

AzHeC issue papers aim to provide knowledge and leadership on topics critical to building and sustaining health information technology and exchange infrastructure.

## Arizona's Regional Extension Center: An Opportunity to Make Healthcare Higher in Quality and Lower in Costs through Adoption of Electronic Health Records

*“Congress, the executive branch, leaders of health care organizations, public and private purchasers...should make a renewed national commitment to building an information infrastructure to support health care delivery, consumer health, quality measurement and improvement, public accountability, clinical and health services research, and clinical education. This commitment should lead to the elimination of most handwritten clinical data by the end of the decade.”*

*~ Crossing the Quality Chasm (Institute of Medicine, 2001)*

### Background

The above recommendation was made at the start of this century. As we near the end of its first decade, federal funds allocated in 2009 through the Health Information Technology for Economic and Clinical Health (HITECH) Act, a component of the American Recovery and Reinvestment Act of 2009 (ARRA), have created an unprecedented investment in and opportunity for such a sweeping recommendation to come to fruition. Through ARRA, it is estimated that health information technology (HIT) investments made by the federal government may reach \$40 billion over the next eight to 10 years.

The HITECH Act sets forth a broad agenda—the development of a federal policy with corresponding funding to advance all aspects of a nationwide HIT infrastructure, including the electronic use and exchange of health information. The final goal of the legislation is to establish an electronic health record (EHR) for each person in the U.S. by 2014.<sup>1</sup>

Significant responsibility for the HITECH Act rests with the U.S. Department of Health and Human Services, Office of the National Coordinator for Health Information Technology (ONC), who serves as a distribution agency for a portion of the HIT funds. Among ONC's roles are the coordination, implementation and distribution of \$634 million in funds to establish HIT regional extension centers nationwide to assist healthcare providers with adoption and meaningful use of EHR systems. Meaningful Use of EHR systems by qualified Medicare and Medicaid healthcare providers will allow such providers to receive up to \$44,000 or \$63,750, respectively, from the Centers of Medicare & Medicaid Services (CMS) between 2012 and 2016. Within Arizona, Arizona Health-e Connection (AzHeC) applied to be the statewide



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<sup>1</sup> California HealthCare Foundation. (February 2009). An Unprecedented Opportunity: Using Federal Stimulus Funds to Advance Health IT in California. Oakland, CA. California HealthCare Foundation.

Regional Extension Center for Arizona. In April AzHeC was awarded \$10,791,644 over two years to develop a sustainable Regional Extension Center to serve Arizona's healthcare providers.

In its application to ONC, AzHeC recognized the challenges Arizona healthcare providers face in EHR adoption, including insufficient financial and time commitments, inadequate planning capacity, concerns around workflow restructuring, aging or nonexistent telecom infrastructure and a need for provider leadership. To this end, the primary goal of Arizona's Regional Extension Center is to provide key assistance services to healthcare providers to address these challenges and enable them to achieve Meaningful Use of EHR systems. AzHeC anticipates the Regional Extension Center to be providing services to Arizona healthcare providers by late summer 2010.

### **A Catalyst for Change – What the Arizona Regional Extension Center Will Do for Healthcare in Arizona**

Wide-scale EHR adoption has been a goal in Arizona since 2005 when a gubernatorial executive order was issued to develop a "Roadmap" for establishing the state's health information infrastructure (HII) and the adoption of HIT, including healthcare provider use of EHRs. This effort brought together a wide range of stakeholders from across the state to create an innovative vision and plan for Arizona's future that has garnered national attention. This work led to the establishment of AzHeC as a statewide nonprofit in January 2007. AzHeC now leads the way for Arizona's HIT efforts.

Arizona's recent Regional Extension Center award provides an unprecedented opportunity to make major progress toward the vision and recommendation set forth by the IOM through a critical aspect of HIT—EHRs. Arizona has been at the forefront of HIT leadership. Yet, while much work has already been done to advance HIT in the state, much work is still needed.

#### Current State of EHR Adoption in Arizona

Currently, the majority of Arizona provider practices do not utilize EHR systems. At the national level, among practices with less than eight clinicians (which comprise approximately 98 percent of Arizona practices) only six percent have a fully functioning EHR system.<sup>2</sup> Additionally, The Center for Health Information and Research (CHiR) reports that from a survey conducted at the time of license renewals, among Arizona allopathic and osteopathic physicians, more than 75 percent utilized paper-based medical records.<sup>3</sup>

2 DesRoches CM, et al. (2008). *Electronic health records in ambulatory care – a national survey of physicians*. *N Engl J Med* 2008; 359: 50-60.

3 Center for Health Information and Research (CHiR). (2008). *The Use of Electronic Medical Records and Physicians' Attitudes Toward a Health Information Exchange*. Tempe, Arizona. Arizona State University, Center for Health Information and Research.

### **Key Terms**

**American Recovery and Reinvestment Act of 2009 (ARRA):** Bill passed by the Obama Administration on February 17, 2009 designed to stimulate the economy through \$787.2 billion in funding to be distributed through a variety of agencies toward a number of project areas, including healthcare.

**Electronic Health Record (EHR):** An electronic record of health-related information on an individual that conforms to nationally recognized interoperability standards and that can be created, managed and consulted by authorized clinicians and staff across more than one healthcare organization.

**Health Information Technology (HIT):** The application of information processing involving both computer hardware and software that deals with the storage, retrieval, sharing and use of healthcare information, data and knowledge for communication and decision-making.

**Health Information Technology for Economic and Clinical Health (HITECH) Act:** A component of the American Recovery and Reinvestment Act of 2009 that created an unprecedented investment in and opportunity for health information technology (HIT) in the U.S. health information infrastructure (HII), including the establishment of the Health Information Technology Regional Extension Program.

**Meaningful Use:** Under ARRA, Medicare and Medicaid incentive payments will be available to eligible healthcare providers, such as physicians and hospitals. In order to receive incentive payments, providers must

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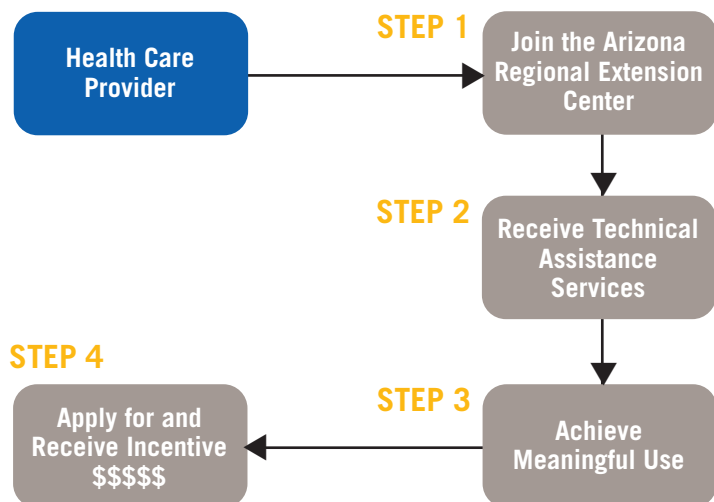
There is general consumer support for EHRs. Within Arizona, findings from consumer focus groups conducted statewide indicate support for HIT. Data revealed that over 60 percent of respondents felt it was very important that their doctors have access to all their medical records, including primary care and specialist reports, test results and medications. Nearly half of respondents felt it was very important that all healthcare providers use EHR systems instead of paper records. Finally, with regard to EHR systems, a majority of respondents viewed coordination of care among providers as a problem (37.5 percent indicated major problem and 36.2 percent indicated minor problem).<sup>4</sup> With healthcare consumerism on the rise, the needs and desires of consumers should not be overlooked.

**Arizona Regional Extension Center Goals & Services**

With unprecedented funding and structure for EHR adoption in place and provider and consumer interest building, the time to move forward with EHR adoption statewide is now. Due to this unique opportunity, the Arizona Regional Extension Center has set an ambitious, yet achievable goal—to assist 2,010 Arizona priority primary care providers in adoption and achievement of EHR Meaningful Use by April 2012 as well as serve an additional 2,000 providers the following two years. Such a reach would equate to nearly 60% of Arizona primary care providers achieving EHR Meaningful Use by 2014!

How will the Arizona Regional Extension Center achieve this goal? First and foremost, it will serve as neutral, trusted source for accurate and credible information—something much needed as healthcare providers seek to navigate EHR options and select vendors that will meet federal Meaningful Use standards.

**Regional Extension Center Provider Assistance Process**



<sup>4</sup> Arizona Health-e Connection, 2009 Healthcare Consumer Focus Group Findings, unpublished data. Phoenix, AZ. Arizona Health-e Connection.

**Key Terms (continued)**

demonstrate “Meaningful Use” of a certified EHR system. At the time of this publication, the Centers for Medicare & Medicaid Services (CMS), along with ONC, had released proposed rules for Meaningful Use and an initial set of standards, which were officially posted in the Federal Register on January 13, 2010. Public comments were due March 15, 2010—AzHeC submitted comments to CMS on the Meaningful Use proposed rule. Additionally, ONC released a proposed rule on the establishment of two certification programs for testing and certifying health information technology (HIT) systems. This rule was officially posted in the Federal Register on March 10, 2010. Public comments on the proposals for the temporary certification program were due April 9, 2010. Comments on the proposals for the permanent certification program are due May 10, 2010.

**Office of the National Coordinator for Health Information Technology (ONC):** Established within the Office of the Secretary of Health and Human Services (HHS) in 2004 by Executive Order 13335, and codified in the ARRA legislation, the National Coordinator for Health Information Technology serves as the lead advisor to the Secretary of HHS on a wide range of issues surrounding health information technology (HIT).

**Regional Extension Center (REC):** A regional center serving a defined geographic area to support priority primary care providers in achieving Meaningful Use of electronic health records (EHRs) and enabling nationwide health information exchange (HIE).

Second, the organization will strive to fully identify and provide solutions to the challenges Arizona healthcare providers face in adopting EHR systems. Finally, the Arizona Regional Extension Center will provide critical services to EHR adoption as outlined in Table 1 below.

Table 1

Regional Extension Center Services	
General Assistance	Technical Assistance
<ul style="list-style-type: none"> <li>• Outreach and education</li> <li>• Workforce support</li> <li>• Tools and resources in all aspects of electronic health record (EHR) and health information technology adoption (HIT)</li> </ul>	<ul style="list-style-type: none"> <li>• Vendor selection and preferred pricing</li> <li>• Project management</li> <li>• Practice and workflow redesign</li> <li>• System implementation</li> <li>• Interoperability and health information exchange (HIE)</li> <li>• Privacy and security</li> </ul>

Eligibility for Regional Extension Center Services

Any Arizona healthcare provider is eligible for Arizona Regional Extension Center services, which will be provided at reasonable, needs-based fees. However, only providers that meet federal “priority primary care provider” qualification standards will be eligible to receive discounted services due to the federal subsidies provided to the program.

Among Arizona’s estimated 6,700 primary care providers, AzHeC estimates 95 percent match the federal “priority primary care provider” criteria. Eligibility criteria are outlined in Tables 2 and 3 below.

Table 2

Federal Criteria – Who are <i>Primary Care</i> Providers?
<p>According to federal guidelines for Regional Extension Centers, primary care providers include:</p> <ul style="list-style-type: none"> <li>• Physicians or other healthcare providers such as physician assistants and nurse practitioners with prescriptive privileges</li> <li>• Primary care includes family medicine, general medicine, ob/gyn and pediatrics</li> </ul>

Table 3

Federal Criteria – Who are <i>Priority Primary Care</i> Providers?
<p>According to federal guidelines for Regional Extension Centers, priority primary care providers include:</p> <ul style="list-style-type: none"> <li>• Individual and small group practices (10 or fewer professionals with prescriptive privileges) primarily focused on primary care</li> <li>• Public and critical access hospitals</li> <li>• Community health centers and rural health clinics</li> <li>• Other settings that predominately serve uninsured, underinsured and medically underserved populations</li> </ul>

Key Arizona Regional Extension Center Collaborators

Building on its tradition of collaboration and stakeholder representation, the Arizona Regional Extension Center will leverage the expertise of several key organizations. These organizations are critical to the Arizona Regional Extension Center’s success and collectively provide significant experience in EHR systems implementation and HIT education and workforce development. Table 4 highlights these organizations.

Table 4

Regional Extension Center Collaborating Organizations	
Organization	Who They Are & What They Do
<ul style="list-style-type: none"> <li>• Arizona State University’s Department of Biomedical Informatics (ASU-BMI)</li> </ul>	<p>ASU-BMI will provide education and training support for all providers the Arizona Regional Extension Center serves. Additionally, ASU-BMI will provide local HIT workforce development. ASU-BMI is a leader in HIT education, offering graduate education programs leading to MS and PhD degrees. Additionally, ASU-BMI plays a major role in the University of Arizona College of Medicine-Phoenix’s (COM-P) medical student education.</p>
<ul style="list-style-type: none"> <li>• Health Services Advisory Group (HSAG)</li> <li>• Purchasing &amp; Assistance Collaborative for Electronic Health Records (PACeHR)</li> </ul>	<p>HSAG and PACeHR will provide expertise on EHR implementation and processes. HSAG is the Medicare Quality Improvement Organization (QIO) for Arizona, Florida and California. HSAG has established a strong record of delivering reliable and accurate information to assist healthcare providers, health plans and Medicare beneficiaries with the resources necessary to achieve positive change in evidence-based healthcare processes and outcomes. PACeHR is a non-profit corporation that offers a range of EHR services and solutions targeted toward physician offices and the surrounding healthcare environment.</p>
<ul style="list-style-type: none"> <li>• Arizona Medical Association (ArMA)</li> <li>• Arizona Osteopathic Medical Association (AOMA)</li> <li>• Arizona Hospital and Healthcare Association (AzHHA)</li> </ul>	<p>These leading healthcare organizations and potentially others will serve as important partners in educating and promoting the Arizona Regional Extension Center to their members. They will also provide feedback to the Arizona Regional Extension Center to ensure that continuous program improvement occurs.</p>



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## About Arizona Health-e Connection

AzHeC is a statewide non-profit charged with leading Arizona's establishment of health information infrastructure (HII), including adoption of electronic health records and health information exchange. Now an independent non-profit incorporated in 2007, AzHeC originally grew out of an August 2005 gubernatorial executive order to develop a Roadmap for HII in Arizona. AzHeC has been widely recognized for its collaborative work in moving Arizona's HII efforts forward through strategic communication and coordination among multiple stakeholders. AzHeC is the recipient of the coveted Council of State Governments' Innovations Award and has been featured in a Harvard Business School case study, in addition to serving as the state's Regional Extension Center.

## Next Steps – A Real and Rare Opportunity to Move Healthcare Forward

With funding now in place to create an Arizona Regional Extension Center, the potential to truly impact change within the state and national healthcare system is enormous. While wide-scale EHR adoption is not the panacea for transforming the healthcare system, it is one of the critical pieces toward recognizing the much cited benefits of HIT:

- Improved patient safety
- Stabilization or reductions in costs
- Greater overall transparency
- Reductions of duplicate tests and other inefficiencies
- Higher quality healthcare and public health

While there will be many residual benefits to the services the Arizona Regional Extension Center will provide, its sole purpose is to provide the tools and resources to Arizona's healthcare providers to help them achieve EHR meaningful use. This goal will require investment, commitment and collaboration by all stakeholders, but the time to move forward has never been better. Progress toward HIT has been slow to date, yet the recent passage of the HITECH Act has fast-tracked EHRs by emphasizing unprecedented structure and funding for its adoption—such an opportunity requires action!

To learn more about the Arizona Regional Extension Center, please call 602.288.5130, email [ehr@azhec.org](mailto:ehr@azhec.org) or visit [www.azhec.org](http://www.azhec.org).

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