Missouri Health Information Exchange (HIE) Onboarding Program Matrix

Phase	Deliverable	Measure - Collected & Reported for Each EP Group, EH, or Combination	Purpose	Payout Percentage
Pre-Adoption	1. Required Letter of Intent signed by EP Group/EH to kick off onboarding process and establish qualifications and categories.	1. HIN provides signed and dated letter of intent to MHD.	Establishes number of prescribing providers at EP group practice or number of licensed beds at EH; establishes that 2015 CEHRT is in place.	*25% of total for EP practice or EH after measures transmitted to MHD.*
	2. Required participation agreement signed by EP Group/EH.	2. HIN provides signed and dated participation agreement with MHD.	Ensures EP Group/EH that participate in HIE Onboarding Program agree to share data for at least three years and will collect and report deliverables to HINs.	
Connection	1. Required interfaces between EP Group/EH EHR and HIN implemented and operational: bi-directional query-based exchange and Admit, Discharge, Transfer (ADT) interface from EP/EH to HIN.	1. HIN identifies the interfaces and attests to MHD that the interfaces are implemented and operational.	Establishes that HIN is ready for exchange phase.	*50% of total for EP practice or EH after measures are transmitted to MHD.*
	2.Upon EP/EH request, interfaces implemented and operational: public health reporting and ADT/alerts from HIN to EP/EH.			
Exchange (Share Outbound Data sent from EP/EH to HIN)	1. Upon EP/EH request, HIN is supporting EP Group/EH public health reporting through transmission of public health data from EP Group/EH to DHSS.	1. HIN collects and reports attestations from each Onboarding Program participating entity - did HIN perform transmission of public health data to DHSS? If so, describe what type of public health data (immunizations, syndromic, etc.).	This must be offered; EP/EH may elect to connect to DHSS directly.	*25% of total for EP practice or EH after measures transmitted to MHD.*
	2. EP Group/EH required to send ADT messages to the HIN to support encounter notification needs of healthcare service providers and state agencies.	2. HIN collects and reports attestations from each Onboarding Program participating entity regarding providing ADT messages. HIN reports number and type of ADT messages received from EP/EH in the last 60 days.	This is required and it will help with care coordination; improved outcomes; increased efficiency.	
	3. EP Group/EH required to share summary of care record in response to a query to support referrals and transitions of care.	3. HIN collects and reports attestations from each Onboarding Program participating entity regarding providing summary of care records. HIN reports number of patient query responses received from EP/EH in the last 60 days.	This is required and will assist EP Group/EH to meet PI Program (previously known as Meaningful Use) HIE requirements; helps with care coordination; increased efficiency and improved outcomes.	
Exchange (Accept Inbound Data sent from HIN to EP/EH & Use)	1. For new patients referred or transitioned to EP/EH, the EP/EH required to incorporate into the patient's EHR an electronic summary of care document.	1. HIN collects and reports attestations from each Onboarding Program participating entity - number of new patients whose EHR was populated with inbound clinical data in the form of an electronic summary of care document in the last 60 days.	This is required and will assist EP Group/EH to meet PI Program HIE requirements; helps with care coordination; increased efficiency and improved outcomes.	
	2. For new patients referred or transitioned to EP/EH, the EP/EH required to implement clinical reconciliation for the following clinical information sets: Medication; Medication Allergy; Current Problem List.	2. HIN collects and reports attestations from each Onboarding Program participating entity - number of new patients receiving clinical reconciliation for each of the following in the last 60 days: Medication; Medication Allergy; Current Problem List.	This is required and will assist EP Group/EH to meet PI Program HIE requirements; helps with care coordination; increased efficiency and improved outcomes.	
	3. Upon EP/EH request, EP Group/EH receives inbound ADT messages/alerts for care coordination.	3. HIN collects and reports attestations from each Onboarding Program participating entity - did entity elect to receive ADTs/alerts? If so, HIN reports the number and type of ADT messages/alerts sent to EP/EH in the last 60 days.	This must be offered; EP/EH may elect not to receive or use ADTs.	

HIN must implement the following HIE functions with EP Group/EH:
-Bi-directional query-based exchange of electronic health information between HIN and EP/EH.
-Admit, Discharge, Transfer (ADT) interface - EP/EH sending ADT messages to the HIN.

HIN must implement the following functions at option/request of the EP Group/EH:
- ADT interface or alert messages interface - HIN sending ADT messages and/or alerts to the EP/EH.

Abbreviations:
-EP = Eligible Professional
-EH = Eligible Hospital
-PI = Promoting Interoperability
-HIN = Health Information Network