

IN BRIEF

Cegedim, a global technology services company, acquired electronic health record system provider **Pulse Systems**.

East Tennessee Children's Hospital has selected **Wolter Kluwer Health's ProVation Order Sets** to automate the creation, deployment, and maintenance of order sets.

HealthGrades, the publicly traded health-care ratings organization, entered into a definitive agreement to be acquired by private equity firm **Vestar Capital Partners V**.

Visiting Nurse Service of New York has deployed **Optimum Lightpath's** telecommunication services.

Gulf Coast Medical Center has selected **Wolters Kluwer Health's ProVation MD** software for gastroenterology procedure documentation and coding.

MedWest Health System of North Carolina has selected **Allscripts' EHR** and practice management software.

Vohra Wound Physicians, a national network of physicians, has selected **athenahealth's** revenue cycle management services.

Ascension Health, Adventist Health System, and Catholic Healthcare West created the **Care Collaborative** partnership to pool the clinical order sets developed and adopted by their clinicians.

Primary Wound Care Specialists in Florida has selected **ExpressMD Solutions' Electronic House Call** patient monitoring program.

Akron General Health System has chosen to deploy a subscription to **My LifePlan's** health information service at four emergency departments in Ohio.

The North Carolina Department of Health and Human Services has signed a five-year contract with **Thomson Reuters** for a healthcare reporting system containing the names of 1.8 million beneficiaries.

The University of Michigan Health System has selected **Epic Systems' suite** of ambulatory and inpatient information systems. ●

OCR Outlines Enhanced Enforcement Role

The Office for Civil Rights, responsible for enforcing the HIPAA privacy rule, has outlined changes to how it will investigate complaints and penalize violations. The descriptions were released within proposed amendments to HIPAA resulting from the HITECH Act, which OCR published in a notice of proposed rulemaking in July.

The provisions follow on an interim final rule that OCR, part of the Department of Health and Human Services (HHS), published last fall.

Under the proposed changes, organizations are more likely to be investigated and fined if HIPAA violations were caused due to "willful neglect." A facility could be found guilty of willful neglect if, for example, it understood

the privacy risks associated with a particular action performed by hospital staff but willfully neglected to mitigate the risk.

"HHS is required to impose a civil money penalty for violations due to willful neglect," OCR writes.

The rule states that though HHS often seeks to correct noncompliance with HIPAA through voluntary corrective action, "there may be circumstances (such as circumstances indicating willful neglect) where the [HHS] Secretary may seek to proceed directly to formal enforcement."

If a preliminary review of the facts indicates that a possible HIPAA violation is due to willful neglect, HHS must investigate the case. This change

makes it clear that HHS is not required to attempt to resolve cases of noncompliance due to willful neglect by informal means but can proceed directly to an investigation and possible fine.

A violation is not willful neglect when "the covered entity or business associate did not know and by exercising reasonable diligence would not have known of a violation, or where the violation is due to reasonable cause."

Penalties will be issued using a tiered system based on the severity of the violation. Revisions of the privacy rule state that HHS should use the nature and extent of the violation as the first factor in determining the penalty amount. The nature of a violation has

always been considered when determining penalty, but this change adds to the equation the extent or amount of harm caused.

HIPAA violation investigation with law enforcement agencies and state attorneys general seeking to investigate a complaint.

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The privacy rule changes also now allow state attorneys general to prosecute HIPAA violations in addition to the federal government. Because of this, a change in the proposed rule states that HHS can share personal health information obtained during its

The proposed rule, as well as a synopsis of it, may be read at www.ahima.org/advocacy/arraprivacy. OCR offers information on its enforcement activities at www.hhs.gov/ocr/privacy. HHS will receive comments on the rule until September 13. ●

New Consumer Rights for Payment Appeals

In July the Obama Administration announced new regulations to empower consumers to appeal decisions made by their health plans or insurance companies. It also announced the availability of resources to help give consumers more control over their healthcare decisions.

Consumers in new health plans will have the right to appeal decisions, including claims denials and rescissions, made by their health plans. This includes the right to appeal decisions made by a health plan through the plan's internal process and the right to appeal decisions made by a health plan to an independent decision maker. The regulations were issued by the Departments of Health and Human Services, Labor, and Treasury.

"The appeals rules today will extend important protections and simplify the system for consumers," said Labor Secretary Hilda Solis in a press release. "And they will ensure that consumers in new health plans have access to internal and external appeals processes that are clearly defined, impartial, and designed to ensure that,

when health care is needed and covered, consumers get it."

In addition, grant applications from the \$30 million Consumer Assistance Program are now available to help states and territories establish consumer assistance offices or strengthen existing ones. The funds will be used to provide consumers with the information they need to pick from a range of coverage options that best meets their needs, appeal decisions by plans to deny coverage, and select an available primary care provider.

"The Consumer Assistance Program will support patients both now as we transition to a more competitive, patient-centered health insurance marketplace in 2014 and once that new marketplace is established," said Jay Angoff, director of the Office of Consumer Information and Insurance Oversight within HHS, in the press release. "These programs can help consumers understand what type of coverage they need, how they can enroll—and then help them if they run into any trouble getting the benefits they've paid for." ●

Physicians Unclear on Changes to EHR Certification Programs

A survey conducted by CapSite, a healthcare technology research firm, finds that while most physicians feel the certification of their EHR systems is important, they are confused on who will be providing certification.

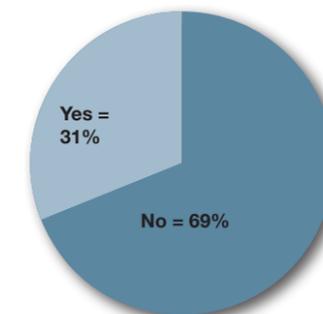
Of the 850 providers surveyed, just over half believed the Certification Commission for Health Information Technology (CCHIT) is required to receive stimulus funds for an ambulatory EHR solution purchase. An additional 40 percent were unsure.

In fact, the meaningful use program creates an entirely new certification program.

The Office of the National Coordinator for Health Information Technology will manage the certification of products for use in the incentive program, with testing and certification managed by so-called ONC-approved testing and certification bodies. ONC released the certification criteria and standards in January and published them in a final

rule in July.

ONC began accepting applications for certifying bodies on July 1, with CCHIT among the first to apply. Initially certification will be managed through a temporary program, intended to jumpstart the meaningful use program while a permanent program is developed. A final rule on the permanent program is expected this fall. ●



"Are you aware that there will be federally accredited alternatives to CCHIT for EHR certification?"

From a survey of 850 healthcare providers conducted by CapSite, "2010 US Ambulatory Electronic Health Records Certification Study," July 2010, www.capsite.com.

New CCHIT EHR Certification Programs

In July the Certification Commission for Health IT launched three new certification programs for behavioral health, dermatology, and long-term and post-acute care EHRs.

The behavioral health EHR certification includes an optional addition to ambulatory EHR certification and a standalone certification for a behavioral EHR used in other outpatient settings. The long-term and post-acute care program also includes an optional add-on certification for EHRs used in skilled nursing facilities and home health.

CCHIT is accepting applications for these certification programs. Final criteria, test scripts, and certification materials are available at <http://cchit.org>.

CCHIT also offers special certification programs for cardiovascular medicine, child health, and emergency departments. A certification program for EHRs used in clinical research will be available in the fall, and programs in women's health and oncology are in development for spring 2011. ●