- Medi-Span® Clinical: This modular suite of APIs that work together from a common platform deliver trusted, actionable drug information directly into the EHR, including decision support functionality that

helps reduce alert-fatigue while meeting the industry's heightened expectations and changing regulatory requirements.

Though all Medi-Span products help achieve the overarching goals of HITECH, Medi-Span Clinical in particular delivers the content and features that help hospitals and provider organizations meet current and future meaningful use criteria, such as drug-drug and drug-allergy interaction checking. A next-generation product line, Medi-Span Clinical also delivers the functionality EHR vendors need to meet certification criteria, including those that are anticipated to be included in future stages, such as greater user control over alert and reminder triggers and required actions.

MEDI-SPAN CLINICAL AND MEANINGFUL USE

Medi-Span Clinical is a robust platform that delivers functionality, interoperability and medication-related clinical decision support that, when integrated with EHRs, enables hospitals to more efficiently and effectively meet several of the stage one core and additional criteria. Specifically, it delivers medication-related clinical decision support modules that enable hospitals to implement required drug-drug and drug-allergy interaction checks and warning alerts, including the following:

- Medi-Span Clinical Drug Interactions™ API: Enables drug-to-drug, drug-to-food and drug-to-alcohol interaction checks. Filter parameters are available for Severity, Documentation and Management Codes, and each interaction is tagged with age and gender specificity as applicable.

- **Medi-Span Clinical Drug Allergy™ API:** Enables identification of a possible allergy or of cross-sensitivity between a drug and allergen(s) noted on a patient profile. This includes the ability to check active and inactive ingredients for patient allergies and to differentiate the allergy alert by screening type. Age-specific allergy screening is available for allergic reactions that are seen more commonly in pediatric patients.

Both APIs feature the ability to turn off an individual interaction, affording greater user control over alerts. They also feature fully referenced monographs and warnings and provide additional information in XML/HTML for greater formatting flexibility.

Medi-Span Clinical also helps address the requirement to implement one clinical decision support rule that is relevant to a high-priority clinical or hospital condition. For example, it can support implementation of a rule based on data elements included in the patient's medication list, such as duplicate therapy alerts (Medi-Span Clinical Duplicate Therapy™ API).

Finally, because Medi-Span Clinical was developed on a flexible platform, it can expand as necessary to ensure providers meet and exceed future meaningful use requirements with minimal impact on end users.

CERTIFICATION CRITERIA

Any EHR technologies deployed under the HITECH program must be certified by an ONC-authorized testing and certification body. Certification signifies that an EHR technology has the capabilities necessary to support efforts to meet the goals and objectives of meaningful use.

Specific requirements address content exchange standards, including technical standards for patient care summaries, public health reporting, syndromic surveillance and immunizations, electronic prescribing, and so forth. They also address vocabulary standards, including coding of lab test results, immunizations, procedures and diagnoses, as well as privacy and security standards, such as acceptable encryption and decryption methods.

Finally, certification requirements set forth criteria for complete EHRs and EHR modules, including functions like drug-formulary checks, smoking status and patient-specific education.

MEDI-SPAN AND CERTIFICATION

Though Medi-Span Clinical is not currently subject to meaningful use certification, the requirements are continuously monitored to ensure that its content and functionality supports certification success. Should requirements change, Medi-Span Clinical is positioned to pursue certification through the proper authority.

For example, it accepts multiple industry standard codes for drugs and vaccines (e.g., RxNorm, CVX codes), conditions (e.g., ICD-9, SNOMED CT®), and drug and food allergies (e.g., RxNorm, FDA UNII). These codes are then translated into equivalent proprietary Medi-Span codes for use in clinical screening.

This flexible architecture enables quick response to any change in certification requirements or technical advances.

LOOKING AHEAD

Stage one is just the beginning. CMS has repeatedly indicated its intentions to set the bar for meaningful use of health IT higher with each subsequent stage of compliance requirements to ensure maximum impact. Thus, meaningful use criteria will evolve over time, becoming more comprehensive and making the overarching goals of higher-quality, lower-cost healthcare more complicated to achieve.

As a next-generation medication decision support platform, Medi-Span Clinical is well-positioned to ensure that EHR vendors and provider organizations alike are able to evolve medication-related rules and alert features and functionality in conjunction with those criteria. Doing so helps ensure ongoing compliance, maximizes incentive payments and eliminates the potential for financial penalties in the future.

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