EHRD EVALUATION SITE VISIT DISCUSSION GUIDES

C.   GUIDE FOR WITHDRAWN TREATMENT GROUP PRACTICES

In the event that we cannot ask all questions in the following guide during a contact, question priority is reflected in the question numbering scheme. Numbered questions will always be asked during the discussion. Lower-case lettered questions are to be asked unless time is unusually short. Italicized questions are prompts to remind our staff of details to cover during discussion of the question.

1. Why did the practice decide initially to enroll in the EHR Demonstration? What benefits did it hope to gain?

2. [If voluntarily withdrew:] Why did the practice decide to withdraw from the EHR Demonstration? Please explain if any of the following were factors:

    a. [First round only:] No EHR or eEarly stage of health IT implementation at the practice and/or that would not have met minimal use criteria for the demonstration

    b. iInability to make health IT changes that would help enable high performance/bonus

    bc.Expected to be high performing but incentive bonus too low to be worth it (explore why—too few Medicare patients?)

    de.Did not expect to be high-performing

    ed.The practice's experience with the enrollment process

    fe. Anticipated burden of reporting (please explain)

    gf.Informal discussions on the topic with others (who?)

    hg.Lack of trust or confidence in the data reporting process

    ih. Lack of confidence in the data processing and reporting by CMS

    ji. Lack of interest in making changes to the practice that would help enable high performance

    kj. Availability of other pay-for-performance or pay-for-reporting programs

    lkol.   Other

3. Is the practice concerned about the demonstration leading to patients being turned away who are noncompliant, because they might reflect negatively on a practice's quality score?

    [If concerned:] What could be done to allay these concerns? For example, would it help if the outcome measures were risk-adjusted to take into account characteristics of your patient population such as presence of comorbidities, income, educational attainment, and race/ethnicity?

4. Is the practice concerned that the quality of care for conditions not being measured under the demonstration will suffer if practices shift their focus toward the outcome and process measures being evaluated?

5. Does the practice have any other concerns about unintended consequences of the demonstration?

6. [If was excluded due to no EHR use or answered that "a" of question 2 was a factor in its decision to withdraw from the demonstration:] What has kept the practice from implementing or using an EHR?

7. Does the practice participate in any other pay-for-performance programs? If yes, please describe, and compare/contrast the structure of that program to the EHR Demonstration.

8. ~~Does the practice anticipate receiving meaningful use payments from Medicare or Medicaid in 2011? Other years?~~

9. Does the practice participate in any other health IT initiatives? If yes, please describe, and compare/contrast the structure of that program to the EHR Demonstration.

10. If no, under what circumstances would you consider participating in a pay-for-performance program in the future?

11. What could CMS or others have done differently that would have prevented your decision to withdraw?