

### Background

Congress enacted the landmark **Health Information Technology for Economic & Clinical Health (HITECH) Act of 2010**, which promoted widespread adoption of health information technology (health IT) and interoperable electronic health records (EHRs). According to [healthit.gov](http://healthit.gov), in 2021, 78% of office-based physicians and nearly all (96%) of non-federal acute care hospitals have adopted a certified EHR. The **HITECH Act** also has guided federal health IT standards and policy development, prompting a sea change in how hospitals and physicians use health IT. Building on that foundation, the bipartisan **21<sup>st</sup> Century Cures Act of 2016 (Cures Act)** is driving health IT policy and implementation. In 2020, the Centers for Medicare & Medicaid Services (CMS) and the US Department of Health & Human Services' (HHS') Office of the National Coordinator for Health Information Technology (ONC) began implementing the **Cures Act** through a set of intertwined interoperability rules. Together, CMS' *Interoperability & Patient Access Final Rule* and the ONC's *Cures Act Final Rule* mark a significant milestone in the move toward a digital healthcare environment impacting Medicare, Medicaid and other healthcare providers.

In February 2023, the Secretary of HHS marked another milestone to achieving nationwide interoperability – the approval of six organizations that will serve as Qualified Health Information Networks (QHINs). These QHINs represent the backbone of the federal infrastructure for health information sharing – the Trusted Exchange Framework & Common Agreement (TEFCA). The launch of TEFCA and various interoperability rules are bringing us closer to a digital healthcare landscape where patients and providers can access health information when and where it is needed. Yet, none of these milestones have included incentivizing the adoption and use of health IT in the long term and post-acute care (LTPAC) sector.

The COVID-19 pandemic devastated the country – especially care of America's seniors and other vulnerable populations. The pandemic also highlighted the need for greater federal investment in health IT for public health reporting and addressing health inequities.

In 2022, the National Academies of Sciences, Engineering & Medicine (NASEM) published a landmark study entitled, [\*The National Imperative to Improve Nursing Home Quality: Honoring Our Commitment to Residents, Families & Staff\*](#). The headline summarizing the report concludes, "The way in which the United States finances, delivers and regulates care in nursing home settings is ineffective, inefficient, fragmented and unsustainable." The report also acknowledges, "Nursing homes were not included among those hospitals and health care professionals eligible to participate in the [federal government's] incentive program, and thus they have not benefited from the [Promoting Interoperability] program's financial incentives, which sunset in 2021." Recognizing that LTPAC adoption of health IT is part of the path to higher quality care, NASEM calls on the ONC and CMS to identify a pathway to provide financial incentives to nursing homes for certified electronic health record (EHR) adoption that supports health information exchanges to enhance person-centered longitudinal care.

### Ask Congress

To include LTPAC in any federally-sponsored health IT initiatives to improve care coordination & transitions of care.

### Key Facts

ADVION represents LTPAC providers & health IT developers/vendors with full clinical & point-of-care IT systems & solutions.

ADVION health IT member companies serve the majority of LTPAC providers.

ADVION is a founding member of the LTPAC Health IT Collaborative & active in myriad health IT initiatives, including the Patient ID Now and Moving Forward Coalitions.

ADVION member IT companies have developed products included in ONC's Certified Health IT Product List (CHPL) and the federal Trusted Exchange Framework & Common Agreement (TEFCA).

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Further, it says these incentives should be modeled on the HITECH incentives and the ONC should develop appropriate nursing home EHR certification criteria that promote adoption of health information exchange of important clinical data (e.g., admission, discharge, and transfer data).

ADVION joins the authors of the NASEM report in urging the federal government to provide financial incentives for health IT adoption in Long Term and Post-Acute Care (LTPAC) which includes nursing facility, home health, IRF and LTCH that supports health information exchange to enhance person-centered longitudinal care.

The LTPAC sector and other providers did not receive federal *HITECH Act* incentive funds and now must play catch up as the need for greater interoperability drives precipitous change in federal health IT policy. That is why we are asking Congress to consider the positive impact that standardized, interoperable health information technology can have in facilitating care coordination and disease management, minimizing medical errors, improving outcomes, reducing cost and empowering patients.

### ***As Congress Considers Federally-Sponsored Health IT Initiatives, ADVION Asks Congress to:***

- Follow the recommendations in the NASEM report by introducing and supporting legislation that would provide federal incentive funds to allow the nursing facility sector to achieve parity with the acute and ambulatory care in order to advance interoperability that can help to improve care for America's most vulnerable citizens.
- To introduce and support legislation for a demonstration project that would provide grants distributed through the ONC to a diverse and nationally representative sample of nursing facility providers for adoption and use of health IT and develop a standard for how such health IT would be used in nursing facilities.

### **NASEM's Recommendations:**

The ONC and CMS should provide financial incentives to nursing homes for HIT adoption.

Because HIT adoption varies significantly in LTC, it is critical to monitor HIT adoption and interoperability to identify barriers to adoption.

CMS and the Health Resources and Services Administration (HRSA) should provide financial support for workforce training.

ONC should develop appropriate nursing home EHR certification.