

Did You Know That ARRA Stimulus Money for Meaningful Use of an EMR is Taxable*?

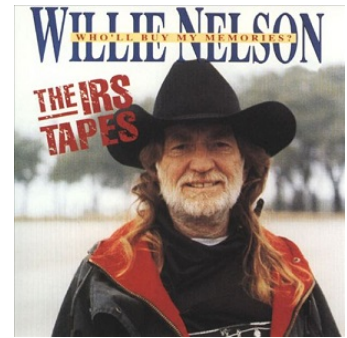


Image via [Wikipedia](#)

What?

But aren't eligible providers getting that money as an inducement, actually a prize for hoop-jumping, having purchased a certified EMR and now using it meaningfully?

Oh, man, I knew there was a catch to this deal.

Next you'll be telling me that Medicare's reimbursement will be shrinking 21.2% November 30, 2010 and an additional 6.1% January 1, 2011.

What?

*Thanks to [HISTalk Practice](#) for pointing out [this revelation from the AAFP](#).

Nuance (Dragon) Comments on Blocking the Consumer Edition from EMR Integration



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My August 20th post ([read it here](#)) noted that Dragon voice recognition software has been quietly gaining acceptance as a mainstream solution to hefty transcription costs and EMR integration. 10% of the healthcare providers in the United States are currently using Dragon Medical.

Yesterday, [HISTalk](#) noted that:

At least one doc is [unhappy](#) that Nuance has blocked the use of Dragon Naturally Speaking with EMRs in Version 10. Nuance states “...we found that some large hospitals were using the consumer editions of Dragon and not getting the accuracy, quality and manageability that would be achieved when using Dragon Medical.”

Nuance responded on HISTalk via comment, saying in part:

“Nuance has made a significant investment in building, tuning and distributing Dragon Medical for exclusive use by the health care industry. The integration and engineering required to deliver the ease-of-use of Dragon Medical with all major EMR vendors, including Allscripts,¢, Epic, Misys®, GE® Healthcare, NextGen®, Siemens, eClinicalWorks, Meditech, McKesson®, Cerner and Eclipsys®, requires a Herculean effort, comprising thousands of man hours in developing and testing. As one would expect, there is a premium associated with the

delivery of this capability and the resources devoted to further hone and evolve the product to meet the specific needs of the medical end user.”

Nuance also points to the Microsoft model of charging differently for enterprise/professional software and consumer software offerings.

I don't dispute a vendor's right to charge accordingly for a product that has taken a lot of R & D to bring to the market, but like everything else that has a place in the medical world, it will cost much more based on the healthcare application. A set of plastic drawers for home costs \$9.99 at your local store and lists for \$99.99 in a medical catalog.

Misys, iMedica and a Cast of Thousands: Interesting Interview Worth the Read



[HIStalk](#) (an interesting healthcare IT blog written anonymously) has a great [interview](#) with Michael Nissenbaum, President and CEO of iMedica. Nissenbaum speaks about his 10 years in the field with Millbrook, GE and now iMedica, talks about Misys leasing the iMedica [EHR](#) product under the name MyWay, and gives an interesting rundown of some players in the ever-changing field of medical practice software.

I see a cycle that's been in healthcare for years. Right now, it's hospitals providing software to physicians under the

Stark exemption. A year from now, when we have a new administration, God knows what the new rules are going to be. You and I both have seen it. We have seen centralization and de-centralization. – Michael Nissenbaum