PUBLIC HEALTH IN THE CALIFORNIA EHEALTH ENVIRONMENT

DECEMBER 13, 2010

STATE LEVEL

FEDERAL LEVEL

EHR Incentive Program (CMS &/or DHCS) will pay the provider

Regional Extension Centers (RECs) help providers pick and install Electronic Health Record Technology (EHR)

Cal eConnect provides core services to enable exchange between providers

Medi-Cal EHR Incentive Program receives attestation by provider – pays incentive

Medicare EHR Incentive Program receives attestation by provider – pays incentive

PROVIDER

Provider at the Point of Care → Provider adopts/ implements/ upgrades EHR → Provider collects structured data in the EHR → Provider transmits data from EHR to ...

- … another provider
- … a patient's personal health record
- … public health agency in accordance with applicable law and practice
- … Centers of Medicaid and Medicare Services (clinical quality measures)

PUBLIC HEALTH ASPECTS

Providers, RECs, Cal eConnect need public health reporting requirements to plan and build

RECs can carry instruction to Providers for public health programs if message enables Meaningful Use (MU)

Providers need patient education materials related to MU

RECs and Cal eConnect need to understand data collection issues that can be informed by Public Health

DHCS needs to audit Provider reporting – may have basis in public health reporting

FUNDING AVENUES

Potential funding through the HIE Cooperative Agreement via CHHS or Cal eConnect

Potential funding through State Administrative dollars from CMS for the EHR Incentive Program

Funding from Affordable Care Act for the National Public Health Improvement Initiative

Other eHealth funding:
- Beacon Grant - San Diego
- Workforce Grant

Federal Standards

Office of National Coordinators - Certified EHR
CMS - Meaningful Use

HIT Policy Committee
HIT Standards Committee

CDC, HL7, National Associations