



Missouri Health Information Exchange Onboarding Program Announcement

The Missouri Department of Social Services, MO HealthNet Division has received funding from the Centers for Medicare and Medicaid Services (CMS) to develop and implement a Health Information Exchange (HIE) Onboarding Program.

This HIE Onboarding Program provides federal funding to cover some of the onboarding costs for healthcare service providers to participate in HIE with Missouri Health Information Networks (HINs). The onboarding funding covers some costs related to first-year HIN subscription fees and interface development. Payments under this program will be made to the HINs.

Important note: the HIE Onboarding Program is available for a limited time – all work must be completed by no later than August 15, 2021 because all payments must be made by September 30, 2021 as the CMS program is ended.

Which healthcare service providers can participate in the Missouri HIE Onboarding Program?

- Originally, this program was only available to Eligible Professionals (EP) or Eligible Hospitals (EH) that have received at least one payment in the Medicaid Promoting Interoperability Program (formerly known as the Electronic Health Record Incentive Program).
 - For these HIE Onboarding Program participants, the EP Practice or EH must currently have 2015 Certified Electronic Health Record Technology (CEHRT) installed, or will have 2015 CEHRT by the time selected HIN develops interfaces.
- In late 2020, the Onboarding Program was expanded to all clinics, hospitals, and other settings that currently accept Missouri Medicaid participants as patients.
 - The program was previously limited to clinics and hospitals, but is now open to long-term care facilities, home and community based providers, and other healthcare settings that accept Medicaid and have the ability to connect to an HIE.
 - Additional documentation, such as Medicaid Provider ID may be required to validate eligibility.
- All participating entities must commit to providing assistance with HIE Onboarding, will prompt their Electronic Health Record (EHR) vendor to assist with interfaces, and will assist the HIN to collect and report performance data to MO HealthNet. This is particularly important because of the limited time left for this project.
- All participating entities must commit to signing a minimum three-year agreement with the HIN; note that the Onboarding Program funds are only available for the first year's costs.
- The Onboarding Program is designed to help healthcare entities who have not participated in HIE or who have only participated in a very limited manner and to stretch limited funding as far as possible to add new provider connections to HINs. For this reason, the Onboarding Program is available only to EPs and EHs that meet ***all three*** of the following:
 - No outbound clinical data to at least one HIN.
 - No inbound clinical data from at least one HIN where the clinical data is consumed into or viewed through the provider EHR.
 - No ADT interface that sends ADTs to at least one HIN.

Healthcare entities may choose one HIN to work with on the program. Missouri's four HINs are:

- Lewis and Clark Information Exchange (LACIE)
- Missouri Health Connection
- Show-Me Health Information Network of Missouri (SHINE)
- Tiger Institute Health Alliance

Program payments made to the HINs may be applied to the following onboarding costs:

- Provider costs for EHR-to-HIN interface implementation and 12-month EHR interface licensing fee.



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- These funds may not be used to upgrade EHR software, only to develop the interfaces and pay for the first year's licensing fee.
- HIN connection fee.
- HIN 12-month subscription/licensing fee.

The HIN will NOT be allowed to use funds for the following:

- Funding cannot be used to upgrade or change CEHRT in order to complete health information exchange deliverables.

Through the HIE Onboarding Program, the provider and the HIN are required to implement the following at a minimum:

- Bi-directional query-based exchange between the provider EHR system and the chosen HIN.
- An ADT interface, with the requirement for the provider to send Admission, Discharge, and Transfer (ADT) data to the chosen HIN.
- Providers may request assistance with two additional items.
 - Assistance with public health reporting, including immunizations, syndromic surveillance, electronic case reporting, and registry reporting.
 - Ability to receive care management alerts from the chosen HIN.

Please be aware of the following:

- The funding ends September 30, 2021, meaning that all work must be completed by no later than August 15, 2021.
- Limited funding will be distributed on a first come-first served basis.
- Funding provided may or may not cover all onboarding costs, including EP/EH staff time and EHR vendor fees.