

## HIT Stimulus Timeline

### **45 Days:**

**Misc.** - HIT Policy Committee Appointed: Members must be appointed by authorized officials (3 HHS appointees, 4 political appointees, and 13 Comptroller General appointees). If they are not appointed within 45 days authority is given to the Secretary to appoint someone of his/her choosing. Pg 29 (Title XIII)\*

\*Unlike the Policy Committee, provisions regarding the appointment process for the HIT Standards Committee are not stipulated within H.R. 1. The bill does allow for the AHIC Successor, the National eHealth Collaborative (NeHC), to modify its membership, charter duties and other characteristics to become, with permission of the HHS Secretary, one of the two new Committees. Although NeHC is viewed as more of a policy oriented group, this clause has led to speculation that NeHC will become the HIT Standards Committee.

### **60 Days:**

**Guidance** – Protected Health Information – Technologies and Methodologies: The Secretary will issue a guidance specifying the technologies and methodologies that render protected health information unusable, unreadable, or indecipherable to unauthorized individuals. Pg 96 (Title XIII)

### **90 Days:**

**Misc.** – HIT Standards Committee Assesses Recs.: The HIT Standards Committee must develop a schedule for the assessment of policy recommendations developed by the HIT Policy Committee. Pg 32 (Title XIII)

**Misc.** – Draft Description of HIT Regional Centers: The Secretary will publish in the Federal Register a draft description of the program for establishing Health Information Technology Regional Extension Centers. Pg 61 (Title XIII)

### **120 Days:**

**Reports** – Medicare Advantage Payment Report (HHS): A report on the extent to which and manner in which payment incentives could be made available to professionals who are not eligible for HIT incentive payments and receive payments for Medicare patient services nearly exclusively through contractual arrangements with a MA organization. Pg 453 (Title IV)

### **6 Months:**

**Standards** - December 31, 2009: The Secretary will adopt an initial set of standards, implementation specifications, and certification criteria. Pg 37 (Title XIII)

**Regulations** - Breach Notification Requirement: The FTC is in charge of the promulgation of these regulations. Pg 97 (Title XIII)

**Regulations** - PHI Disclosures: Regulations regarding the accounting of certain PHI disclosures required if the covered entity uses EHRs will be promulgated 6 months after the Secretary adopts standards on accounting for disclosure. Pg 104 (Title XIII)

**Misc.** – Appointment of Privacy and Security Officers: The Secretary will designate an individual in each regional office of HHS to offer guidance and education to covered entities, business associates, and individuals on their rights and responsibilities related to Federal privacy and security requirements for protected health information. Pg 98 (Title XIII)

### **12 Months:**

**Report** - Additional Funding or Authority Report (ONC): A report addressing the needs by the National Coordinator, the HIT Policy Committee, or the HIT Standards Committee to better evaluate and develop standards, certification criteria, and implementation specification, as well as achieving full stakeholder participation. Pg 14 (Title XIII)

**Report** – Competitive Grants Report (HHS): A report that: 1) describes the specific projects established within the Competitive Grants to States and Indian Tribes for the Development of Loan Programs to Facilitate the Widespread Adoption of Certified EHR Technology; and 2) contains recommendations for Congress. Pg 81 (Title XIII)

**Report** – Compliance Report (HHS): A report concerning the complaints of alleged violations of law relating to privacy and security of health information that are received by the Secretary during the year. Pg 133 (Title XIII)

**Report** - Application of Privacy and Security Requirements to Non-HIPAA Covered Entities Report (HHS in consultation with the FTC): A report including: 1) requirements relating to security, privacy, and notification in the case of a breach of security or privacy (applies to vendors of PHRs, entities that offer products or services through the website of a vendor of PHRs, uncovered entities that offer products through websites of covered entities, uncovered entities that access information on a PHR or send information to a PHR, and third party service providers used by a vendor to assist in providing PHR products or services); 2) a determination of which Federal government agency is best equipped to enforce such requirement; and c) a timeframe for implementing regulations. Pg 136 (Title XIII)

**Report** - Treatment Disclosures – Best Practices Report (GAO): A report on best practices related to disclosure among health care providers of protected health information of an individual for purposes of treatment of such individual. Pg 138 (Title XIII)

**Guidance** – De-Identification of PHI: The Secretary will issue guidance on how best to implement the requirements for de-identification of protected health information. Pg 138 (Title XIII)

**Guidance** – Technical Safeguards for Business Associates of Covered Entities: The Secretary will issue guidance for business associates on the most effective and appropriate technical safeguards to implement privacy and security. Pg 89 (Title XIII)

**Misc.** - Chief Privacy Officer of the Office of the National Coordinator to be appointed. Pg 18 (Title XIII)

**Misc.** - Education Initiative on Uses of Personal Health Information: The Office of Civil Rights will develop and maintain a multi-faceted national education initiative to enhance public transparency regarding the uses and individuals rights of protected health information. Pg 98 (Title XIII)

**Misc.** - January 1, 2010: The Secretary may not make an award under Sec. 3014: Competitive Grants to States and Indian Tribes for the Development of Loan Programs to Facilitate the Widespread Adoption of Certified EHR Technology until this date. Pg 78 (Title XIII)

**Misc.** - HHS Report to Congress on Breaches: The Secretary must report the number of breaches and nature of breaches, as well as actions taken in response to such breaches. Pg 97 (Title XIII)

**Misc.** – Marketing – Compliance: Covered entities and business associates must be in compliance with new marketing restrictions by this date. Pg 111 (Title XIII)

**Misc.** – Fundraising – Compliance: Covered entities and business associates must be in compliance with new fundraising restrictions by this date. Pg 113 (Title XIII)

**Misc.** - Psychotherapy Notes Study (HHS): A report on the definition of psychotherapy notes with regard to including test data that is related to direct responses, scores, items, forms, protocols, manuals, or other materials that are part of a mental health evaluation. Pg 139 (Title XIII)

**18 Months:**

**Report** – Methodology for Individual Compensation Report (GAO): A report providing recommendations for methodology under which an individual who is harmed by an act that constitutes an offense may receive a percentage of any civil monetary penalty or monetary settlement collected. Pg 122 (Title XIII)

**Report** - June 30, 2010 – Application of EHR Payment Incentives for Providers not Receiving Other Incentive Payments Report (HHS): A report on: 1) the adoption rates of certified EHR technology by such health care providers; 2) the clinical utility of such technology; 3) whether the services are appropriate; 4) the extent in which health care providers might otherwise receive an incentive payment; 5) the potential costs and benefits of making payment incentives and other funding available; and 6) any other issues the Secretary deems appropriate. Pg 486 (Title IV)

**Report** - October 1, 2010 – Availability of Open Source Health Information Technology Systems Report (HHS): A report on: 1) the current availability of open source HIT technology systems to Federal safety net providers; 2) the total cost of ownership of such systems in comparison to the cost of proprietary commercial products available; 3) the ability of such systems to respond to the needs of, and be applied to, various populations; and 4) the capacity of such systems to facilitate interoperability. Pg 488 (Title IV)

**Guidance** – “Minimum Necessary” Health Information: The Secretary will issue a guidance on what constitutes “minimum necessary” health information. Pg 102 (Title XIII)

**Regulations** - Prohibition on the Sale of Data: Within the regulations, the Secretary will: 1) Evaluate the impact of restricting the exception (the purpose of exchange is for public health activities) to require that the price charged reflects the costs of preparation and transmittal of the data for such purpose, on research or public health activities; and 2) may further restrict the exception. Pg 109 (Title XIII)

**Regulations** - Improved enforcement (HHS): HHS will be in charge of enforcing non compliance issues. Pg 121 (Title XIII)

**24 Months:**

**Report** - Adoption of a Nationwide System Report (HHS): A report that: 1) outlines the actions taken by the government to facilitate adoption; 2) describes barriers to adoption; and 3) contains recommendations towards achieving full implementation. Pg 44 (Title XIII)

**Report** - Reimbursement Incentive Report (HHS): A report examining methods to create efficient reimbursement incentives for improving health care quality in federally qualified health centers, rural health clinics, and free clinics. Pg 45 (Title XIII)

**Report** - Aging Services Technology Report (HHS): A report studying matter relating to the potential use for new aging services technology to assist seniors, individuals with disabilities and their caregivers. Pg 45 (Title XIII)

**No Date Given:**

**Report** - Implementation Report (ONC): A report identifying lessons learned from major public and private health care systems in their implementation of HIT. Pg. 15 (Title XIII)

**Report** - Impact of HIT on Underserved Communities Report (ONC): A report assessing the impact of HIT in communities with health disparities and in areas with a high proportion of individuals who are uninsured, underinsured, and medically underserved (in urban and rural areas). Pg 15 (Title XIII)

**Report** - Benefits and Costs of the Electronic Use and Exchange of Health Information Report (ONC): A report evaluating the benefits and costs of the electronic use and exchange of health information. Pg 16 (Title XIII)

**Report** - Oversight of Payments Report (HHS): A report on the status, progress and oversight of payments encouraging the adoption of adoption and use of certified EHR technology, including Medicaid providers. Pg 504 (Title IV)

**5 Years (Not on Timeline):**

**Report** – Cost Report (GAO): A report on the impact of any provisions of the Act on health insurance premiums, overall health records by providers, and reduction in medical errors and other quality improvements. Pg 139 (Title XIII)