

## Electric Medical

*Defining "meaningful use" is just one challenge created by the stimulus package.*

*By JOEL BERG, who is a college professor and freelance writer*

The billions in federal stimulus dollars slotted for electronic medical records will create jobs. No one doubts that.

But it's unclear whether the spending will launch a true digital revolution among doctors, hospitals and other providers, according to executives at healthcare technology companies.

The money, roughly \$20 billion, is included in the federal economic stimulus package enacted in February. The biggest slice--\$17 billion--is aimed at rewarding hospitals and doctors' offices that adopt electronic medical records by 2015. The remainder is earmarked for grants, training and state programs.

The goal is to create a healthcare system that is more efficient and effective.

Take someone showing up in an emergency room. A doctor can go online and check on any tests and treatments the patient has already had, avoiding redundancy, says Linda Matern, chief operating officer of **Shared Health**, a health information exchange in Chattanooga, Tenn., that manages data shared among insurers, providers and employers.

"Regardless of how complicated healthcare reform gets, there is a simple fact that the more automation and the more ability to exchange data outside the paper medium, the better the efficiency," she says.

To secure federal dollars under the stimulus bill, providers must prove they have become "meaningful users" of digital records, a term that has yet to be fully defined.

A watered-down definition, such as simply having electronic data, could end up rewarding waste, says Kent Gale, founder and chairman of KLAS Enterprises, a research and consulting firm in Orem, Utah.

Many hospitals already boast digitized files. But they have a mixed record when it comes to coaxing doctors to use them, Gale says. He worries hospitals and doctors' offices will continue to buy systems that sit idle.

"If 'meaningful use' means the same place we are today, then that's nothing," Gale says.

Government funding will go a long way toward advancing healthcare technology. But money isn't the only barrier, says Paul Viskovich, president of Orion Health, a company in Santa Monica, Calif., that helps providers exchange data.

Healthcare providers often are loath to share for competitive reasons, Viskovich says. Legislation could clarify standards for sharing and outline who ultimately owns the data.

"Certainly when I'm in discussions with people about information-sharing, these issues come up," he says.

John Zubak chief executive officer of VIIAD Systems, a healthcare IT firm in Langhorne, Pa., says the government should focus at least some of its spending on technologies that can deliver immediate results.

"We need to fix this today, because unless we get the costs under control, we won't have money to treat the uninsured and underinsured," Zubak says.

VIIAD develops programs that allow providers to find and review digital records, regardless of where and how they're stored.

"There's a lot of people like VIIAD out there that have solutions that can save money literally tomorrow versus hoping that you're going to find something down the road," Zubak says.

Another danger is that federal spending might lead doctors and hospitals to install systems that end up costing them in the long run, Zubak says.

"Just putting the equipment in there doesn't really do anything," he says.

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