MO HealthNet EHR Incentive Program

2015-2017 Modified Stage 2 – March 2016

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What You Need to Know for Program Year 2015

1. Program Changes & Updates
   - Reporting Period, CEHRT
   - Modified Stage 2 Measures, CQMs

2. Required Documents
   - Medicaid Patient Volume Report
   - Contract for CEHRT
   - Summary Report of MU Objectives*
   - Security Risk Assessment Questionnaire*
   - Public Health Active Engagement*
   - Direct Deposit Information
   - Attestation Agreement

3. State Level Registry – Dates Open

4. Resources & Questions

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Clarifications – MU Stage 3 still in effect

EHR Incentives Programs – effective dates
- Medicaid program authorized until 2021
- Medicare program authorized until 2016

Program Year 2015 Deadlines
- Medicare attestations: now – March 11, 2016
- Medicaid attestations: mid April – June 2016

Alternate Attestations – Hardship Exceptions
- Alternate Method, now – March 11, 2016
- Hardship Exception: now – July 1, 2016

Overview of Program Changes

- 90-day EHR Reporting Period, regardless of MU Stage

- Program Year based on Calendar Year, for Hospitals and Professionals

- Continued use of 2014 Edition CEHRT for 2015
  - No changes required until 2018 when 2015 Edition is required

- All participants in Modified Stage 2
  - Meaningful Use Objectives Reduced to 10 for EPs, 9 for EHs
  - Alternate Objectives & Exclusions for Stage 1
  - Modified Public Health Reporting Requirements

- CQM selections, reporting continue as in previous years

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Meaningful Use Objectives and Measures

Modified Stage 2 Objectives:

- Protect Patient Health Information
- Clinical Decision Support
- CPOE
- Electronic Prescribing (eRx)
- Health Information Exchange
- Patient Specific Education
- Medication Reconciliation
- Patient Electronic Access
- Secure Messaging (EPs only)
- Public Health and Clinical Date Registry Reporting

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Meaningful Use Stage in PY 2015

- Participation years determine the MU Stage (for exclusions and alternate measure responses).

  Meaningful Use Stage 1 = AIU + MU1 + MU2

  Meaningful Use Stage 2 = MU3 + MU4 and beyond

- The State Level Registry will determine which Stage a provider would have been in for PY2015 based upon previous attestations in the system.

- Alternate exclusions and measures will be presented in the system to those in Stage 1.

Required Attachments for 2015 Attestations

- **AIU Attestations**
  - Medicaid Eligibility – DCN report with patient volume
  - Certified EHR Technology – vendor contract or letter
  - Direct Deposit Form (voided check or bank letter) – for automated payment
  - Federal Document – confirm legal name of payee
  - Signed Attestation – summary of information provided

Required Attachments for 2015 Attestations

- **MU Attestations**
  - Summary Report from 2014 CEHRT – meaningful use measures report generated by EHR system
    - ○ Report for each EP
  - Protect Patient Health Information – supporting documentation of Security Risk Assessment
    - ○ Original assessment or review of assessment for 2015
  - Public Health Measures – supporting documentation of active engagement
    - ○ Letter from DHSS confirming engagement and/or exclusions

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Meaningful Use Objectives – Documentation

Modified Stage 2 Objectives:

❖ **MU Summary Report from 2014 CEHRT**

- **Protect Patient Health Information**
- Clinical Decision Support
- CPOE
- Electronic Prescribing (eRx)
- Health Information Exchange
- Patient Specific Education
- Medication Reconciliation
- Patient Electronic Access
- Secure Messaging (EPs only)
- **Public Health and Clinical Date Registry Reporting**

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CEHRT MU Summary Report of Objectives

- Select the 90-day EHR reporting period that will be used during attestation.

- Using your 2014 CEHRT Software, run the Meaningful Use Summary reports for providers.

- A report will be required for each EP beginning in Program Year 2015.

- The report is a required attachment on the screen that requests the 90-day reporting period.

- For assistance, contact your EHR vendor.

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Protect Patient Health Information

Objective:

> **Conduct or review a security risk analysis** in accordance with the requirements in 45 CFR 164.308(a)(1), including addressing the security (to include encryption) of ePHI created or maintained in CEHRT in accordance with requirements under 45 CFR 312.(a)(2)(iv) and 45 CFR 164.306(d)(3), **and implement security updates as necessary and correct identified security deficiencies** as part of the EP's, EH's and CAH's risk management process.

Protect Patient Health Information

Objective con't:

Under the HIPAA Security Rule, you are required to conduct an accurate and thorough **analysis of the potential risks and vulnerabilities to the confidentiality, integrity, and availability of ePHI**.

Once you have completed the risk analysis, you must take any additional "reasonable and appropriate" steps to reduce identified risks to reasonable and appropriate levels. (45 CFR 164.308(a)(1)(ii)).

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Protect Patient Health Information

Alternate Exclusions and/or Specifications:

There are **no exclusions** for this Meaningful Use Objective. All EPs, EHs and CAHs must meet the measure to be a Meaningful Use participant and receive an EHR Incentive payment.

EPs attesting to AIU are not required to meet this Meaningful Use objective/measure in 2015.

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Protect Patient Health Information – Resources

ONC security risk analysis questionnaire:

https://www.healthit.gov/providers-professionals/security-risk-assessment

CMS security risk analysis tip sheet

https://www.cms.gov/regulations-and-guidance/legislation/ehrincentiveprograms/downloads/securityriskassessment_factsheet_updated20131122.pdf

Public Health Reporting – Objectives & Measures

Public Health Reporting

- **Objective**: The EP, eligible hospital or CAH is in active engagement with a public health agency to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.

- *EPs must meet 2 of 3 measures; eligible hospitals/CAHs must meet 3 of 4 measures:*
- **Measure 1 - Immunization Registry Reporting**: The EP, eligible hospital, or CAH is in active engagement with a public health agency to submit immunization data.
- **Measure 2–Syndromic Surveillance Reporting**: The EP, eligible hospital, or CAH is in active engagement with a public health agency to submit syndromic surveillance data.
- **Measure 3–Specialized Registry Reporting** - The EP, eligible hospital, or CAH is in active engagement to submit data to a specialized registry.

- **Measure 4 – Electronic Reportable Laboratory Result Reporting (for Eligible Hospitals/CAHs only):** The eligible hospital or CAH is in active engagement with a public health agency to submit electronic reportable laboratory (ELR) results.

- **Alternate Specification**: An EP scheduled to be in Stage 1 in 2015 may meet 1 measure and an eligible hospital or CAH scheduled to be in Stage 1 in 2015 may meet two measures.

- *Multiple exclusions apply.*

Public Health Reporting – Options

Objective:

The Eligible Professional, Eligible Hospital or Critical Access Hospital is in **active engagement** with a public health agency to submit electronic health data from Certified Electronic Health Record Technology (CEHRT).

There are three levels of **active engagement:**

1. Registration
2. Testing
3. Production

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Public Health Reporting – Options

Registration:

The EP registered to submit data with the state's Public Health Agency to which the information is being collected, and the EP is awaiting an invitation to begin testing and validation.

Providers that have registered in previous years do not need to submit an additional registration to meet this requirement for each EHR reporting period.

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Public Health Reporting – Options

Testing and Validation:

The EP is in the process of testing and validation of the electronic submission of data. Providers must respond to requests from the PHA within 30 days; failure to respond twice within an EHR reporting period results in the EP not meeting the measure.

Production:

The EP has completed testing and validation of electronic submission and is electronically submitting production data to the PHA.

Public Health Reporting – Resources

DHSS consultation on the Public Health measure:

- email: MOPHIE@health.mo.gov
- website: www.health.mo.gov/atoz/mophie

CMS new guidance on Public Health Reporting:

- https://www.cms.gov/Regulations-and-Guidance/ Legislation/EHRIncentivePrograms/FAQ.html
- Timing to register intent: FAQ #14393
- Didn't intend to report, don't have software: FAQ #14397
- Alternate exclusions: FAQ #14401
- Specialized registries: FAQs #13657, 14117 & 13653

MO State Level Registry Availability

Program Year 2015

- Missouri's SLR is developing new screens and functionality to reflect the changes for Modified Stage 2, PY 2015.

- The SLR will re-open to receive EHR Attestations for PY 2015 for both AIU and Meaningful Use on the following schedule:

  - EPs = mid April – June 2016

  - EHs = September – November 2016

  - Specific dates will be announced

MO State Level Registry Availability

Program Year 2016

- Missouri's SLR for PY 2016 will be open following the end of PY 2015.

- The **tentative schedule** for the SLR for PY 2016 for both AIU and MU is as follows, subject to CMS approval:

  - EPs = open July 2016 – February 2017
  - EHs = open December 2016 – February 2017

- 2016 is the last year to begin participation in the program.

- The EHR reporting period for 2016 is a full year.

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CMS EHR Incentive Webpage

- **CMS EHR Incentive Program Requirements 2015**

  https://www.cms.gov/Regulations-and-Guidance/Legislation/
  EHRIncentivePrograms/2015ProgramRequirements.html

- **Eligible Professionals - Specification Sheets**

  https://www.cms.gov/Regulations-and-Guidance/Legislation/
  EHRIncentivePrograms/Downloads/2015EP_TableofContents.pdf

- **Eligible Hospitals/CAHs - Specification Sheets**

  https://www.cms.gov/Regulations-and-Guidance/Legislation/
  EHRIncentivePrograms/Downloads/2015EHCAH_TableofContents.pdf

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Missouri's Regional Extension Center

Technical assistance with EHR selection and implementation, participation in incentive programs:

- **MO HIT Assistance Center**
  http://www.assistancecenter.missouri.edu/

- **Partner Organizations**
  - Missouri Primary Care Association
  - Missouri Hospital Association
  - Primaris

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Missouri SLR Help Desk

SLR Help Desk consultations and answer questions:

- General questions: SLRHelpdesk@acs-inc.com
- Eligible Professionals:
    - Crystal.Wickers@xerox.com
    - Kery.Arthur@xerox.com
    - Becky.Powell@xerox.com
- Eligible Professionals & Eligible Hospitals:
    - Mary.Maupins@xerox.com
    - Brent.Shepherd@xerox.com