

# Self – Certification – Best Choice for Your Health System?

*A Dynamic Health IT, Inc. White Paper*

## Challenge

Hospitals and health systems need to get certified for stimulus payments under ARRA HITECH act.

## Goals

Attain certification but minimize cost and unnecessary diversion of personnel and other scarce resources.

The CIO of a community hospital in California (where reimbursement is a huge problem due to state budget shortfalls) needs to use the 2011 stimulus payment to pay the over \$1 million cost to upgrade to his EHR vendors certified version. His EHR vendor was unwilling or unable to retrofit the certified technology to his version of the EHR software.

## Background

*In February of 2009, the American Reinvestment and Recovery Act (ARRA) allocated \$19 billion in funding for hospitals and clinics that make "meaningful use" of certified Electronic Medical Record (EMR) systems. The Health Information Technology for Economic and Clinical Health (HITECH) Act lists criteria for eligible hospitals and vendor software but the Office of the National Coordinator (ONC) is responsible for devising the certification criteria. ONC does not handle the certification. Instead, they designate ATCB's (Authorized Testing and Certification Bodies) which conduct the actual certification assessment against the published certification criteria.*

*The conventional approach to certification for eligible hospitals and health systems is to purchase a certified Electronic Health Record (EHR) system, implement it and then use it in a production setting to satisfy the Meaningful Use (MU) criteria.*

## The Problem

For many hospitals and health systems, this conventional approach will be problematic due to factors such as:

- A long-term plan that would ultimately attain meaningful use with a certified EHR but still be in the implementation stages in 2011.
- A combination of certified and uncertified modules in use but a lack of resources to move to certified modules in all areas.
- A high price tag to upgrade to certified technology and inadequate funding available.

Vendors don't seem to be interested in expending resources to get "back versions" certified for customers on older versions of their software. From our perspective, it appears that many vendors are using this as a lever to incent hospitals to upgrade sooner (and pay the upgrade cost), resulting in windfall profits for vendors as large numbers of health systems rush to upgrade.

*Is there another option for these health systems or will they need to forgo some or all of the stimulus payments?*

Dynamic Health IT, Inc.  
4016 Canal St., 1<sup>st</sup> Floor  
New Orleans, LA 70119  
(504) 309-9103  
info@dynamichealthit.com

**Dynamic**  
**Health IT**  
"Your HL7 & CCD Solution"



## The Solution

ONC says: “a health care provider that has developed its own EHR technology and is eligible under Medicare and Medicaid EHR Incentive Programs likely will be responsible for getting it tested and certified.” They go on to state:

*Self-developed Complete EHRs and EHR Modules could include brand new Complete EHRs or EHR Modules developed by a health care provider or their contractor. It could also include a previously purchased Complete EHR or EHR Module which is subsequently modified by the health care provider or their contractor and where such modifications are made to capabilities addressed by certification criteria adopted by the Secretary.*

In many cases, self-certification is a more cost effective, less disruptive and faster means to gain certification status. Although there is work involved in preparing for and assisting in the testing and certification process, it is anticipated that this effort will be far less than upgrading to a vendor's "certified" version of the software. The one major difference is that the health care system, not the vendor, is responsible for getting the EHR software "certified".

To-date, ONC has designated three ATCB's. CCHIT was the first. On November 10, CCHIT announced the EHR Alternative Certification for Hospitals, or EACH™ program. This ONC-ATCB 2011/2012 certification for installed hospital EHR technology is designed to meet the needs of hospitals that have uncertified legacy software, customized commercial products, or have developed their own EHR systems to suit their individual needs.

“Until now, CCHIT's ONC-ATCB certification was available only for health IT vendor developed products. Our new certification program is an alternative for hospitals that have developed their systems with products that are not individually certified or are a mix of certified and uncertified products. These hospital EHR systems are often very sophisticated and may have been developed over many years. Yet, they must be certified for hospitals to qualify for financial incentives through the American Recovery and Reinvestment Act (ARRA), and avoid Medicare penalties,” said Alisa Ray, executive director, CCHIT.

Dynamic Health IT is ready to assist you or even take the lead role in your self-certification process. We offer practical and effective solutions, including software that addresses HITECH certification criteria which can easily be integrated with your current systems.

The CIO of a large multi-hospital system on the East Coast is embarking on a major multi-year initiative to switch from Eclipsys to Epic. This conversion will take place one campus at a time, so campuses converting later will not be live on certified software by 2011 or, in some cases, even by 2012. He doesn't want to divert either monetary or personnel resources to upgrade the older Eclipsys system to

Dynamic Health IT, Inc.  
4016 Canal St., 1<sup>st</sup> Floor  
New Orleans, LA 70119  
(504) 309-9103  
info@dynamichealthit.com

**Dynamic**  
**Health IT**  
“Your HL7 & CCD Solution”

