1. Define the following KEY TERMS:

Accreditation - The act of granting approval to a healthcare organization based on whether the organization has met a set of voluntary standards developed by an accreditation agency

Acknowledgements - A form that provides a mechanism for the resident to recognize receipt of important information

Ambulatory - Treatment provided on an outpatient basis

Ambulatory surgery center (ASC)- Under Medicare, an outpatient surgical facility that as its own national identifier; is a separate entity with respect to its licensure, accreditation, governance profession al supervision, administrative functions, clinical services, record keeping, and financial accounting services in connection with surgical procedures that do not require inpatient hospitalization and meets the conditions and requirements set forth in the Medicare Conditions of Participation.

AAAASF - American Association for Accreditation of Ambulatory Surgery Facilities;

Ancillary services - Tests and procedures ordered by a physician to provide information for use in patient diagnosis or treatment. Or Professional healthcare services such as radiology, laboratory or physical therapy.

Authentication - The process of identifying the source of health record entries by attaching a handwritten signature, the author’s initials, or an electronic signature.

Authorization - When a covered entity obtains or receives a valid authorization for its use or disclosure of protected health information, such use or disclosure must be consistent with the authorization.

Autopsy report - Written documentation of the findings from a postmortem pathological examination.

CAAs - Care area assessments

Care plan - The specific goals in the treatment of an individual patient, amended as the patient’s condition requires, and the assessment of outcomes of care; services as the primary source for ongoing documentation of the resident’s care, condition and needs.

CMS - Center for Medicare and Medicaid Services

CARF - Commission on Accreditation of Rehabilitation Facilities

Conditions for Coverage - Standards applied to facilities that choose to participate in federal government reimbursement programs such as Medicare and Medicaid.

Consent to treatment - When the patient gives the physician or other healthcare provider permission to touch them.

Consultation report - Documentation of the clinical opinion of a physician other than the primary or attending physician.

Documentation standards - Within the context of healthcare, describe those principles, codes, beliefs guidelines, and regulations that guide health record documentation

Documents imaging - It is the process by which paper-based documentation is captures, digitized, stored, and made available for retrieval by the end-user.

Expressed consent - The spoken or written permission granted by a patient to a healthcare provider that allows the provider to perform medical or surgical services.

EMTALA - Emergency Medical Treatment and Active Labor Act

Hybrid record - It is a combination of paper and electronic records; a health record that includes both paper and electronic elements.

Joint Commission - It is an independent, not-for-profit organization, the Joint Commission accredits and certifies more than 20,000 healthcare organizations and programs in the United States.

Legal health record - Documents and data elements that a healthcare provider may include in response to legally permissible requests for patient information.

MDS - Minimum Data Set for Long-Term Care

PAI - Patient Assessment Instrument

RAI - Resident Assessment Instrument

SOAP - Subjective, Objective Assessment Plan

Standing orders - Orders the medical staff or an individual physician has established as routine care for a specific diagnosis or procedure.

Statute - It is a piece of legislation written and approved by a state or federal legislature and then signed into law by the state’s governor or the president.

Transfer record - It is a review of the patient’s acute stay along with current status, discharge and transfer orders, and any additional instructions transferred to another facility.

Universal chart order - It is a system in which the health record is maintained in the same format while the patient is in the facility and after discharge.

2. Internet activity: obtain state and federal regulatory documentation mandates as they relate to electronic health records.

Federal

The Health Information Technology for Economic and Clinical Health (HITECH) Act specifies that physicians can qualify for $44,000 or more in economic stimulus incentive payment for adopting and implementing a certified EHR or EMR. The government allocated $27 billion dollars to help doctors transition from paper medical records to electronic medical records (EMR) systems or electronic health records (EHR) systems and show [meaningful use](http://www.medicalrecords.com/physicians/overview-of-meaningful-use-for-emr) of these systems. Physicians will be [assessed penalties](http://www.medicalrecords.com/physicians/electronic-medical-records-deadline) for not adopting an EMR system by 2015. . (www.medicalrecords.com/physicians/meaningful-use-government-incentives-information)

Each practitioner in your medical practice can qualify for $44,000 in Medicare Incentives or $63,750 in Medicaid Incentives. (www.medicalrecords.com/physicians/meaningful-use-government-incentives-information)

State of Maine

State EMR Requirements, Incentives and Tax Issues

HealthInfoNet is Maine’s Regional Extension Center and was created under the Health Information Technology for Economic and Clinical Health (HITECH) Act’s Health Information Technology Extension Program. This Regional Extension Center helps physicians in Maine with the adoption of health information technology (HIT). Its specific purpose is to create meaningful use of electronic health record (EHR) systems for physicians to improve their quality of care. (www.medicalrecords.com/maine-regional-extension-center-healthinfonet-emr-incentives)

1. Compare and contrast the mandates.

Whiles the Federal regulatory HITECH Act specifies the economic stimulus incentive payments, the HealthInfoNet is to create meaningful use of HER systems for physicians in Maine to improve quality of care.

1. Identify state and federal level mandates the contradict and are in harmony with one another.

The State and federal law and accrediting and licensing bodies who have the mandate to lay out a series of penalties for those who do not adopt certified HER/EMR system, have the same mandate to award incentives to physicians for implementing EMR system.

 3. a.  What influence do state and federal law and accrediting and licensing bodies have on the type of electronic health record system technology that is adopted by a healthcare provider organization?

The State and federal law and accrediting and licensing bodies have the authority to lay out a series of penalties for those who do not adopt certified HER/EMR system by a deadline.

1. What should healthcare providers consider putting into place to protect health record data to ensure that the

health record integrity remains intact as well as the health record data is available so that he patient can be treated?

Healthcare providers should consider buying and installing software that will be used for the EHR system and the health record data must be encrypted to avoid getting into wrong hands.