

RES 16 C-3/19

| SUBJECT:      | Interoperable Electronic Medical Records                                  |
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| SUBMITTED BY: | Missouri Society of the American College of Osteopathic Family Physicians |
| REFERRED TO:  | 2019 ACOFP Congress of Delegates  |
|               |   |

## **RESOLUTION NO. 16**

| 1 | WHEREAS, the American Recovery and Reinvestment Act required all health care providers to |
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| 2 | switch to electronic medical records (EMRs) by January 1, 2014 to maintain                |
| 3 | reimbursements from Medicare and Medicaid, and  |
|   |   |

WHEREAS, as of 2011, there are over 300 different types of electronic health record systems
on the market that rarely communicate amongst each other except via secondary
means, and

## WHEREAS, the office of the National Coordinator for Health Information Technology report of 2016 indicated that 48% of physicians and 82% of hospitals share partial information of patient information, and

- WHEREAS, lack of access to patients' entire medical records creates more burden of seeking
   information in the clinic and increases repetitive tests among all providers, and
- WHEREAS, the Family Medicine for America's Health published in 2016 for a Principled
   Redesign of Health Information Technology with the intent to seek comprehensive
   access to health information among all health care providers; now, therefore be it
- RESOLVED, that ACOFP encourages manufacturers of electronic health record (EHR)medical
   systems to pursue efficient interoperability of all EMRs, requiring each to participate;
   and, be it further
- 18 RESOLVED, that the American College of Osteopathic Family Physicians works with the
   19 Centers for Medicare and Medicaid Services to ensure collaboration of EMRs and
   20 ensure that participants can meet Meaningful Use requirements more efficiently.
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## Explanatory Statement:

The purpose of this resolution is to seek an efficient interoperability of the electronic medical records to ensure more efficient sharing of patient information amongst systems to ensure efficiency in clinical settings and reduce avoidable medical errors.

FINAL ACTION: <u>APPROVED as of March 21, 2019</u>