Medicaid EHR Incentive Program*
Application Programming Interface (API)
Attestation Guide for Program Year 2019

* A Promoting Interoperability Program

THIS GUIDE IS INTENDED TO:

ASSIST YOU IN MEETING THE API REQUIREMENTS OF MEASURE 1 OF OBJECTIVE 5

SAVE TIME BY GETTING IT RIGHT THE FIRST TIME

ENSURE ACCURACY OF YOUR SUPPORTING DOCUMENTATION

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Application (APP) vs Application Programming Interface (API)

APP
- Software program designed for individuals to use on a mobile device
- Usually downloaded by a user to their smartphone or tablet

API
- Set of routines, protocols, and tools that governs how applications interact with other software programs or applications
- Patient Portals are often interfaced to the EHR via an API

Objective 5: Patient Electronic Access

Measure 1*:
For more than 80% of patients

The patient is provided timely access to view, download, and transmit their health info; and

The patient's health info is available for the patient to access using any app of their choice configured to meet the technical specs of the application Programing Interface (API) in the provider's CEHRT

Measure 2:
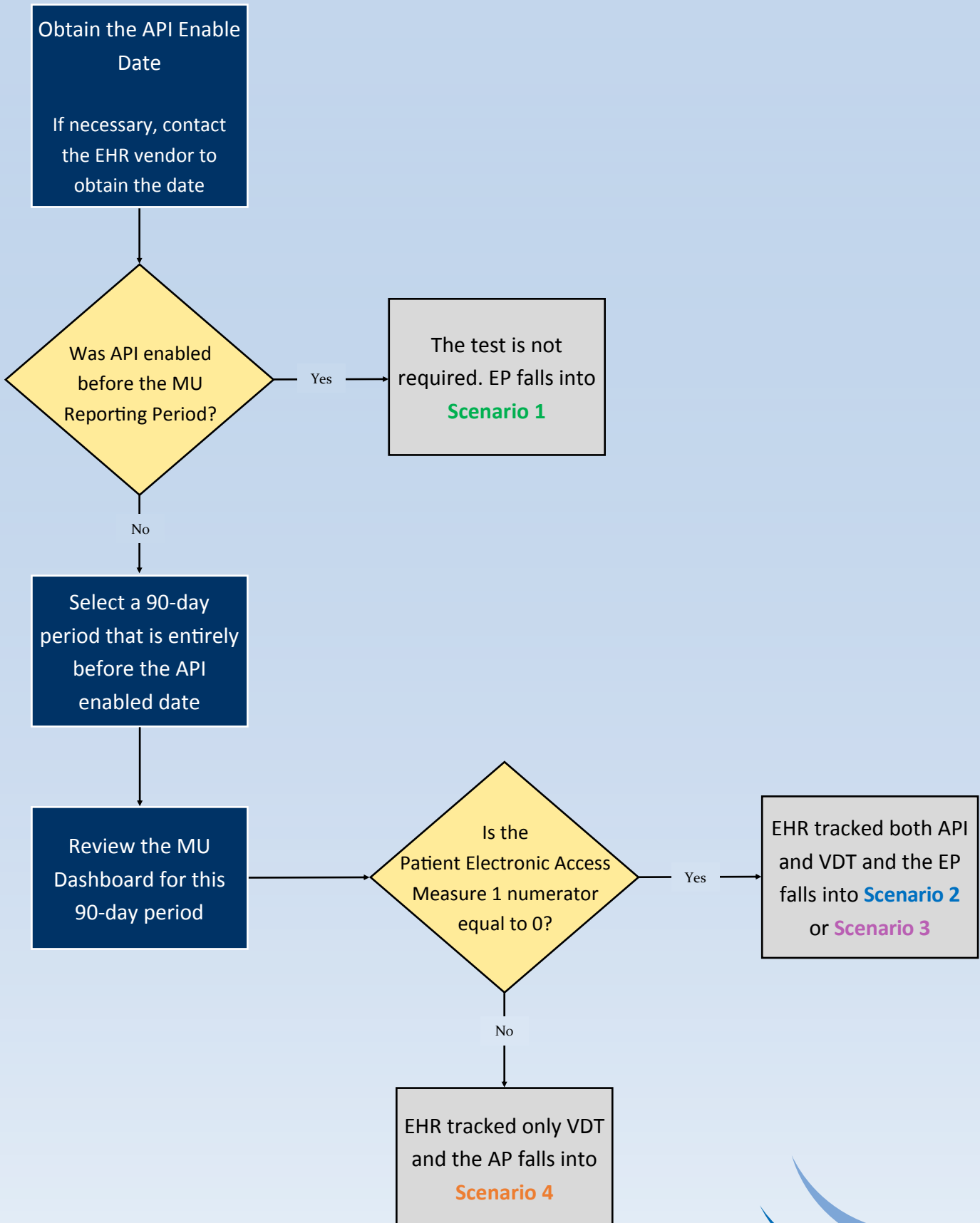**For more than 35% of patients**

EP must use clinically relevant information from CEHRT to identify patient-specific educational resources and provide electronic access to those materials

* The contents of this guide will focus mainly on Measure 1 of Objective 5

*When patients decline to participate in electronic access to their health information and/or education, the EP can use **Opt Out** to count those patients in order to meet the thresholds for both Measure 1 and Measure 2. For more information on Opt Out, view the Patient Electronic Access presentation*

Determine whether your EHR tracked API access

To determine whether your EHR's MU Dashboard tracked API access, conduct the following test:

Obtain the API Enable Date

If necessary, contact the EHR vendor to obtain the date

Was API enabled before the MU Reporting Period?

— Yes → The test is not required. EP falls into **Scenario 1**

— No ↓

Select a 90-day period that is entirely before the API enabled date

↓

Review the MU Dashboard for this 90-day period

→ **Is the Patient Electronic Access Measure 1 numerator equal to 0?**

— Yes → EHR tracked both API and VDT and the EP falls into **Scenario 2** or **Scenario 3**

— No ↓ EHR tracked only VDT and the AP falls into **Scenario 4**

How to Meet the API Requirements
Choose the scenario that fits your Eligible Provider (EP)

If you don't fall into any of these scenarios, you have failed to meet the requirements of Objective 5 Measure 1. We recommend trying a different MU Reporting Period, but keep in mind that this may change which scenario you fall into and hence the supporting documentation required.

Scenario 1

API was enabled before the start of the MU Reporting Period

Scenario 2

API was enabled during the MU Reporting Period, the MU Dashboard tracked API access, and the EP exceeds 80%

Scenario 3*

API was enabled during or after the MU Reporting Period, the MU Dashboard tracked API access, but the MU Dashboard has a value less than or equal to 80%
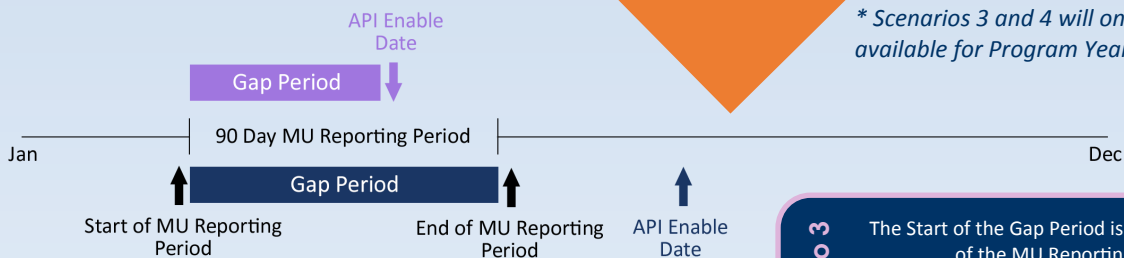
This scenario results in a "Gap" Period when neither VDT nor API was tracked, and you must create a "VDT and API Audit Log" to demonstrate that patients seen during this Gap Period received both types of access

Scenario 4*

API was enabled during or after the MU Reporting Period, the EP exceeds 80%, but the MU Dashboard only tracked VDT and **did not** track API

This scenario means that you must create an "API Audit Log" to demonstrate that patients were provided with API access

* Scenarios 3 and 4 will only be available for Program Year 2019.

API Enable Date

Gap Period

Jan ———————— 90 Day MU Reporting Period ————————————————————————— Dec

Gap Period

Start of MU Reporting Period

End of MU Reporting Period

API Enable Date

Scenario 3

The Start of the Gap Period is equal to the Start of the MU Reporting Period

The End of the Gap Period is equal to either the End of the MU Reporting Period or the API Enable Date, whichever date comes first

Supporting Documentation Requirements:

Scenario 1

An EHR-generated MU Dashboard or report for the selected MU Reporting Period that shows the EP's name, numerator, denominator, and percentage for this measure

—

Documentation that shows an API was enabled prior to the MU Reporting Period

—

Copy of instructions provided to patients on how to authenticate access through an API

—

Copy of the information given to patients on available applications that leverage the API

—

*An "Opt-Out" Audit Log is required if the EP used the **Opt Out** method to meet the measure threshold(s) and manually added the **Opt Out** patients to the numerator(s)*

Scenario 2

An EHR-generated MU Dashboard or report for the selected MU Reporting Period that shows the EP's name, numerator, denominator, and percentage for this measure

—

Documentation that shows an API was enabled during the MU Reporting Period

—

Copy of instructions provided to patients on how to authenticate access through an API

—

Copy of the information given to patients on available applications that leverage the API

—

*An "Opt-Out" Audit Log is required if the EP used the **Opt Out** method to meet the measure threshold(s) and manually added the **Opt Out** patients to the numerator(s)*

Scenario 3

An EHR-generated MU Dashboard or report for the selected MU Reporting Period that shows the EP's name, numerator, denominator, and percentage for this measure

—

Documentation that shows an API was enabled during or after the MU Reporting Period

—

Copy of instructions provided to patients on how to authenticate their access through an API

—

Copy of the information given to patients on available applications that leverage the API

—

Letter confirming that you added patient visits to the numerator

—

"VDT and API Audit Log" for the Gap Period

—

*An "Opt-Out" Audit Log is required if the EP used the **Opt Out** method to meet the measure threshold(s) and manually added the **Opt Out** patients to the numerator(s)*

Scenario 4

An EHR-generated MU Dashboard or report for the selected MU Reporting Period that shows the EP's name, numerator, denominator, and percentage for this measure

—

Documentation that shows an API was enabled during or after the MU Reporting Period

—

Copy of instructions provided to patients on how to authenticate their access through an API

—

Copy of the information given to patients on available applications that leverage the API

—

Letter confirming that you manually calculated the numerator

—

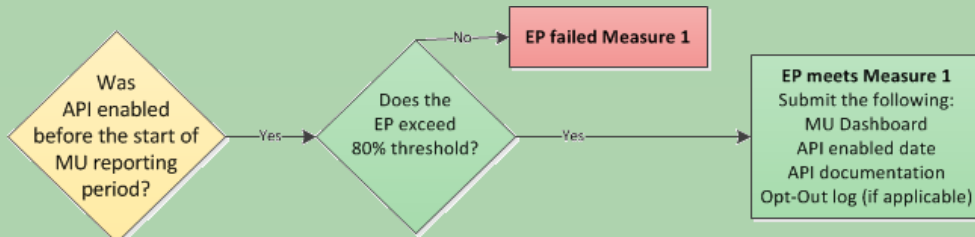"API Audit Log" for the entire MU Reporting Period

—

*An "Opt-Out" Audit Log is required if the EP used the **Opt Out** method to meet the measure threshold(s) and manually added the **Opt Out** patients to the numerator(s)*
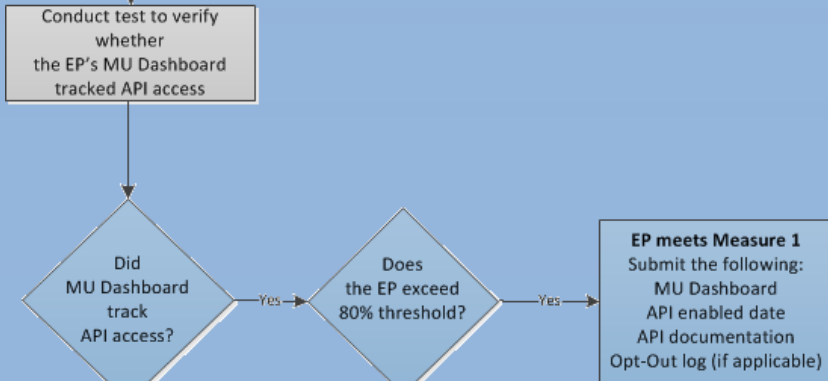
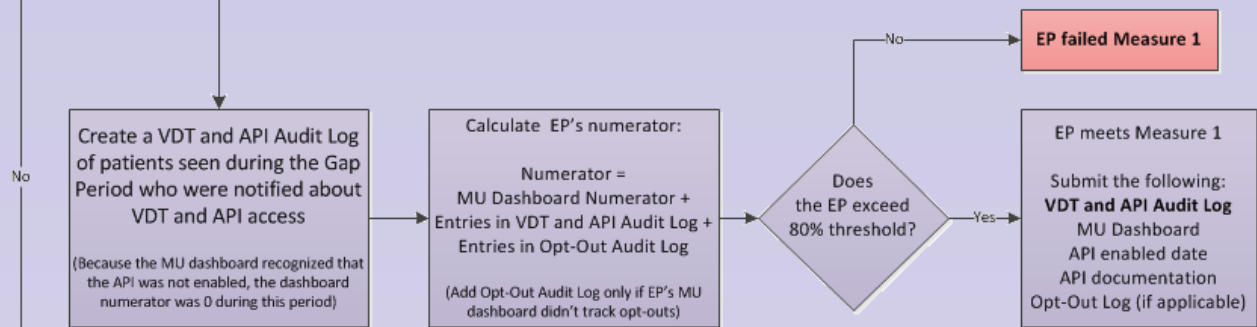# What supporting documentation do I need to provide?
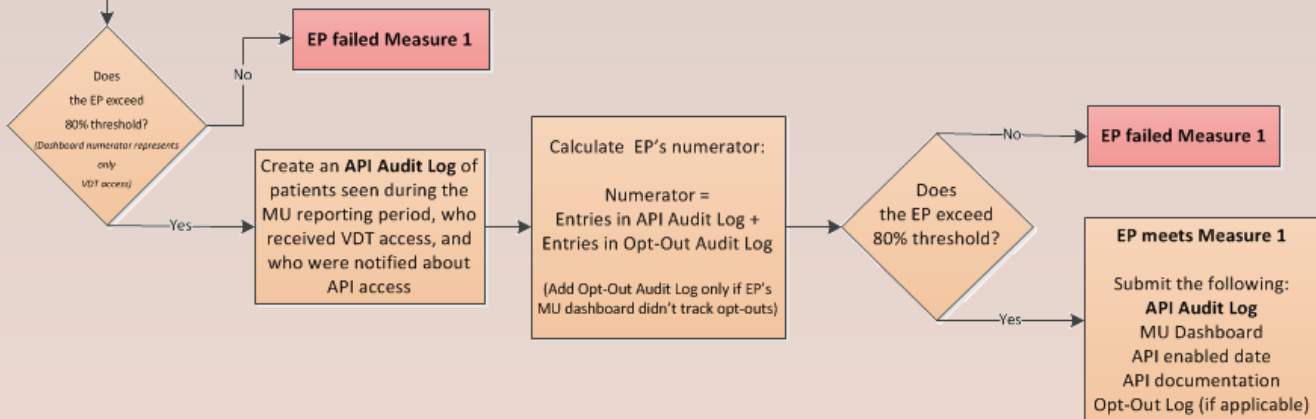## Follow the Decision Tree

Scenario 1

Was API enabled before the start of MU reporting period?

— No → (down)

— Yes → Does the EP exceed 80% threshold?

- No → **EP failed Measure 1**
- Yes → **EP meets Measure 1** Submit the following: MU Dashboard, API enabled date, API documentation, Opt-Out log (if applicable)

Scenario 2

Conduct test to verify whether the EP's MU Dashboard tracked API access

Did MU Dashboard track API access?

— Yes → Does the EP exceed 80% threshold?

- Yes → **EP meets Measure 1** Submit the following: MU Dashboard, API enabled date, API documentation, Opt-Out log (if applicable)
- No → (down to Scenario 3)

— No → (down to Scenario 4)

Scenario 3

Create a VDT and API Audit Log of patients seen during the Gap Period who were notified about VDT and API access

(Because the MU dashboard recognized that the API was not enabled, the dashboard numerator was 0 during this period)

→ Calculate EP's numerator:

Numerator = MU Dashboard Numerator + Entries in VDT and API Audit Log + Entries in Opt-Out Audit Log

(Add Opt-Out Audit Log only if EP's MU dashboard didn't track opt-outs)

→ Does the EP exceed 80% threshold?

- No → **EP failed Measure 1**
- Yes → EP meets Measure 1 Submit the following: **VDT and API Audit Log**, MU Dashboard, API enabled date, API documentation, Opt-Out Log (if applicable)

Scenario 4

Does the EP exceed 80% threshold? (Dashboard numerator represents only VDT access)

— No → **EP failed Measure 1**

— Yes → Create an **API Audit Log** of patients seen during the MU reporting period, who received VDT access, and who were notified about API access

→ Calculate EP's numerator:

Numerator = Entries in API Audit Log + Entries in Opt-Out Audit Log

(Add Opt-Out Audit Log only if EP's MU dashboard didn't track opt-outs)

→ Does the EP exceed 80% threshold?

- No → **EP failed Measure 1**
- Yes → **EP meets Measure 1** Submit the following: **API Audit Log**, MU Dashboard, API enabled date, API documentation, Opt-Out Log (if applicable)

Scenario 3—VDT and API Audit Log

Patient ID	Patient DOB	Provider	Service Date	Date VDT Access Provided	Date API Documentation Provided
111	9/9/2000	Dr. Oz	10/1/2019	10/1/2019	11/3/2019
112	3/21/1996	Dr. Oz	10/2/2019	10/2/2019	11/3/2019
113	5/2/1985	Dr. Oz	10/3/2019	10/3/2019	11/3/2019
114	6/4/1990	Dr. Oz	10/4/2019	10/4/2019	11/3/2019
115	7/2/1995	Dr. Oz	10/10/2019	10/10/2019	11/3/2019
116	10/11/1975	Dr. Oz	10/10/2019	10/10/2019	11/3/2019
117	5/9/1965	Dr. Oz	10/10/2019	10/10/2019	11/3/2019
118	11/20/1973	Dr. Oz	10/10/2019	10/10/2019	11/3/2019
119	8/9/1983	Dr. Oz	10/10/2019	10/10/2019	11/3/2019
120	12/2/1979	Dr. Oz	10/10/2019	10/10/2019	11/3/2019

Scenario 4—API Audit Log

Patient ID	Patient DOB	Provider	Service Date	VDT Access Provided	Date API Documentation Provided
111	9/9/2000	Dr. Oz	10/1/2019	Yes	11/3/2019
112	3/21/1996	Dr. Oz	10/2/2019	Yes	11/3/2019
113	5/2/1985	Dr. Oz	10/3/2019	Yes	11/3/2019
114	6/4/1990	Dr. Oz	10/4/2019	Yes	11/3/2019
115	7/2/1995	Dr. Oz	10/10/2019	Yes	11/3/2019
116	10/11/1975	Dr. Oz	10/10/2019	Yes	11/3/2019
117	5/9/1965	Dr. Oz	10/10/2019	Yes	11/3/2019
118	11/20/1973	Dr. Oz	10/10/2019	Yes	11/3/2019
119	8/9/1983	Dr. Oz	10/10/2019	Yes	11/3/2019
120	12/2/1979	Dr. Oz	10/10/2019	Yes	11/3/2019

Supporting Documentation Examples:
Sample Letters

Scenario 3

Central New England Behavioral Health
100 NORTH DRIVE
WESTBOROUGH, MA 01581
508-000-0000

Date

To Whom It May Concern:

As evidenced by the MU Dashboard and "VDT and API Audit Log" I hereby confirm that:

1) The MU Dashboard tracked VDT and API access, and

2) The patients added to the MU Dashboard measure 1 numerator were seen during the MU Reporting Period prior to the API enable date, and

3) These patients were provided with:

    a) View, Download, and Transmit access within 48 hours, and

    b) Instructions on how to authenticate their access through an API, and information on available applications that leverage the API, within the Calendar Year of the MU Reporting Period (i.e. between 1/1/2019 and 12/31/2019) and

4) API access to health information remained available, and the API was not disabled, after the API was enabled.

Sincerely,
Name

NAME
Medical Director

Note: This letter must be signed by an authorized official at the location where the patients were seen (EP, Designee, Clinical or Medical Director).

100 NORTH DRIVE
WESTBOROUGH, MA 01581
OFFICE: (508) 000-0000
FAX: (508) 000-0000

Scenario 4

Central New England Behavioral Health
100 NORTH DRIVE
WESTBOROUGH, MA 01581
508-000-0000

Date

To Whom It May Concern:

As evidenced by the MU Dashboard and "API Audit Log" I hereby confirm that:

1) The MU Dashboard tracked only VDT access and did not track API access, and

2) The patients included in the Objective 5 Measure 1 numerator were seen during the MU Reporting Period, and

3) These patients were provided with:

    a) View, Download, and Transmit access within 48 hours, and

    b) Instructions on how to authenticate their access through an API, and information on available applications that leverage the API, within the Calendar Year of the MU Reporting Period (i.e. between 1/1/2019 and 12/31/2019) and

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Frequently Asked Questions: VDT and API Audit Log
(Scenario 3)

What should the "Service Date" column include?

- Only patient visits that occurred between the start of the MU Reporting Period and the API access enable date.
  - Don't include patient visits that occurred after the MU Reporting Period.
  - Don't include patient visits that were included in the MU Dashboard numerator of Objective 5 Measure 1.

Should I include visits of Objective 5 Measure 1 Opt-Out patients?

- If the dashboard included Opt-Outs, include them in the VDT and API Audit Log. If Opt-Outs were tracked via an Opt-Out Audit Log, don't include them in the VDT and API Audit Log because that results in double-counting.

What does "VDT Access Provided" mean?

- VDT Access includes access to view, download and transmit PHI within 48 hours.

How can an EP provide the "API Documentation" during or after the MU Reporting Period?

- The API Documentation must include the instructions to authenticate and the list of available applications. This documentation can be provided via mass mailer, emails, patient portal, or other means as long as this was done by December 31, 2019.
  - ➡ EP must provide API Documentation to all Opt-Out patients too, regardless of how Opt Out was tracked.
  - If the API Documentation is provided via a patient portal, you must separately provide it to all Opt-Out patients via another means because they won't be able to view the documentation in the portal.

How do I calculate my MAPIR numerator?

MAPIR Numerator = MU Dashboard Numerator + Entries in VDT and API Audit Log + Entries in Opt-Out Audit Log (if applicable)

Frequently Asked Questions: API Audit Log
(Scenario 4)

What should the "Service Date" column include?

- Only include patient visits that occurred during the MU Reporting Period.
  - Only include patient visits that were included in the MU Dashboard numerator of Objective 5, Measure 1.

Should I include visits of Objective 5 Measure 1 Opt-Out patients?

- If the dashboard included Opt-Outs, include them in the API Audit Log. If Opt-Outs were tracked via an Opt-Out Audit Log, don't include them in the API Audit Log because that results in double-counting.

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  - If the API Documentation is provided via a patient portal, you must separately provide it to all Opt-Out patients via another means because they won't be able to view the documentation in the portal.

How do I calculate my MAPIR numerator?

MAPIR Numerator = Entries in API Audit Log + Entries in Opt-Out Audit Log (if applicable) **

** Don't add the MU Dashboard Numerator as that results in double-counting

Entering Data into MAPIR

1 If your API was enabled before the start of the MU reporting period, enter: MU Dashboard numerator
(+ Entries in "Opt-Out Audit Log" if applicable)

2 If your API was enabled during the MU reporting period, the EHR tracked API access, and the EP exceeds 80%, enter: MU Dashboard numerator
(+ Entries in "Opt-Out Audit Log" if applicable)

3 If your API was enabled during or after the reporting period, the EHR tracked API access, but the dashboard has a value less than or equal to 80%, enter: MU Dashboard numerator + Entries in "VDT and API Audit Log"
(+ Entries in "Opt-out Audit Log" if applicable)

4 If your API was enabled during or after the reporting period, the EP exceeds 80%, but the EHR only tracked VDT and **did not** track API, enter: Entries in "API Audit Log"
(+ Entries in "Opt-out Audit Log" if applicable)

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🌐 mehi.masstech.org

📞 1.855.MassEHR

✉️ ehealth@masstech.org

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View the full Measure 1 of Objective 5 presentation