

March 2017

## Need Help?

### Clinical Data Repository (CDR):

Need CDR help? Please contact our team at: [healthit@hca.wa.gov](mailto:healthit@hca.wa.gov) and put "CDR" in the subject line or visit our website at <http://hca.wa.gov/about-hca/health-information-technology>

To take the first readiness steps in adopting the CDR please visit the OneHealthPort readiness page: <http://www.onehealthport.com/prepare-c-cda>

### Electronic Health Records (EHR):

Need EHR help? Please contact our team at: [healthit@hca.wa.gov](mailto:healthit@hca.wa.gov) and put "EHR" in the subject line or visit our website at <http://hca.wa.gov/about-hca/health-information-technology>

Security or log-in issues with ProviderOne? Please contact: [ProviderOneSecurity@hca.wa.gov](mailto:ProviderOneSecurity@hca.wa.gov) for assistance with your P1 password or when you have a change in staff resulting in a new System Administrator for your office.

- CMS EHR Help Desk: 1-888-734-6433 Option #1.
- CMS Account Security and to update your accounts contact person: 1-866-484-8049 Option #3.
- Did you know that CMS has its own Listserv? To subscribe: Subscribe to CMS EHR Incentive Programs Listserv.

Remember to keep an electronic back-up or file of all documentation/reports used during each attestation. This will save you considerable time and efforts if you are ever asked to provide attestation materials during an audit.



## Your Input is Needed

We are just now beginning to hear from providers about charges that some certified EHR system vendors are charging and noticing the fiscal impact on practices - in response to these reports we developed a short survey. We will present the results to our upper leadership and determine if there might be any funding streams available to help offset the interface development costs or subscription fees.

Take the survey here: <https://www.surveymonkey.com/r/cdrfees>



## Business Rule for EH Medicaid

Effective Program Year 2017, no Medicaid incentive payment may be made to a Provider unless the Provider has been paid for the previous year.

1. As a result, Medicaid eligible EHs must receive an incentive in Program Year 2016 to receive one in 2017.
2. In no case may any EH attest after the tail period in 2022.

## 90 Day Meaningful Use Reporting for 2016

On November 14, 2016, CMS issued a Final Rule to take effect on 1/1/2017 that allows Eligible Providers to use 90-day spans for all Meaningful Use attestations for 2016.

For Meaningful Use Years 2 through 5 you have the option of reporting using a 365 day reporting period, or a 90 day reporting period. Due to system updates required to accommodate these changes those providers wishing to attest with a 90 day reporting period will not be able to do so until mid-Spring. HCA will send a notification when the system has been updated to accept MU Year 2 and beyond 90 day attestations. At that time HCA will extend the deadline to attest (MU Year 2 through 5 ONLY) by 60 days per CMS requirements. For example, if the system opens to allowing the 90 day MU attestations on 5/5/15, providers will have until 7/4/17 to attest.

## Total EHR Incentive Dollars Paid Out to Date

### Hospitals

	Paid for Year 1	= 88	\$63,781,127.00
	Paid for Year 2	= 78	\$35,845,012.00
	Paid for Year 3	= 66	\$24,811,014.00
	Paid for Year 4	= 46	\$14,001,019.00
	<b>Eligible Providers</b>		
	Paid for Year 1	= 6,636	\$140,384,613.00
	Paid for Year 2	= 2,911	\$24,601,850.00
	Paid for Year 3	= 1,807	\$15,319,838.00
	Paid for Year 4	= 864	\$7,310,004.00
	Paid for Year 5	= 215	\$1,824,667.00
	Paid for Year 6	= 6	\$51,000.00
	<b>GRAND TOTAL PAID</b>		
	SINCE 6/1/2011:	=	\$327,930,144.00

Please do not reply directly to this message. If you have feedback or questions, please visit the [HealthIT website](#) for more information or email us at [HealthIT@hca.wa.gov](mailto:HealthIT@hca.wa.gov).