

Meaningful Use

Back in 2009, President George W. Bush signed into law the use of electronic health record systems (EHR) in which to improve patient care in the United States. This program provides incentive payments of eligible professionals, hospitals, and clinics if they adopt, implement, or upgrade their electronic health systems within the required time period.

Information about the EHR Incentive Program is located at <http://www.cms.gov/regulations-and-guidance/legislation/EHRincentiveprograms/educationalmaterials.html>

Last April, Dana Aragon, ASRT Director of Governance and Affiliated Relations attended the SDSRT annual meeting and informed the membership about meaningful use and how it would affect South Dakota as a non licensure state. Some of the key points discussed are in the following paragraphs.

Computerized Physician Order Entry (CPOE) allows direct entry of medical orders and instructions for the treatment of patients by a medical practitioner or licensed professional. Determination of who is “licensed” is up to the Medicare Administrative Contractor (Centers for Medicare Services) paying the reimbursement claim (bill) for the service received by the patient.

The orders are then communicated through a computer network system via the electronic health record (EHR) to medical staff or other departments who are responsible for fulfilling an order, which includes radiology. Hospital and clinic Medicare reimbursement is determined by participation in CPOE and measures the number of successful orders entered via computer. As I previously mentioned Medicare incentive payments for the “meaningful use” of EHR went into effect in 2009. The Medicare reimbursement adjustment for facilities not meeting the requirements for meaningful use will start in 2015.

- The meaningful use core measure for computerized provider order entry indicates that electronic orders for radiology services must be entered by “any licensed healthcare professionals and credentialed medical assistants.”
- States that have set their technologist credentialing standards through equipment regulators or states that use terms synonymous with “licensed,” “accredited,” or “certified” may not meet EHR Incentive Program requirements for the documentation of verbal radiology orders in the patient’s record.

Not meeting Medicare’s requirements for at least 30% of radiology orders to be entered into an electronic health record by 2015, facilities can see a 1% per year reduction in reimbursement rates, up to a maximum of 5%

What does this mean to technologists working in South Dakota?

- ARRT certification is “voluntary” in states where there is no licensure requirements mandating certification, technologists are not being allowed by the Medicare Administrative Contractors to enter information into the EHR or take verbal orders and document them in facilities following the meaningful use criteria. Currently, only “licensed health care professionals” and certified medical assistants meet the criteria in the Computerized Provider Order Entry (CPOE) provision.
- If the physician orders an exam and Radiology needs to modify or edit the order, IE: the patient has abnormal renal functions and contrast cannot be administered safely, this affects the counting of meaningful use unless the order is changed by the ordering physician or licensed professional.
- If the most recent edit of the radiology order was created by a non-licensed professional, in which South Dakota is classified as a non-licensed state for R.T.’s, the edit would not be included in the numerator.
- This would lower compliance with CPOE for Radiology orders. Threshold expectations will increase making it more difficult for R.T.’s modifying or editing orders. This would put the facility at risk to not receive the premium reimbursement from CMS which could result in the loss of millions of dollars.

What can Technologists in South Dakota do to address this issue?

Advocate for our profession as one united voice.

After the presentation and discussion, SDSRT voted to review the current S.D. Radiation Rules/Regulations with the leadership of the three major health systems and then meet with the State of South Dakota Health Department requesting revisions to the rules and regulations.

As stated above Radiologic Technologists in South Dakota are not licensed health care providers. Therefore we currently are unable to count the orders that we enter into the electronic health record (EHR) towards the Meaningful Use objective for Computerized Order Entry (CPOE).

In an effort to remedy this problem and assure that we do not incur meaningful use penalties after 2015, SDSRT is proposing a statutory change. This would be a very narrow change to clarify certification as it would apply only to Meaningful Use. There is no intent to ask for a change in licensure or education.

As of this writing a rule has been drafted by the Department of Health and will go to the rules committee after the South Dakota Legislative session which ends in March. This rules change to the State statutes will not require a vote in the legislative body. It will state that Radiologic Technologists in South Dakota will be Licensed Health Care Professionals therefore being compliant with the CPOE provision.