

Special Audio Report Transcript

Headline: Regional Health IT Extension Centers Embrace Changes in Funding Structure, Time Frames

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TEXT:

I'm Kelly Wilkinson with an update on how regional extension centers are making progress and addressing challenges as they help health care providers become meaningful users of electronic health records. This is a special report for *iHealthBeat*, a daily news service from the California HealthCare Foundation.

At the end of last year, the Office of the National Coordinator for Health IT announced that it would restructure some of its funding and time frames that govern regional extension centers.

Mat Kendall is director of ONC's Office of Provider Adoption Support.

(Kendall): "The reality was, we recognized that we were asking folks to do a lot of work in a short amount of time. And that that time period was a little constrained."

RECs were created to help health care providers navigate and adopt electronic health records to qualify for federal incentive payments. The goal is to provide outreach and support services to at least 100,000 primary care providers.

ONC recently took several major actions that affect RECs. It changed the matching requirements for REC-funded projects to assume more of the cost for a longer period of time. ONC also allocated an additional \$12 million in new technical support to help rural hospitals and critical access hospitals achieve meaningful use.

Perhaps most importantly, ONC shifted the budget period for RECs from two two-year periods to one four-year period.

That sounds very technical, but it has very real implications for RECs. Again, Mat Kendall.

(Kendall): "And that allowed us to have a little more flexibility in terms of some of the funds that had been budgeted to be allocated in the out years. We were able to allocate them now and help ensure

that every extension center is operating at a consistent level going forward."

The upshot is that RECs received allocated funding sooner than expected, along with more time to implement their projects

(Avram): "My initial reaction was one of relief, quite frankly."

Speranza Avram is executive director of California Health Information Partnership and Services Organization, or CalHIPSO, the REC that serves all of California except Los Angeles and Orange County.

(Avram): "Because the ONC recognized that we needed more time, in fact, even more importantly than more money was more time."

Avram says that RECs are only starting to hit their stride, since the first year required start-up work to get up and running. In California and elsewhere, she says the delivery model is complicated, and there are a lot of factors beyond the control of regional extension centers.

(Avram): "We don't have control over how fast the vendors can implement, right. Or how fast they can deploy nationwide. And then, once a provider has the electronic health record, there's helping that provider get through and demonstrate to stage 1 meaningful use. Which is also something that's never been done before. So all of these are complicated new processes, working with health care providers who don't have any time, and are busy trying to take care of patients. So there's a lot of moving parts, so more time really is appropriate."

While RECs like CalHIPSO provide the statewide coordination, it's Local Extension Centers that offer services at the local level to health care providers. Christy Rosenberg is director of the Community Clinics Health Network, which has been designated as the LEC for primary care providers in San Diego and Imperial counties.

She says the extended time frame gives her organization more of an opportunity to conduct outreach.

(Rosenberg): "We're in the process right now of figuring out how we can we restructure a little bit and add additional resources where we need to, to be able to reach more providers."

She says the biggest challenge is reaching small group and solo providers, who may not have their own internal IT staff.

(Rosenberg): "For providers that aren't as far along in the process, so they haven't selected a system yet, they're still not sure which is

the right system for them. Or they're still trying to identify funding to help them purchase a system. For those providers, the road is longer."

Fortunately, she says, so is the time frame under the changes recently made by ONC.

ONC's Mat Kendall says those changes address some of the uncertainties that might have held up enrollment, as ONC looks to hit its goal of enrolling 100,000 primary care providers through regional extension centers.

(Kendall): "It is a very hard challenge. And I think the providers by and large are interested in doing this. But they need assistance, because they're in the health care business. Not necessarily the systems business."

So far, Kendall says there are more than 45,000 providers signed up nationwide.

This has been a special report for *iHealthBeat*, a daily news service from the California HealthCare Foundation. If you have feedback or other issues you'd like to have addressed, please email us at iHB@CHCF.org. I'm Kelly Wilkinson. Thanks for listening.