

**MSSNY Health Information Technology Committee**  
**June 2, 2017**

Donald Moore, MD, Chair  
Brian Blaufeux, MD  
Deepak Buch, MD  
Amit Dholakia, MD  
David Dinhofer, MD  
Munish Khaneja, MD  
Thomas Madejski, MD  
David Page, MD  
Jeff Sneider, MD  
Zebulon Taintor, MD  
William Zurhellen, MD

Phil Schuh, MSSNY Staff  
Moe Auster, MSSNY staff

The meeting commenced at 7:45 AM

Minutes from the last meeting of the MSSNY HIT Committee on December 16, 2016 were unanimously approved.

**Committee Priorities**

Dr. Moore asked the Committee for recommendations for what should be the priorities of the HIT Committee, in response to a request from MSSNY President Dr. Charles Rothberg to identify priorities. Dr. Dinhofer suggested protecting patients' privacy of their medical records. Dr. Buch suggested simplification of the Medicare Merit Based Incentive Payment System (MIPS) program. Dr. Sneider suggested working it to make it easier for physicians to adopt and use EHR systems, to which Dr. Khaneja agreed since more information sharing was needed. Dr. Madejski noted the efforts of the AMA to fix the hassles associated with the MIPS program, and suggested the priorities focus on efforts MSSNY can take directly. Dr. Dinhofer suggested that MSSNY worked towards forming its own Accountable Care Organization (ACO), but Dr. Page responded that efforts could be better spent assisting physicians with connecting to their local RHIOs.

Therefore, the following priorities were identified:

- **Assistance to Physicians in Adopting and Using EHR/  
Facilitating Functionality and Interoperability of EHR Systems**
- **Reduction of Burdensome Mandates in EHR Use**
- **Protecting Patient Privacy**

**Advanced Primary Care (APC)**

Dr. Sneider discussed his concerns with the State's efforts to push the Advanced Primary Care (APC) model. He noted his concerns that the APC model adds an additional layer of burden and complication on physicians trying to participate in the existing Patient Centered Medical Home (PCMH). He also expressed concerns that funding was provided to those who were trying to assist physicians with the technical aspects of adopting these programs, rather than providing funding directly to the physicians. He noted efforts by the state to negotiate with NCQA to assure flexibility for use of PCMH or APC standards rather than both.

Dr. Khaneja noted the need to work with DOH to assure flexibility particularly for smaller practice physicians. In particular, it was noted that workgroups examining these standards include physicians from small practice and rural practice backgrounds. Moe Auster noted there has been MSSNY representation at these APC meetings, including a meeting yesterday where he reiterated to the assembled group the concerns many physicians have with implementing these burdensome programs. It was suggested that a subgroup of the HIT Committee meet with the DOH Medical Director overseeing this program, Dr. Marcus Freiderich, to urge simplification for physicians.

### **HIT Symposium**

Dr. Moore discussed his proposal to organize an HIT Symposium in fall 2017 in Brooklyn, to potentially be sponsored by the Kings County Medical Society, with possible sponsorship from MLMIC and assistance of MSSNY. One of the goals would be to educate physicians about liability issues that could arise through the use of EHRs.

### **Guiding Principle for EHR Technology**

Dr. Taintor noted his concern with the principles identified by the Massachusetts Medical Society were too "high minded". Instead, he believes efforts should be made to fight the "bloat" of documentation that is sometimes enabled through EHR systems, noting a recent example of someone being given a 120-page "cut and paste" electronic note which was not helpful to that physician who was seeking a patient's medical records. Dr. Blaufeux noted his concerns with the challenging documentation requirements associated billing for E&M codes. Dr. Moore shared his experience of writing a resolution from MSSNY sent to the AMA urging a revision of E&M standards that were developed prior to the use of EHRs. Dr. Taintor indicated his intention to write a "polemic" regarding principles for EHRs.

### **Burnout Survey**

Dr. Moore noted a recent MSSNY survey examining the factors related to physician burnout. The top factor was excessive documentation, followed by the increasing encroachment of professional issues into home life, both of which were related to EHR hassles. Dr. Buch noted the importance of training medical students and residents about these issues. Moe Auster noted Health Commissioner Dr. Zucker's speech to the House of Delegates that referenced issues related to physician burnout, which prompted Dr. Rothberg to schedule a meeting with Commissioner Zucker.

### **Telehealth Subcommittee**

Dr. Moore noted that, at Dr. Rothberg's request, a Subcommittee on Telehealth issues was being created. Phil Schuh noted that a survey was going to be sent to physicians to gauge their awareness and involvement with the delivery of services via telehealth since we have been contacted by several telehealth companies. Dr. Buch expressed concern that insurance companies were paying for out of state physicians via telehealth for services that he could provide. After Dr. Moore suggested that some HIT Committee members participate with this subcommittee, Dr. Buch and Dr. Taintor volunteered to serve.

### **Follow-Up**

Dr. Moore encouraged Committee members to bring up items for discussion for future meetings and suggested that the next meeting of the HIT Committee occur in September.

The meeting was adjourned at 8:45 AM