Meaningful Use: Expecting the Unexpected

The road to Meaningful Use is lined with uncertainties.

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Today's Environment

Embarking on any large, complex initiative is bound to present healthcare organizations with some surprises along the way. But the Meaningful Use initiative is especially rife with uncertainty. The federal government continues to clarify its criteria for compliance, which will come into effect in three stages over the next five years. What's more, no one knows exactly how the government will interpret its criteria, or what it is going to audit to determine compliance.

Our Perspective

How to proceed in the midst of ambiguity? Based on our work with a number of healthcare providers in the vanguard of achieving Meaningful Use, here are some challenges your organization may encounter along the way—and how to equip yourself for a smoother journey:

Meaningful Use is more than an IT project—and it takes more than the IT organization to achieve it. Yes, IT is key. But Meaningful Use is a broader operations initiative that calls for C-level involvement across your organization. Having passionate executive sponsors can help evangelize the long-term value of Meaningful Use beyond the government’s financial incentives, leading to better clinical outcomes, more informed and engaged patients, and new delivery models that move toward accountable care. That said, you’ll also want clinicians to champion this initiative; at the end of the day, they own Meaningful Use of the EHR through their documentation and how they integrate it into patient care.

Interpretation of “requirements” seems subjective: What is a transition of care? What warrants a patient reminder? You’ll have plenty of questions—and few black-and-white answers. As you interpret the ambiguities in Meaningful Use, ask yourself: “If our organization was subject to an audit, could we prove compliance and confidently explain our interpretation of the ruling?” Much of our work in Meaningful Use involves helping provider organizations think through and formulate clear interpretations that they can deliver on and demonstrate by keeping an audit trail.

The way that data are captured and reported can make the difference between compliance and non-compliance. Don’t assume that a measure is satisfied based simply on face value. The devil is in the details, or rather, the documentation. Although you may be documenting, the data may not be captured in a reportable field. Take the time to review each measure, do the due diligence, validate workflow against the measure requirement, interpret deviations, and agree on interpretations at a leadership level.

Your IT system vendors may not be able to do as much to help you prepare as you expected. Clarify what you can and can’t expect from your IT vendors, push them to deliver on a schedule that meets your needs—and know that the responsibility for compliance ultimately lies within.
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If your plans and communications about incentive dollars are unclear, you may not drive the behavior change you hope to achieve. Here’s a key area where you can establish certainty now. Think through your organization’s strategy for incentive dollars. Will you reinvest? Will clinicians get some of the dollars? How can you use these incentives to move your organization to compliance? Develop a clear strategy that helps everyone understand what’s in it for them. Then get the word out.

The potential for significant hidden costs may lurk in software and infrastructure upgrades, workflow redesign, staff training, and additional equipment. Treat Meaningful Use as you would any other large strategic initiative. It cannot simply be absorbed as an operational effort; it is truly a complex, multi-year program. Evaluate it against your entire portfolio of initiatives and priorities to determine whether you’ve got the people and infrastructure to make it happen while running the business and delivering on other projects. Look to your EHR vendor for recommendations. You’ll likely find that Meaningful Use takes more time and merits more resources than you ever anticipated. If nothing else, establish an “expect the unexpected” contingency budget.

Organizations that extend their EHRs have responsibilities that they may not have accounted for. Make sure that roles and responsibilities are clearly defined, and that partnerships and financial obligations are well established. For example: Who owns the final say as to when reports are clean and ready for attestation? Who is responsible for education and training? Who owns attestation and submission? Clear responsibilities are crucial when it comes to reporting.

Meeting the requirements for “certified EHR technology” may be more demanding than you expect. EHR products are certified by version, and upgrades may be required. Make sure you understand how your vendor intends to maintain its certification level and impact to customers.

Achieving Meaningful Use may take more time and effort than you anticipated. Depending on the magnitude of change in your organization, workflow adoption related to Meaningful Use will take at least 3-6 months. Make sure your efforts are front-loaded to identify compliance gaps, workflow changes, education/training needs and rollout requirements. You may find you need additional headcount to support this work.

The Bottom Line

Meaningful Use is not a discrete project that is over and gone when you achieve compliance—and that’s a good thing. Healthcare organizations that see Meaningful Use as the end in itself miss out on the greater opportunity to use it to transform their delivery models and distinguish themselves in the marketplace. Achieving Meaningful Use alone won’t give you a competitive advantage; using it as a driver to achieve meaningful results will.

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