Health Information Technology and Meaningful Use

Policy and practice related to health information technology (HIT) is rapidly changing. Implementation of the Health Information Technology for Economic and Clinical Health (HITECH) Act of 2009 has stimulated health care providers to adopt “meaningful use” of electronic health records (EHRs). The meaningful use criteria are intended to increase health care provider use of—and patient access to—electronic health information. In this HINTS Brief, we present perspectives on HIT among both the general public and people affected by cancer.

Changes in policy and practice relevant to HIT stemming from the HITECH Act aim to improve the safety and quality of health care and to enable greater patient engagement. Effective implementation and meaningful use of EHRs is intended to benefit patient-centered processes of care and information management. As such, understanding patients’ attitudes and preferences on HIT will enable alignment of information management and resultant care processes with patient expectations and needs.

Quick Facts

• The HITECH Act created financial incentives for physicians and other health care providers to adopt and make meaningful use of electronic health records (EHRs).

• Adoption and meaningful use of EHRs aims to enable greater use of health information technology (HIT), improve patient care, and engage patients more actively in their health and health care.

• HIT may be particularly useful to and valued by those dealing with acute and/or chronic health conditions like cancer.

Consumer Perspectives

According to HINTS data collected on HIT in 2008, nearly half (48.6 percent) of the general adult population believed that it is very important for their health care providers to be able to share medical information with each other electronically. That percentage grew to 64.39 percent in 2012. Similarly, in 2008, 51.7 percent of the general population believed that it is very important that they be able to access their medical information electronically. That percentage grew to 70.34 percent in 2012.

How important is it to you that your health care providers are able to share your medical information with each other electronically?

How important would it be for you to get your own medical information electronically?

Data Source: Health Information National Trends Survey, 2008 and 2012
Perspectives on Electronic Health Information Exchange Among Cancer Survivors

A recent publication compared HINTS 2008 data on perceptions of EHIE to data from the LIVESTRONG (www.livestrong.org) Electronic Health Information Exchange Survey. Comparisons across these two data sets allow for an examination of differences in perceptions of EHIE by cancer status and some indication as to whether perceptions changed over time, as the HINTS data were collected in 2008 and the LIVESTRONG data were collected in 2010.

Specifically, while just under half of the general public surveyed by HINTS viewed the electronic exchange of information among health care providers and the ability to retrieve their own health information electronically as “very important” in 2008, respondents to the LIVESTRONG survey more frequently attached value to these activities, with approximately 82% of respondents living with cancer as a chronic disease, 80% of survivors currently in treatment, and 75% of survivors post-treatment, and 69% of LIVESTRONG respondents with no personal cancer history rating electronic exchange of information activities as very important.

Willingness to share anonymous health information for the purpose of research was somewhat higher among respondents to the LIVESTRONG than among the general adult population surveyed in HINTS. Almost a third of the HINTS respondents “strongly agreed” to sharing their health information for research, while more than half to nearly three quarters of respondents to the LIVESTRONG strongly agreed with this practice. Persons living with cancer as a chronic illness most frequently agreed to use of their medical information for research purposes (70 percent).

Attitudes Regarding Electronic Health Information Exchange Among Cancer Survivors and the General Public

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Data sources: Health Information National Trends Survey, 2008 (US Population Estimate); LIVESTRONG Electronic Health Information Exchange Survey (LIVESTRONG Survey Sample).

How Can This Inform Your Work?

• The successful implementation of the HITECH Act requires a patient-centered focus; understanding the specific needs of your patient population and health care practitioners is essential to meaningful use of EHRs.

• Findings from HINTS and the LIVESTRONG survey suggest that individuals—especially those who are medically involved—want to participate in and reap the potential benefits of HIT.

• Patient-centered applications of HIT can encourage greater patient engagement, support patient autonomy, and enable information sharing among patients, caregivers, and members of the health care team.

For More Information on Cancer

• Call the NCI Cancer Information Service at 1-800-4-CANCER
• Visit http://cancer.gov
• Order NCI publications at https://cisurecure.nci.nih.gov/ncipubs/
• Visit Facebook.com/cancer.gov and http://www.youtube.com/ncigov

References Used in This HINTS Brief
