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HEALTH INFORMATION TECHNOLOGY

Health Information Technology updates

Attention. In our current system we have a very large subscription list of those wanting EHR updates and those wanting CDR updates. When this was set up it was not split into 2 different lists so when we need to send program updates or information, it currently goes to both EHR and CDR subscribers. This has obviously created some confusion as certain updates only apply to half the subscriber list. To address this, we are creating an EHR Subscriber List and a CDR Subscriber List. Please subscribe to whichever best meets your needs. Once these lists have reached a subscriber amount equal to the original list we will delete the old list. So please be sure to subscribe as soon as possible. Thank you for understanding.

- Subscribe to CDR updates
- Subscribe to EHR updates

Clinical Data Repository updates

The Clinical Data Repository (CDR) has been open for a few months for providers that have successfully completed their readiness activities.

In this issue

- Health Information
 Technology updates
- Clinical Data Repository updates
- <u>Electronic Health Record</u>
 <u>updates</u>

Need help?

Clinical Data Repository (CDR):

- CDR resource page
- Readiness steps with OHP
- Email HCA
- Email OHP

Electronic Health Records (EHR):

- EHR resource page
- ProviderOne help
- CMS EHR Help desk: 1-888-734-6433 option #1

They are submitting their clinical summaries in a standard electronic format called a Continuity of Care Document (CCD) after each outpatient encounter or inpatient admission.

Currently, a health record has been established for 2 million Apple Health consumers, including claims and encounter data from January 2016 onward. We are also fast approaching one million CCD submitted to the system to populate the clinical portion for many of those beneficiaries.

OneHealthPort has also just completed a series of webinars covering their improvements in patient matching algorithms. The process involves the Sponsor ID used for the patient (for HCA this is the ProviderOne ID), demographics (especially the Date of Birth) and the Social Security Number (if submitted). More than one attribute can be checked for a match. If you were not able to attend the webinars, we highly recommend that you contact OHP for any question on this topic.

Although participation in the CDR is not mandated for the Meaningful Use program at this point in time, many providers have not been able to meet the requirements for sharing care summaries with others. Just as a reminder – providers can now meet this objective by contributing care summaries to the CDR. Look for a webinar on this topic coming soon.

Finally, in the coming months we will open the CDR web portal for your clinical staff to view the data. In order to make using the system as easy as possible we will provide educational handouts and webinars for your use. To that end, we request

- CMS account security: 1-866-484-8049 option #3
- CMS listserv

contact information for your physician education staff or the individual in your practice responsible for distributing information to

them. We would appreciate one name with their phone and e-mail information by **Sept 12**. We can then provide them with our materials so your organization can make use of this new clinical service. Please send the name and contact information to healthit@hca.wa.gov, with "Trainer" in the subject line.

We appreciate your engagement in this initiative as we continue working collectively to better serve our clients.

Electronic Health Record updates

From CMS: The Medicaid EHR Incentive Program Continues Through 2021

The Centers for Medicare & Medicaid Services (CMS) would like to remind eligible professionals (EPs) and eligible hospitals that the Medicaid EHR Incentive Program, which is administered voluntarily by states and territories, will continue through 2021.

To participate in the program in 2017, EPs and eligible hospitals must attest to:

- Modified Stage 2 objectives and measures, or
- Stage 3 objectives and measures

To learn more, visit the <u>2017 program</u>

<u>requirements</u> page on the <u>EHR Incentive Programs</u>

website. For state-specific information and

resources, review the <u>Medicaid State Information</u> page.

Incentive Payment Information

- There are no payment adjustments in the Medicaid EHR Incentive Program.
- EPs and eligible hospitals who meet program requirements can continue to attest to their state Medicaid agencies to receive yearly incentive payments.
- The incentive payment is a fixed amount for each year of participation.
- EPs and eligible hospitals can receive incentive payments for six years nonconsecutively. EPs and eligible hospitals who began the program in 2016 must participate consecutively to receive the full payment amount over six years.
- Eligible hospitals that are eligible to participate in the Medicare and Medicaid EHR Incentive Programs may attest under Medicare to avoid a payment adjustment.

Please note: 2016 was the last year EPs and eligible hospitals could begin participation in the Medicaid EHR Incentive Program.

Medicaid EHR Incentive Program and the Merit-based Incentive Payment System (MIPS)

MIPS does not replace the Medicaid EHR Incentive Program. If a provider plans to participate in the

Medicaid EHR Incentive Program through their state and they are also a Medicare Part B clinician who is eligible for MIPS, they will also need to participate in the MIPS program to avoid a negative MIPS payment adjustment.

For More Information

- Visit the EHR Incentive Program website
- Email your questions to EHRInquiries@cms.hhs.gov
- To learn more about MIPS, visit https://qpp.cms.gov/

Register Now for the FY 2018 IPPS Final Rule:
Overview of the Hospital IQR Program and
Medicare and Medicaid EHR Incentive
Programs Specific to eCQMs and MU
Requirements

On Tuesday, September 12 at 2 p.m. ET, the Centers for Medicare & Medicaid Services (CMS) will host a webinar that will provide an overview of the fiscal year (FY) 2018 Inpatient Prospective Payment System (IPPS) Final Rule. This webinar will review electronic clinical quality measure (eCQM) reporting requirements for the Hospital Inpatient Quality Reporting (IQR) Program and Medicare and Medicaid Electronic Health Record (EHR) Incentive Programs for eligible hospitals and critical access hospitals (CAHs) and other meaningful use (MU) requirements.

Date: Tuesday, September 12

Time: 2-3 p.m. ET

Objective: Locate and identify changes within the

FY 2018 IPPS Final Rule

Audience: Participants in the Hospital IQR Program and the Medicare and Medicaid EHR Incentive Programs for eligible hospitals and CAHs.

Webinar Slides: Will be available for download the day before the presentation under the "Upcoming Event" section on the

www.QualityReportingCenter.com.

Presenters:

- Grace H. Snyder, JD, MPH, Program Lead, Hospital IQR and Hospital Value-Based Purchasing Programs, Quality Measurement and Value-Based Incentives Group (QMVIG), Center for Clinical Standards and Quality (CCSQ) at CMS
- Mihir P. Patel, MHA, Lead, Hospital Inpatient and Outpatient Quality Reporting Program Data Validation, CCSQ at CMS
- Lisa Marie Gomez, MPA, MPH, Health Insurance Specialist, Division of Electronic and Clinical Quality, CCSQ at CMS
- Kathleen Johnson, BS, RN, Health Insurance Specialist, Division of Health Information Technology (DHIT), CCSQ at CMS
- Steven E. Johnson, MS, Health Insurance Specialist, DHIT, CCSQ at CMS

Event Registration:

https://cc.readytalk.com/r/yixo63hpt0tr&eom

For More Information

For further assistance regarding the information contained in this message, please contact the Hospital Inpatient Value, Incentives, and Quality Reporting Outreach and Education Support Team at https://cms-ip.custhelp.com or (844) 472-4477.

New Way to Send Comments, Feedback to ONC

ONC has updated the Health IT Complaints Form to accept all types of public feedback in one centralized tool and we've expanded the number of categories available through which the public can provide input. The goal of this new form is to make it easier for the public to contact ONC with concerns, questions and input on a variety of topics including health IT and ONC programs. View the new Health IT Feedback Form.

Upcoming Health IT Events & Deadlines SEPTEMBER 6: Workforce Training Webinar

ONC is hosting an informational webinar featuring workforce training awardees in September showcasing the free workforce training modules available for health IT professionals and educators. These modules, used by more than 9,000 individuals who recently completed the programs, cover a variety of topics including population health, care coordination & interoperable health IT systems, value-based care, patient-centered care, and healthcare data analytics.

contact: ONCwebinars@mathematica-mpr.com.

Date & Time: Wednesday, September 6, 2017 at

11:00am - 12:00pm ET

Register: Workforce Training Instructional

Materials for Health IT Professionals and Educators

EHR stats

Hospital payments

Year 1 = 88 (\$63,781,127)

Year 2 = 80 (\$35,927,940)

Year 3 = 77 (\$29,081,024)

Year 4 = 60 (\$17,703,489)

Total = 305 (\$146,493,580)

EP payments

Year 1 = 6,932 (\$146,667,530)

Year 2 = 3,137 (\$26,517,184)

Year 3 = 2,217 (\$18,796,339)

Year 4 = 1,464 (\$12,398,672)

Year 5 = 723 (\$6,125,669)

Year 6 = 182 (\$1,544,167)

Total = 14,655 (\$212,049,561)

Grand total = \$358,543,141

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About the Health Care Authority (HCA)

The Washington State Health Care Authority purchases health care for more than 2 million Washington residents through Apple Health (Medicaid) and the Public Employees Benefits Board (PEBB) Program. As the largest health care purchaser in the state, we lead the effort to transform health care, helping ensure Washington residents have access to better health and better care at a lower cost.

Please do not reply directly to this message. For more information, <u>visit the HCA website</u>, where you'll also find contact information.

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