



# Demystifying the Purchase of an **EHR**

By Michael J. Mirro, M.D., F.A.C.C.  
and James E. Tcheng, M.D., F.A.C.C.



Mirro



Tcheng

# C

onfused about what you should be looking for in an electronic health record (EHR) for your cardiology practice? Do you want to take advantage of the incentive payments offered by the federal government, but are unsure where to begin?

The ACC Health Information Technology (IT) Committee, formerly known as the Informatics Committee, has compiled a list of features to look for when purchasing an EHR to help you begin your search. The list is not exhaustive, in part because the health IT field is changing so rapidly and some of the functionality listed below will change right along with it. In addition, some functionality will not actually be available until 2010. Make sure that you establish a timeline and commitment in your EHR purchase contract that the vendor will provide the missing functionality once it is established.

Also, we recommend you “test drive” any EHR you’re considering. Only you will know if you like how it works and

displays information. These factors, called usability and user interface, usually heavily influence a buyer’s selection, so you’ll want to test them.

The ACC does not recommend specific EHR programs. Choosing the right EHR depends on what a practice needs, and the practice should determine its needs based on an in-depth assessment.

Although the Health IT Committee cannot help with individual practices’ EHR selection, we do make a variety of other resources available at [www.acc.org/healthIT](http://www.acc.org/healthIT), and we can provide you with this checklist of important recommendations.



## CCHIT Certification

The Certification Commission for Health Information Technology (CCHIT), an independent certifying body, has developed a set of testing criteria for ambulatory EHRs that focus on the functionalities needed for the office setting. The ACC recommends that members purchase EHRs that have received Ambulatory EHR Certification. Members should also look for EHRs that have CCHIT’s Cardiovascular Medicine certification. Be sure that any EHR you are considering is certified for the most recent year. EHRs certified for previous years may not include many features that are necessary or helpful to run your practice efficiently and in compliance with regulations. Current certification is good for two years.

Why should you purchase a CCHIT-certified EHR? The benefit is that you know the application will meet an exhaustive list of criteria for the most important capabilities. The CCHIT ambulatory certification process focuses on EHR functionality that is both required to meet federal program objectives and desired in the office setting.

Its testing requires 100 percent compliance in the areas of functionality, interoperability, security and privacy. CCHIT certification does not include usability testing at present; however, CCHIT plans to add the feature soon.

One other perk of purchasing CCHIT-certified exists. It is anticipated that physicians will be required to use

CCHIT-certified EHRs to qualify for the federal EHR incentive program, created under the American Recovery and Reinvestment Act (ARRA). For this reason, you must insist that your vendor commits to maintaining up-to-date CCHIT-certification for your EHR.



## Use an Application Service Provider (ASP) solution

Unless you have very specific needs, you should select a vendor that provides the EHR through an application service provider (ASP). Web-based e-mail solutions provided by Yahoo!, Gmail, and Hotmail follow the ASP model — all you need is a Web browser and a connection to the Internet. An EHR hosted through an ASP takes care of all IT issues related to the operation of the EHR, including hosting the servers and maintaining the software. With an ASP, there is typically a nominal start-up charge as well as monthly maintenance fees, which are determined by usage.

The alternative — the traditional “client-server” solution — should be considered only if you are in a large practice with more than 12 – 15 cardiologists. The client-server approach requires substantial financial outlay as you host your own hardware, must purchase the software and will need IT staff to maintain, update and troubleshoot the system.



*continued on next page*



## 3 Integrated e-Prescribing

E-Prescribing is a foundational component of any EHR solution. Any EHR that is CCHIT-certified will contain an e-prescribing feature, including bidirectional electronic transmission of prescription data through SureScripts/RxHub. Also, it will be compliant with the Medicare Modernization Act of 2003 Part D prescription drug program, which includes information on plan formularies, beneficiary enrollment and uniform standards for information sharing.



## 4 Compliance with IHE profiles specific to your practice

The importance of data exchange and interoperability among systems cannot be overstated, which is why members looking for an EHR should find a vendor that actively participates in the Integrating the Healthcare Enterprise (IHE) survey and certification process. IHE is a non-profit organization that works to define and demonstrate information exchange between devices and health IT systems. There are a number of profiles applicable to typical cardiology workflows, and vendors that offer these profiles have a proven commitment to interoperability. IHE profiles can be found at [www.ihe.net](http://www.ihe.net).



## 5 Compliance with HIPAA

As of January 2009, protected health information is no longer included in the Health Information Portability and Accountability Act (HIPAA) exemptions for Treatment, Payment or Operations. HIPAA is central to U.S. legal requirements regarding patient privacy, system security and transaction processing. Your EHR should allow you to create an audit trail for your use of protected health information to comply with HIPAA.



## 6 Eligibility for ARRA stimulus funds

Full use of the EHR should allow the practice to be eligible to receive the financial incentives created by ARRA for EHR adoption. This incentive program enables physicians to receive up to \$44,000 per physician if their EHR is implemented by 2011. To be eligible for incentive payments under ARRA, physicians will need to use a certified EHR and demonstrate that they use their EHR to reach quality and technical goals that will become progressively more stringent. Physicians must be able to show that their EHR meets specific certification requirements to validate that they are using certain health IT functions and exchanging information in approved formats. Therefore, you should require that your EHR purchase contract include a guarantee that the vendor will make the changes necessary to qualify for financial incentives under the ARRA program through 2015.

### What Else Is on Your Wish List?

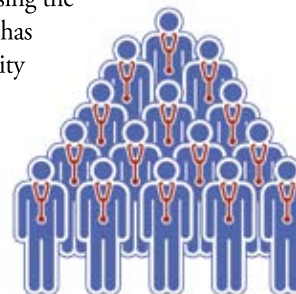
Beyond the checklist, what else would you like your EHR to do?

- Interface with dictation vendors and/or speech recognition software?
- Create ad hoc reports at both the physician and practice levels for practice management, quality improvement and compliance?
- Allow for remote secure access 24 hours a day?
- Have cardiology-specific templates for physical examinations, data review and consultations?
- Generate high-quality professional consultation letters from within the EHR?
- Have the ability to scan documents and reports?
- Be capable of autofaxing documents?

## 7 Minimum of 100 other practices actively using the EHR

The EHR should have an established presence in the marketplace, with a minimum of 100 active physician offices using the

product. This helps ensure that the vendor has demonstrated corporate and product viability and is large enough to provide customer support and business continuity at a level adequate for ACC members. Also, ask the vendor for the sizes and specialties of the physician practices cited as references. Are they large groups, small groups, exclusively cardiology or mixed specialty groups?





## 8 Integration with the practice management system

The ability to exchange data with your office practice management system is essential for successful EHR implementation. The simplest approach is to use a single vendor for both the practice management and EHR systems. An alternative is to have systems from separate vendors that share the requisite data seamlessly.

## 9 Owning the EHR data

Be sure that the EHR gives your practice sole legal ownership over your data. Ownership allows you to export data from one EHR into another EHR, should you decide to change vendors. The export program should be in a generalized format such as CDA (clinical data architecture) that can be imported into another vendor's product. The EHR also must be able to export individual patient data reports into both paper and electronic formats for patient requests or departures.



## 10 Ancillary system connectivity

Look for an EHR that interfaces with all the different ancillary systems, such as laboratory vendors (e.g., LabCorp, Quest), ECG systems, PACs systems and office practice management systems. You'll want an EHR that can automatically import information from these different systems into the EHR. Make sure the ancillary systems with which your practice wants to connect are supported and included in the software contract. Also, look for EHRs that provide interoperability plug-ins for laboratories and clinical messaging, etc.

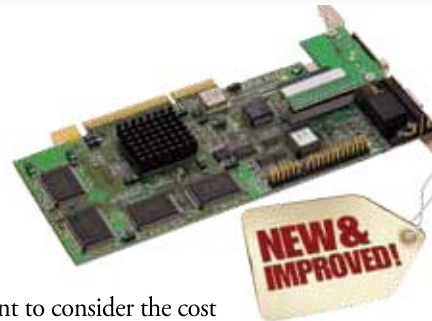


## Additional questions to ask an EHR vendor:

- Does your current or future EHR support "automatic" reporting for the Physician Quality Reporting Initiative (PQRI) without requiring a specific action by the provider? Recently proposed rules for 2010 PQRI reporting offer physicians the opportunity to report through their EHRs, and federal officials expect to propose additional opportunities for EHR-reporting in the future.
- When you access the EHR from a remote site or public computer, how does the vendor ensure security?
- If you have a local or regional health information organization or exchange with which you want to share patient information, is the EHR interoperable?

## 11 EHR upgrades

Know whether the vendor provides free upgrades needed because of changes in registry reporting and government programs, or if you will have to purchase these required upgrades. You may want to consider the cost and give greater consideration to vendors that include the upgrades.



## 12 Support

Make sure the EHR vendor's support hours match your practice's hours of operation. However, consider that after-hours technical support may be more beneficial than standard business hours.



## 13 Quality Reporting

An EHR should be able to export quality metrics from the EHR to a registry or data repository, such as clinical quality performance measures like beta-blocker use in congestive heart failure.



**Mirro and Tchong are Chair and Vice Chair, respectively, of the Health IT committee.**

**The ACC would like to acknowledge the efforts of the entire Health IT Committee in the drafting this article, which is based on the document, "ACC Electronic Health Record Optimal Functional Requirements for Cardiologists," written by the Committee. All of the Committee's documents can be found at [www.acc.org/healthit](http://www.acc.org/healthit).**