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Consultant advises physicians on qualifying for EHR incentives

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DeWITT — A health-care technology consultant based in DeWitt is building his business around helping physicians qualify for federal-government payments by adopting electronic health records (EHR).



Netti

John Netti started his consulting business, Netti Consulting Services, in October. Netti Consulting, which leases a 320-square-foot office on Ridings Road, is focusing on helping physicians qualify for reimbursements under the Medicare EHR

Incentive Program.

That program offers incentive payments for eligible professionals and hospitals that demonstrate “meaningful use” of certified EHR technology. Meaningful use means a provider utilizes a certified EHR in a meaningful manner, such as e-prescribing, according to the Centers for Medicare & Medicaid Services (CMS) website. Meaningful use also includes using EHR technology to exchange health information electronically to improve care quality and using EHR technology to submit clinical quality measures.

Health-care providers not located in a Health Professionals Shortage Area (HPSA) can receive five years of payments totaling up to \$44,000, depending on their Medicare-allowed charges. Health-care providers operating primarily in an HPSA can receive an additional 10 percent on top of their maximum payment.

An HPSA is an area, population group, medical facility, or public facility with a shortage of primary health-care providers, dental providers, or mental-health providers. There are numerous HPSAs in Central New York.

The government will not make Medicare EHR Incentive Program payments for years after 2016. That means professionals who have not already attained meaningful use need to achieve it in 2012 to be eligible for

the maximum reimbursement, Netti says.

“It’s not something you want to be behind the eight ball with,” he says.

Eligible professionals who demonstrate meaningful EHR use after 2012 can still receive some reimbursements. Those showing meaningful use in 2013 can receive up to \$39,000 over four years, and those demonstrating meaningful use in 2014 can receive up to \$24,000 over three years. Again, professionals in HPSAs can receive 10 percent on top of that maximum payment.

Professionals who qualify for the Medicare EHR Incentive Program include doctors of medicine, doctors of osteopathy, doctors of oral surgery, doctors of dental medicine, doctors of podiatric medicine, doctors of optometry, and chiropractors, according to the CMS.

Physicians who provide 90 percent or more of their services in a hospital inpatient or emergency-room setting are not eligible for individual payments from the program. Hospitals are reimbursed under a different schedule.

In addition, eligible professionals must meet a series of objectives to qualify for the Medicare EHR Incentive Program. Objectives include maintaining active medication lists and recording the smoking status for patients 13 years and older.

Netti Consulting Services

Before starting his consulting firm, Netti worked as the director for EHR adoption services at HealtheConnections, Central New York’s Regional Health Information Organization, which is designed to provide authorized medical providers with electronic access to patient information.

HealtheConnections is also an agent for the New York eHealth Collaborative Regional Extension Center, which helps medical practices implement EHRs and achieve meaningful use, Netti says.

Netti, who is the lone consultant at his firm, declined to share revenue projections. He has no current plans to add employees, but said that could change, depending on his level of business.

He plans to focus his Medicare EHR Incentive Program advising medical prac-

tices made up of about five doctors, although he says he will not turn away larger or smaller groups. He plans to serve both primary-care physicians and specialists.

“The small to mid-sized practice is really who needs this,” Netti says. “There are still a lot of primary-care doctors who have not adopted an EHR.”

Within such practices, each doctor who qualifies for the Medicare EHR Incentive Program can receive five years of payments, Netti says.

Netti offers physicians information on selecting an EHR system, contracting with a vendor, implementing a system, and achieving meaningful use. The process isn’t always simple — for instance, he recommends that physicians consider whether EHR vendors will update their systems to keep up with any future government changes to meaningful-use standards.

“I’m not an attorney, but I always like to provide information about things they should consider,” Netti says. “I always keep the practice in the driver’s seat. My goal is to tell them all the things they should be thinking about so they can make good decisions.”

Providers should consider their Medicare reimbursements before they decide against switching to EHRs, Netti says. They will receive lower Medicare reimbursements beginning in 2015 if they have not met meaningful-use standards by that time, he says.

In 2015, providers will receive 99 percent of the fee schedule covered amount, according to the CMS. In 2016, they will receive 98 percent, and in 2017 they will receive 97 percent. In subsequent years, the payment could decrease to 95 percent of the fee schedule covered amount.

All providers — even those not eligible for reimbursements — should consider implementing EHRs, Netti says.

“In the future that’s how medicine is going to be practiced,” he says. “Information is going to flow electronically from provider to provider. A practice that’s going to be left out is going to find itself out of sync.” □

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