

Electronic health records implementation: can the European Union learn from the United States?

Fabrizio Toscano

F Toscano¹, E O'Donnell¹, MA Unruh¹, D Golinelli², G Carullo³, G Messina⁴, LP Casalino¹

¹Healthcare Policy and Research, Weill Cornell Medicine, New York, USA

²Department of Biomedical and Neuromotor Sciences, University of Bologna, Bologna, Italy

³Department of Italian and Supranational Public Law, University of Milan, Milano, Italy

⁴Post Graduate School of Public Health, Department of Molecular and Developmental Medicine, University of Siena, Siena, Italy

Contact: ftoscanomd@gmail.com

Issue/problem:

Despite the implementation of large-scale programs to promote the adoption and use of electronic health records (EHRs) among physicians in the United States (US), patient concerns regarding health information exchange security are present.

Following Directive 2011/24/EU, the European Union (EU) aims to establish a shared European infrastructure by 2020, which allows their citizens to access and share EHRs across borders. As the time for decisions is approaching, can the EU learn from the US experience?

Description of the problem:

Between 2011 and 2016 more than \$35bn (€28bn) in US public funds were used to promote adoption and “meaningful use” of EHRs among physicians and hospitals through a mix of incentives payments and penalties.

Results:

According to the office of the National Coordinator for Health Information Technology, over 95% of all eligible hospitals qualified for incentive payments through meaningful use of an EHR in 2016, while only 62% of eligible office-based physicians attested for meaningful use - despite 87% having EHR capability. In 2017, 74% of US patients are confident that their medical records are safe from unauthorized viewing, but 66% expressed concerns over the electronic exchange of health information. Interestingly, these percentages have remained unchanged since 2011, when meaningful use was first implemented.

Lessons:

The US case shows how large-scale projects implemented from the top can promote adoption and use of EHR among health care providers, especially in the hospital setting. However, patient concerns regarding a crucial feature of EHR such as the exchange of health information, could influence – as well as be influenced by – office-based physicians EHR meaningful use. European policymakers should learn from the US experience and consider bottom-up strategies to increase awareness of the benefits of EHR among the general population, as their contribution will be crucial in this important transition.

Key messages:

- Lessons can be learned from the US experience of implementing EHR technologies.
- Patients are concerned over their privacy when health information is exchanged electronically.