Committee #7 | Health Information Technology

The following document has been revised based on community feedback and ongoing committee discussion.

The document is broken down into two parts: an executive summary and the original, detailed committee submission. Since original committee submissions often contain technical references, we've provided the executive summary for broader understanding of the priority recommendation.

Executive Summary

Health Information Technology (HIT) may be a set of tools and processes (a system) to improve workflow and nursing home resident quality of life. We propose a short-term (two years) path resulting in some HIT adoption, and a long-term path (up to five years) to stimulate more extensive HIT adoption in all nursing homes. *These two approaches will promote certified EHR adoption in nursing homes and more direct care worker time with residents.*

Short-Term Priority
Use HIT to gather each resident's goals, preferences, and priorities (GPP). Develop a description of GPP and then develop and test a process to collect data that relies on the individual resident and their caregivers, thereby reducing the total data collection burden on staff.

The second component is to develop and test an HIT-enabled process that measures alignment of care provided with the resident's GPP.

Long-Term Priority
Establish a roadmap for the adoption of HIT required for success under Value Based Payment (VBP) models for all nursing homes by 2030. Identify specific priority HIT-enabled tools and test phased implementation.

NASEM Report Recommendation(s)

Goal 7: *Adopt health information technology in all nursing homes.*

7A: *The Office of the National Coordinator (ONC) and the Centers for Medicare & Medicaid (CMS) should identify a pathway to provide financial incentives to nursing homes for certified EHR adoption.*

Detailed Committee #7 Submission

Introduction

We propose to explore two paths to advance NASEM 7A, described below – a short term (two years) path resulting in some HIT adoption, and a long-term path (up to five years) to stimulate more extensive HIT adoption in all nursing homes.

Our Approach

Long-Term Project
Key milestones for the Committee #7 long-term project include conducting an environmental scan and literature review and establishing a vision for deploying HIT that aligns with and supports value-based payment. Based upon this vision, the Committee will develop and test a tool for nursing homes to assess their HIT adoption and evaluate their needs and gaps.

Short-Term Project
The short-term path has two components.

The first is to use HIT to gather the individual's goals, preferences, and priorities (GPP). Gathering GPP is a foundational process for providing patient-centered care and yet it is inconsistently done in all care settings, not just nursing facilities. In part, this inconsistency is due to the significant amount of staff time that is needed to collect this information.

Committee #7 has decided to develop a taxonomy of GPP and then develop and test a process to collect
these data that relies on the individual and their caregivers thereby reducing burden on the staff. The GPP data gathered will inform the care planning

process and provide an opportunity to create a plan that more closely aligns with the individual's goals.

The second component of our short-term path is to develop and test an HIT enabled process that measures the alignment of care provided with the individual's GPP. This is consistent with the charge of Committee #1 which is to provide care that aligns with the individual's goals and preferences. In collaboration with Committee #6 we will define measures for the concordance of care with GPP. This HIT dependent process will report concordance in real time to enable the facility to continuously adjust care to meet shifting goals and preferences. We will work with CMS to tie reporting to a pay-for-performance model that provides incentives for deployment and use.

Workgroup Structure

To accomplish this work, our committee has established six workgroups including:

- #1: Develop Measures
- #2: Test Measures
- #3: Develop Data Collection Tools
- #4: Test Data Collection Tools
- #5: Long Range Vision
- #6: CMS Preparation

It is the perspective of our committee that with our Subject Matter Experts (SMEs) and committee members co-chairing these workgroups that the project is likely to be highly feasible, will generate highly significant collaborative efforts from multiple stakeholders, and will have a medium to high probability of sustainable impact toward achieving the NASEM recommendations.