



Eric Fishman, MD
President/CEO



VOLUME 3 SUMMER 2007

HIGHLIGHTS

- This month's listings are 1/2 page and more detailed, including target market, practice environment, structure, complete list of specialties and Dragon NaturallySpeaking® Compatibility Rating.
- H.R. 1952 National Health Information Incentive Act of 2007. Analysis and Interviews, by Eric Fishman, MD.
- Best-Of-Breed Electronic Billing Service and SaaS EMR Software Eight Transition Challenges and Integration Plan, by Yuval Lirov.

"The result of using 19th century technology in a 21st century health care system is higher costs, increased errors and decreased quality of care," said Stabenow.

"It's long past time that we fully utilize technology to make health care accessible and affordable for every family and business."

-Debbie Stabenow, (D-MI) in promoting the Health Information Technology Act of 2007

This month we continue to evaluate how the political environment will influence the practice of medicine in the decades to come. Having just recently spoken with a dozen experts in the field, the general consensus is that, while we may not have any earth shattering changes in the next 12 months from Washington, that we may expect substantial differences in the way that physicians get compensated shortly thereafter. With bipartisan bills in both houses of Congress, with bills pending in dozens of states, and with essentially all Presidential candidates promoting health IT, there is no doubt that the landscape will be changing in the near future.



Proposals range from having the government provide grants to physicians to purchase the software - an unlikely event in my humble opinion, to improved tax consequences of IT purchases, to the most likely which will be increased reimbursement, nationwide, to physicians who, utilizing appropriate interoperable

electronic health records, can demonstrate that they provide better quality care. Call it Pay for Performance, or more recently Pay for Reporting, these payment mechanisms will put the financial burden of acquiring this technology exactly where it belongs - on the shoulders of those who will reap the largest financial rewards.

Congressman Gonzalez, sponsor of H.R. 1952, is clearly a friend to the medical community. He had a lot of insight when he stated, quite clearly, that all members of Congress have personal physicians, and that these personal physicians should discuss health Information Technology with their Congressional patients, even in the examining room.

He further stated, as indicated on the cover of this magazine, that the country's medical societies should get involved in this transition. I for one have contacted my medical society on a number of occasions encouraging them to be involved in the nationwide transition to electronic health records.