

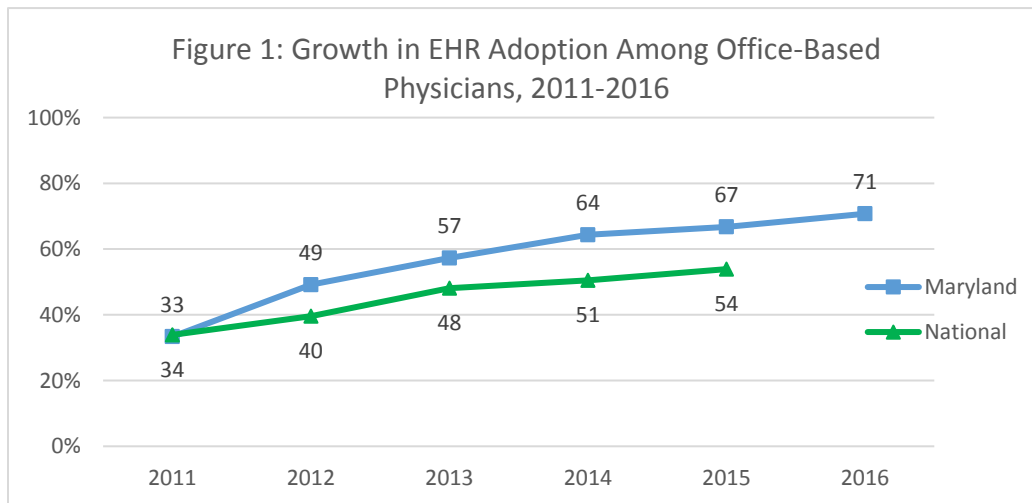
Physician Adoption of Electronic Health Records

An Information Brief

September 2017

Introduction

Widespread adoption and meaningful use of electronic health records (EHRs) is an essential component of health care reform and can improve the quality of care, increase efficiencies, and reduce health care costs. The Maryland Health Care Commission (MHCC) is responsible for promoting the diffusion of health IT statewide. Annually, MHCC assesses the adoption and use of EHRs among practicing physicians in the State using information from the Maryland Board of Physicians' license renewal applications.¹ Since 2011, growth in EHR adoption among office-based physicians has remained steady, both locally and nationally (Figure 1). The steady growth was attributed initially to the incentives made available under the Medicare and Medicaid EHR Incentive Programs.² More recently, EHR adoption decisions are likely influenced by incentives available under delivery system reform efforts, such as value-based payment models, including the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA).³



Sources:

- Maryland Data – Maryland Board of Physicians
- National Data – National Center for Health Statistics (basic EHR) - Office of the National Coordinator for Health Information Technology. 'Office-based Physician Electronic Health Record Adoption,' Health IT Quick-Stat #50. dashboard.healthit.gov/quickstats/pages/physician-ehr-adoption-trends.php. December 2016.

Note:

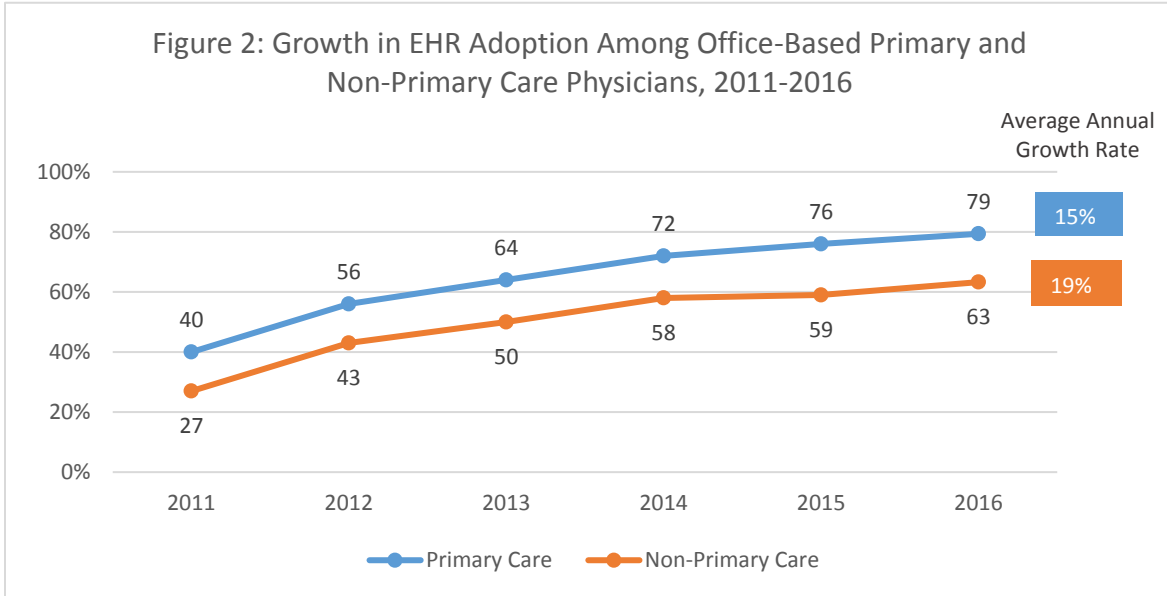
- N=8,034 for 2016, office-based physicians

¹ The application includes questions about practice location, size, specialty, and health IT adoption, among others. Responses to questions in the application used for this analysis are self-reported and are not audited. Responses may be influenced by physician's interpretation of the questions.

² The American Recovery and Reinvestment Act of 2009 (ARRA) authorized the Centers for Medicare & Medicaid Services to provide payments to eligible providers that adopt, implement, update, or demonstrate meaningful use of an EHR.

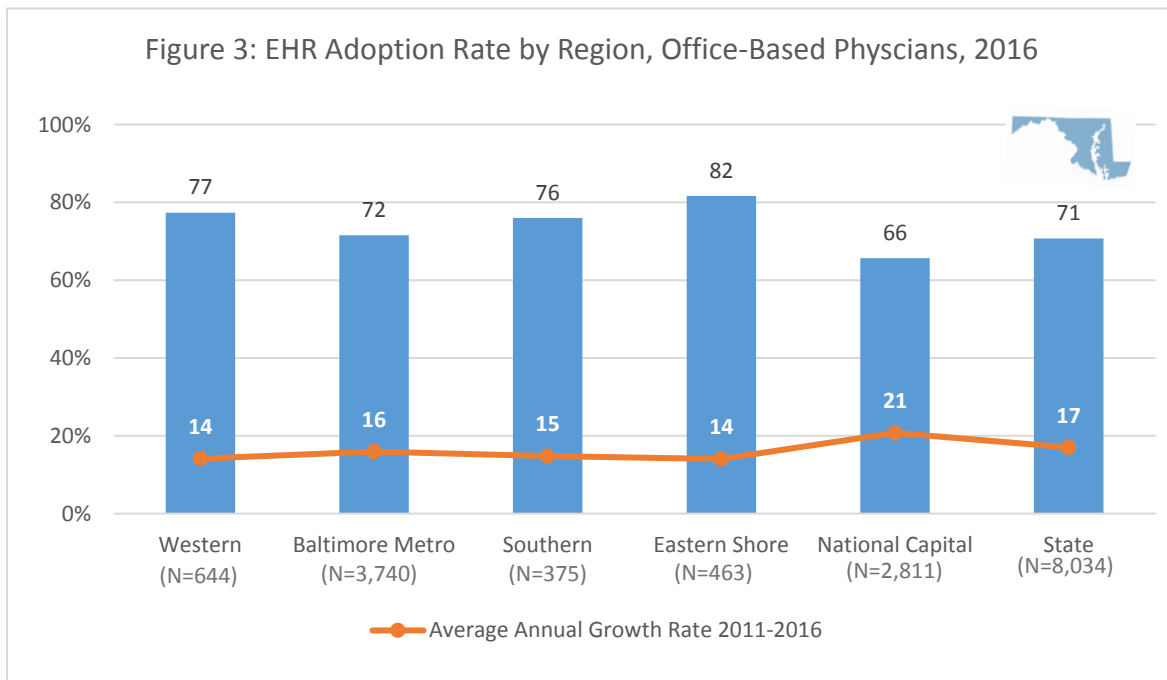
³ Public Law 114-10. More information about MACRA is available here: <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Value-Based-Programs/MACRA-MIPS-and-APMs/MACRA-MIPS-and-APMs.html>.

Observations



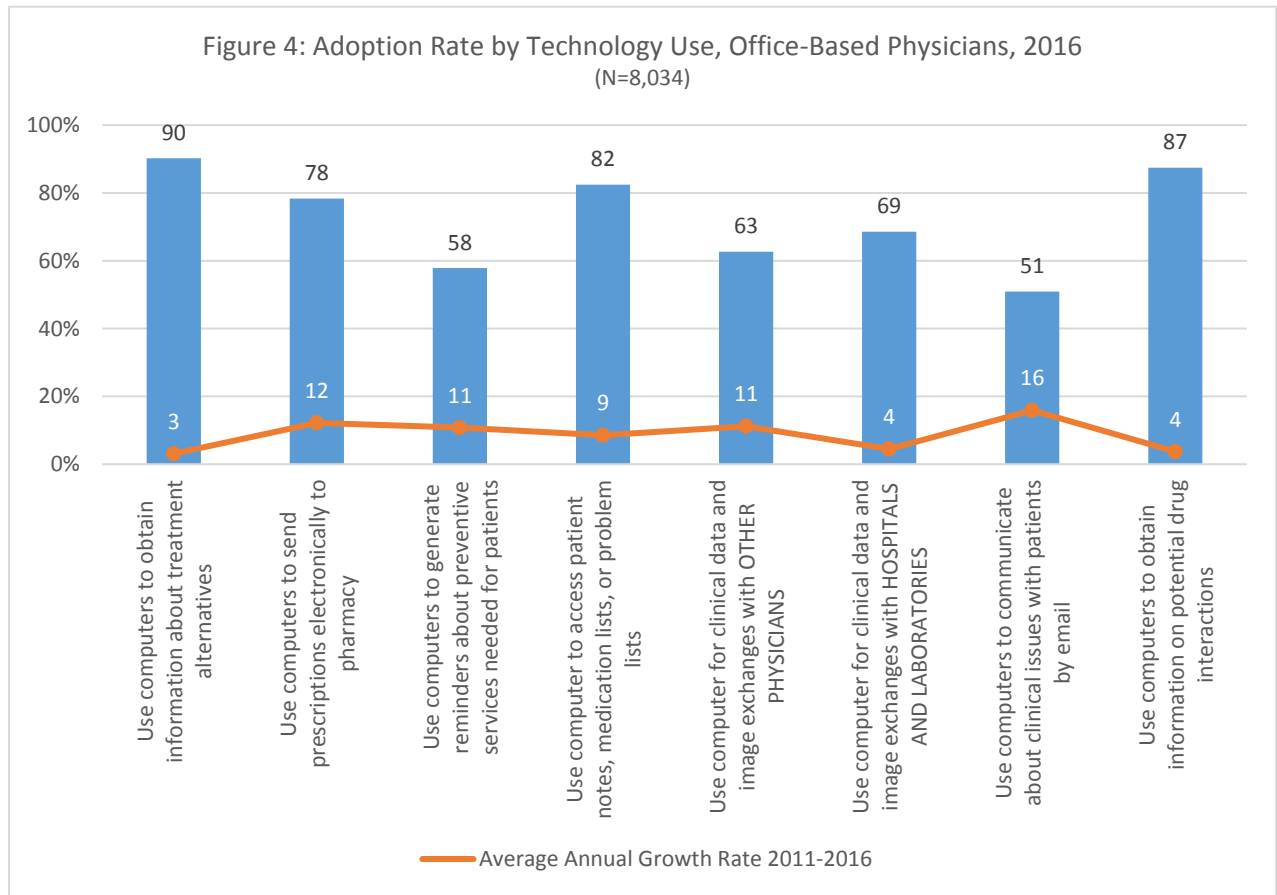
Note: For 2016, N=4,311 for non-primary; N=3,723 for primary care

- EHR adoption among Maryland office-based primary care physicians exceeds non-primary care physicians by 16 percent.
- Since 2011, the adoption of EHRs is growing at a faster rate among non-primary care physicians.

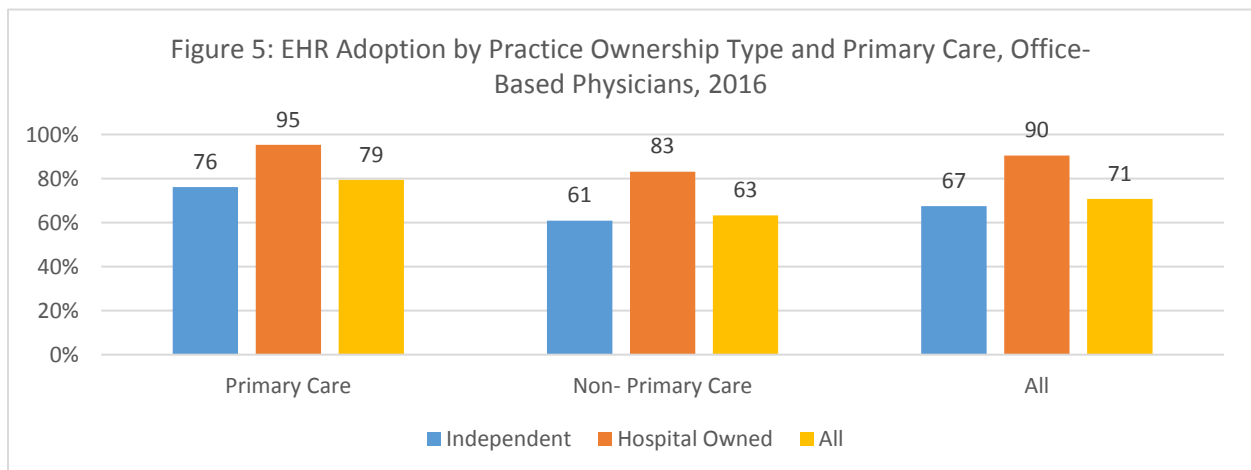


- EHR adoption rate is the highest in the Eastern Shore region (82 percent), but growing at a lower rate (14 percent) than the overall State annual growth rate.

- The National Capital region has the lowest EHR adoption rate (66 percent), but growing at a higher rate than the overall State annual growth rate.



- About 51 percent of office-based physicians communicate about clinical issues with patients by email; this is growing at a faster rate than other computer uses.
- The majority of office-based physicians use computers to obtain information about treatment alternatives (90 percent) and potential drug interactions (87 percent).



- Office-based physicians in a hospital owned practice are more likely to have adopted an EHR than those in independent practices.
- Hospital owned physicians are more likely to have adopted an EHR independent of being a primary care or non-primary care physician.

Remarks

EHRs are essential to ushering in a new era in care delivery where providers are required to deliver comprehensive, coordinated care, and are held accountable for controlling costs and improving care quality. EHRs have the potential to enhance clinical decision making by providing a more complete health record at the point of care delivery. Locally and nationally, EHR growth is expected to trend upward at a modest pace for the foreseeable future. In general, federal and State EHR incentive programs have been helpful in advancing EHR adoption. Practices that have made a business decision not to implement an EHR are under increasing pressure to rethink their decision. Patients' and caregivers' expectations that health information be maintained electronically, and payor promotion through alternative payment models, are compelling levers to convince non-adopters to implement EHRs.