



The Massachusetts Chapter

Board of Registration in Medicine

Proposed Regulations 243 CMR 2.10(4), 2.02 and 2.06 Electronic Health Records Training for Physicians

October 2, 2014

These comments are submitted on behalf of the Massachusetts Chapter, American Academy of Pediatrics (MCAAP) representing approximately 1,800 pediatricians across the Commonwealth. The members of the MCAAP are physicians dedicated to improving the quality of life for children by providing quality health care and advocating for them and their families. The MCAAP is committed to the attainment of optimal physical, mental and social health for all infants, children, adolescents, and young adults.

Electronic health records have become a vital tool in providing coordinated quality care to patients, and pediatricians are becoming quite proficient in their use as a key component of the medical home.

The Legislature's effort to encourage the use of electronic health records (EHR) and requiring physicians to demonstrate proficiency appears well meaning. However, the statutory reference that proficiency must be "at the level of the federal Meaningful Use as set forth in 45 CFR Part 170" is unattainable for certain physicians who are either ineligible or exempt under federal law from meeting those standards.

As an example, current provisions on the federal Meaningful Use program require physicians to meet BOTH of the following provisions to be eligible: 20% of patients on Medicare or Medicaid, and 50% of patients with online portal accounts and 5% patients contacting the physician via said portal. In certain parts of the state some pediatric practices may not be able to meet those criteria and are unable to participate in the federal Meaningful Use program.

The Board's proposed regulations are a reasonable and responsible approach to implementing the statutory requirement that physicians demonstrate EHR proficiency as a condition of licensure. The Board has created a workable path for physicians to meet that obligation.

The MCAAP strongly supports the provisions allowing physicians to demonstrate proficiency by the pathways created in the regulation:

- Participation in the federal Meaningful Use program; or
- Through employment with, credentialing by, or contractual agreements with an eligible hospital or critical access hospital with a CMS-certified Stage 1 Meaningful Use program; or
- Through completion of three hours of a category 1 EHR related CPD course that discusses, at a minimum, the core and menu objectives and the CQMs for Stage 1 Meaningful Use.

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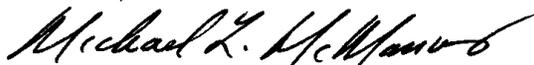
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Recommendations:

1. The MCAAP supports exempting medical residents and interns from the regulations. Because our academic centers have universally adopted EHRs, these young physicians are among the most adept at their use. What is unclear, however, is whether these physicians when applying for full licensure need to demonstrate EHR proficiency. It is our understanding that a physician cannot submit Meaningful Use attestation under CMS rules until they have a full year of billing data with Medicare or Medicaid. Therefore, no physician in training would be able to attest at the time of application for full licensure. While it is true that they may be able to meet one of the other pathways (employment, credentialed or contracting with a hospital with a Meaningful Use program, or complete the CME requirement), we urge the Board to consider allowing a physician completing a residency training program and applying for full license be deemed to have demonstrated EHR proficiency through successful completion of residency.
2. The proposed regulation allows a physician renewing a license to apply for a brief waiver to meet the proficiency requirements. We would urge the Board to extend the waiver opportunity to applicants for a new license. This would allow physicians coming to Massachusetts the time to meet the proficiency requirements after their arrival.
3. We note that pediatricians may practice in group practices that have adopted electronic health records that must be utilized by all physicians, which are comparable to hospital systems. We recommend expanding the proposed hospital pathway to include “, or provider organization with a Stage 1 Meaningful Use program that requires physicians to use electronic health records.”
4. We would urge the Board to provide in the regulations sufficient time for physicians to complete the CME course, particularly those who are up for license renewal at the beginning of 2015. There needs to be sufficient time allotted for the development of the courses and availability.

The MCAAP appreciates the work the Board has done in developing these regulations. We support them, and urge that you consider favorably our recommendations.

Respectfully submitted,



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President