Meaningful Use. EHRs. Incentives. Prominent catchwords in the current national discussion on health care reform. Each presents challenging implications in its own right, but taken together they signify a veritable flood of government policies, technological practices, and financial promises that can seem overwhelming to even the most savvy medical practices trying to navigate the brave new world of health information technology (HIT).

A provision of the American Recovery and Reinvestment Act of 2009, the HITECH (Health Information Technology for Economic and Clinical Health) Act set as its goal the transformation of the quality, efficiency, and safety of American health care through the “meaningful use” of electronic health records (EHRs). Of course, physicians must play a central role in attaining such a goal. Many physicians, however, find themselves struggling to implement new HIT—such as EHRs—on their own and have few resources and little time to spare. Such lack of experience and capital, coupled with the threat of future Medicare penalties for not demonstrating meaningful use, seems poised, as it were, to sweep some smaller practices out to sea.

Enter WHITEC, the Wisconsin Health Information Technology Extension Center, 1 of 60 HIT Regional Extension Centers (RECs) funded through cooperative agreement with the Office of the National Coordinator for Health Information Technology (ONC). WHITEC is operated as a division of MetaStar, and is a joint venture of MetaStar, the Wisconsin Medical Society, the Rural Wisconsin Health Cooperative, the Wisconsin Hospital Association, and the Wisconsin Primary Health Care Association. In addition, the Wisconsin Department of Health Services is represented on WHITEC’s steering committee.

WHITEC’s goal is to facilitate Wisconsin’s effort to promote the widespread meaningful use of EHRs. The purpose of such HIT Regional Extension Centers is to provide education, outreach, and technical assistance to certain primary care providers in their region to assist them in selecting, successfully implementing and achieving meaningful use of certified EHR products. WHITEC sees itself on the side of the physician, providing assistance to the practice that is “shoulder to shoulder and elbow to elbow,” according to David Blumenthal, MD, the current National Coordinator for HIT.

Although WHITEC serves all Wisconsin health care professionals across the continuum of care, right now there are financial subsidies for priority primary care providers, who comprise WHITEC’s first mandate. Priority primary care providers include individual and small group practices, as well as certain public and critical access hospitals, federally qualified health centers, community health centers, certified rural health clinics, and generally those practices serving uninsured, underinsured, and medically underserved populations.

The technical assistance WHITEC provides to physician practices falls under 4 broad categories: planning, vendor selection, implementation, and meaningful use. Once a practice signs an agreement with the center, WHITEC conducts a readiness assessment to help determine a customized “road map” of assistance for that practice.

For practices without an EHR, the vendor selection services offered by the center may be reason enough to sign an agreement. With the hundreds of EHRs available on the market today, a practice can become easily mired in the process of finding a certified vendor that offers the functionality that meets the practice’s individual needs.

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goals while still having the capabilities to achieve the meaningful use standard. WHITEC is firmly vendor-neutral and is thus in a position to offer unbiased advice to physicians regarding selection of the EHR that best fits the unique needs of their practice. EHR vendors that agree to certain criteria established by WHITEC can join WHITEC’s preferred vendor list—and this tool can greatly streamline the selection, contracting, and installation stages of the implementation phase of assistance. With expertise in a number of preferred vendors, WHITEC serves as a liaison between the practice and the vendor during the implementation phase, saving a great deal of time and effort for the practice. If a practice has a pre-established vendor relationship, WHITEC will also collaborate closely with the practice to maximize results, an approach that reflects WHITEC’s commitment to practice partnership and open collaboration.

What chiefly differentiates the services and mission of WHITEC from the vendors or consulting firms in the private marketplace is WHITEC’s focus on achieving and sustaining meaningful use. There is an important point for physicians to keep in mind with regard to the available Medicare or Medicaid incentives: although incentive payments, practically speaking, will be used by physicians to offset their investments in an EHR, the payments are not regarded by CMS as direct reimbursement for that investment. Rather, the incentive payments are viewed as a reward for demonstrating the meaningful use of EHR technology in their practice of medicine. WHITEC’s focus on meaningful use ensures that the practice will comply with the meaningful use standard as defined by CMS so that they can receive the incentive payments.

WHITEC’s services do not end with the successful implementation of a new EHR. Rather, WHITEC continues to work with the practices until they achieve meaningful use and can sustain it in the long run. Not only does WHITEC partner with those practices implementing an EHR for the first time, it also works with practices that already have an EHR but who are having trouble optimizing it to achieve meaningful use. As a non-profit organization that takes its commitment to improve the quality of health care seriously, WHITEC is mission-driven rather than profit-driven. Thanks to the subsidies it receives from the government, its fees are minimal compared to those charged by the typical consulting firm. WHITEC’s own milestones are also completely aligned with those of the practices they serve: WHITEC receives its subsidies as practices successfully go live with a certified EHR and when the practices achieve meaningful use benchmarks.

Given the relatively short timeline for implementing EHRs in order to receive incentive payments, it behooves those practices that are considering adoption of an EHR or optimization of their existing EHR to register with WHITEC as soon as possible. Incentive payments begin in May 2011, so practices will need to begin their EHR imple-
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