

# HITECH: An Opportunity to Use California's Readiness Assessment Experiences to Promote Effective EHR Adoption

## BACKGROUND

**Readiness assessments of 51 Southern California clinics conveyed that only 2% of clinics were “highly prepared” for EHR adoption.**

California funders' use of readiness assessments and approaches to EHR adoption may provide valuable learnings to policymakers and government agencies developing health information technology (IT) adoption programs, specifically those within the recently enacted American Recovery and Reinvestment Act (ARRA). Within the ARRA are the provisions of the Health Information Technology for Economic and Clinical Health (HITECH) Act, largely focused on the implementation and “meaningful use” of electronic health records (EHRs). While the end goal of the act is clear – to modernize the US health care system and improve the efficiency and quality of care – the requirements of participants are yet to be defined fully. California's experience over the past five years to drive health IT adoption among clinics serve as an important case study to inform implementation details – a critical piece to maximizing federal funds.

## LEARNING FROM CALIFORNIA'S EXPERIENCE

The adoption of any health IT application into a clinical practice may be the single most complex activity a physician practice or clinic will ever undertake – not because of technology challenges, but due to the cross-organizational changes required to achieve value from adoption. In 2005, the California Community Clinic EHR Assessment and Readiness (CCCEAR) tool was developed to help clinics assess their readiness for EHR adoption.<sup>1</sup> The assessment, now used by over 100 clinics across the country, enables organizations to understand their readiness levels in areas such as cross-organizational commitment, management, processes, staffing and resources – painting a more complete picture than that of mere technology readiness.

**Readiness assessment activities revealed the need for a “stepping stone” or incremental approach to implementation of complex health IT applications such as EHRs.**

In 2006, readiness assessments of 51 Southern California clinics using the CCCEAR tool conveyed that only 2% of clinics were “highly prepared” for EHR adoption.<sup>2</sup> These results catalyzed foundations across California to identify ways to improve EHR readiness. Programs focused on quality improvement arose supporting the adoption of less onerous yet meaningful health IT alternatives as approaches to increasing readiness levels across clinics. As a result of use of the CCCEAR tool and its subsequent programs, lessons emerged that can inform future health IT adoption programs, specifically those arising from HITECH.

**Readiness assessment activities revealed the need for a “stepping stone” or incremental approach to implementation of complex health IT applications such as EHRs.** Through the assessment process, clinics are made aware of opportunities to adopt technologies more suited to their readiness levels such as e-prescribing and chronic disease management systems (CDMS). See *Building Clinic Capacity for Quality (BCCQ)*<sup>3</sup>.

**Educational and information sharing opportunities facilitate more rapid and successful adoption across a widely distributed set of grantees.** Programs that incorporate collaborative learning sessions and automate information sharing through web-based communities can encourage and promote the exchange of strategies and experiences across participants. See *Tools for Quality*<sup>4</sup>.

**Readiness assessments, technical expertise, and collaborative support provide the infrastructure necessary to help clinics select and effectively adopt the technology that best meets their needs.** Readiness assessments can help clinics identify technologies that align with their current capacity, and can assist regions with the long-term vision of EHR adoption. Programmatic resources such technical assistance and collaborative learning sessions provide the tools and flexibility to help clinics identify the “right-sized” technologies for their readiness levels, while emphasizing quality

<sup>1</sup> To access the California Community Clinic EHR Assessment and Readiness (CCCEAR) tool, please visit: <http://www.communityclinics.org/content/article/detail/783>

<sup>2</sup> To access the BCCQ Phase 1 Final Report, please visit: [http://www.unihealthfoundation.org/pdfs/uhf\\_bccqreport1.pdf](http://www.unihealthfoundation.org/pdfs/uhf_bccqreport1.pdf)

<sup>3</sup> For more information about Building Clinic Capacity for Quality, please visit: <http://www.communitypartners.org/strategic-initiatives/building-clinic-capacity-for-quality/building-clinic-capacity-for-quality.html>

<sup>4</sup> For more information about Tools for Quality, please visit: <http://www.chcf.org/press/view.cfm?itemID=133661>

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improvement, change management and integration of more automated clinical data into care delivery. See *Promoting Rural Health Care Quality through the Effective Use of IT*<sup>5</sup>.

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**Standardized use of quality metrics is key to enable analytical comparison within and across populations and organizations to improve the quality of care.** The CCCEAR readiness assessment prepares clinics for more than technology adoption, but for data capture and reporting capabilities. Programmatic experience has demonstrated need for standardized quality metrics to inform care improvement approaches – one of the criteria included in the HITECH definition of “meaningful use” of health IT. Some programs, such as Tools for Quality, even provide financial incentives for those who demonstrate the ability not only to report the data, but also to support improved use of the data in patient care delivery. See *Accelerating Quality through Quality (AQIC)*<sup>6</sup>.

These takeaways may help inform how funders and policymakers define programs to ensure organizations do not simply adopt the health information technology that is the “low hanging fruit”, but rather approach technology adoption as a strategy to produce both quality data reporting and the improvement of patient care quality. Below are key recommendations to thought leaders and decision makers working to optimize the value of stimulus funding by taking a realistic approach to EHR implementation.

### RECOMMENDATIONS AND OPPORTUNITIES FOR POLICYMAKERS AND FUNDERS

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**Consider a “stepping stone” approach to EHR implementation to fulfill the definition of “meaningful use” required for incentives. Providers may choose to implement e-prescribing, use quality reporting tools or participate in health information exchange as they work toward acquisition and implementation of a full EHR.**

- Require those requesting EHR adoption funds to undergo readiness assessments and share the resulting EHR implementation plans as prerequisites to obtaining funding.
- Ensure readiness assessments are included in a health IT adoption toolkit for Regional Extension Centers. Currently, the Health Services and Resources Administration (HRSA) has incorporated readiness assessments in its health IT adoption toolkit, citing the CCCEAR assessment as a useful tool.
- Provide sufficient resources to help providers develop an accurate depiction of their readiness prior to selection or adoption of an EHR. Acknowledge that the insurmountable cost of an EHR or other health IT may draw providers to funder- or government-sponsored programs, therefore, their readiness levels should guide their selection processes.
- Consider readiness assessment as a tool to ensure collaboration among local and regional partners sharing in efforts toward EHR adoption. To foster collaboration, consider the use of social networking tools to facilitate communications among recipients adopting similar technologies.
- Consider a “stepping stone” approach to EHR implementation to fulfill the definition of “meaningful use” required for incentives. Providers may choose to implement e-prescribing, use quality reporting tools or participate in health information exchange as they work toward acquisition and implementation of a full EHR.

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<sup>5</sup> For more information about Promoting Rural Health Care Quality, please visit: <http://www.nsrhn.org>

<sup>6</sup> For more information about Accelerating Quality Improvement through Collaboration, please visit: <http://www.cpc.org/clinical/aqic/index.cfm>