

There are an increasing number of job opportunities in health care as the industry moves to digitize health records and implement the federal health care reform legislation, but there aren't enough qualified candidates.

Health care information technology leaders said Thursday at the Maryland Economic Development Association's fall conference on health care and bioscience that they can't find enough qualified people to match their industry's growth. And John Colmers, secretary of the state's Department of Health and Mental Hygiene, said there is a shortage of primary care physicians, registered nurses and other medical professionals, especially since insurance rolls are slated to increase between now and 2014.

Health care IT professionals expressed big dreams for the future of health care, from being able to access one's medical records at a hospital in Baltimore or one in California, to allowing patients to access a centralized portal to research different doctors and specialists in their area.

Keith Lemer, president of Bethesda-based WellNet Healthcare, said he hopes to be able to apply Web 2.0 concepts to health care.

"What if businesses could manage their health care in the same way they manage every other aspect of their business?" Lemer said. "If we can bring all of the information together, we could manage health care in real time, in a single, integrated environment, providing understanding and engagement tools not only for providers but consumers."

And Arthur Lehrer, president of ViPS Inc., a Baltimore-based health care technology firm, pointed to other states that have consolidated data on health care providers for consumers.

"In Massachusetts and New York, consortia have been established, taking multiple plans and bringing the data together to create common quality metrics," Lehrer said. "We can use that to make a consumer portal, using a standard five-star rating system to provide commonality and consistency."

But Michele Perry, chief operating officer for Bethesda-based GetWellNetwork, said the health care business still has a great deal of work to do in simply digitizing and consolidating medical records.

“When I first entered the health care IT field [last year], I was shocked at how backwards it was,” Perry said. “There were no incentives to implement electronic records, and not qualified people to do the jobs these hospitals need.”

And Lehrer said his company has more than 100 open positions that he has had difficulty filling.

“We’re trying to build closer relationships with universities, and offer internships and opportunities for graduates,” he said. “So when they come out of school, they can be ready with the proper training to stay on the leading edge of health care technology.”

Colmers said that although there are not enough medical practitioners to handle rural areas or the influx of newly insured in the coming years, the state is already acting to try and produce and attract more health care professionals.

“We’re working with the Governor’s Workforce Investment Board on ways to assist two- and four-year higher education and professional schools to expand the pipeline,” he said. “As far as concerns about an adequate number of primary care physicians, we’re offering loan forgiveness plans to attract new physicians [to rural and underserved areas of the state].”

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