Medicaid EHR Incentive Program
PY2020 MU Q&A Session

JANUARY 2021

Today's presenters:
Thomas Bennett
Margaret Lellman

Disclaimer

This presentation was current at the time it was presented, published or uploaded onto the web. This presentation was prepared as a service to the public and is not intended to grant rights or impose obligations. This presentation may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage attendees to review the specific statutes, regulations, and other interpretive materials for a full and accurate statement of their contents.

Agenda

- Goals of the Meeting

- Attestation Timeline and Program Sunset

- Q&A Session: Common Challenges

  – Objective 3 Clinical Decision Support (CDS)

  – Objective 5 Patient Electronic Access and API

  – Objective 7 Health Information Exchange (HIE)

  – Other Challenges, Questions and Best Practices

- Helpful MU Resources and Technical Assistance

Attestation Timelines and Program Sunset

The Program Year 2020 attestation period is scheduled for
October 1, 2020 – February 2, 2021

The deadline to submit PY2020 applications is **February 2, 2021**

The Program Year 2021 attestation period is scheduled for
April 1, 2021 – August 3, 2021

The deadline to submit PY2021 applications is **August 3, 2021**

To allow time to process applications and ensure that all incentives are **paid** by December 31, 2021, the PY2021 deadline needs to be well before the end of 2021

To prepare for Program Sunset at the end of 2021:

- adjustments were made to the deadlines for both PY2020 and PY2021

- MAPIR was updated to allow more than one active application to be open simultaneously

  - In order to have two applications open simultaneously, an EP must have at least two payment years left

Clinical Decision Support (CDS)

Q&A Session: Common Challenges - Clinical Decision Support (CDS)

- CDS defined too narrowly
  - Not just alerts
  - Not just for physicians

- CEHRT does not have relevant CDS interventions implemented

- Alert fatigue; alerts ignored and not recorded

- CDS do not relate to reported CQMs

- Obtaining proper supporting documentation
  - Locating screenshots of 5 CDS interventions; CEHRT functionality
  - Screenshots missing profile info and/or CDS enabled date
  - Audit logs/reports tracking CDS intervention history unavailable
  - EHR vendor engagement and support

Objective 3: Clinical Decision Support (CDS)

Use clinical decision support (CDS) to improve performance on high-priority health conditions

Measures

1. Implement 5 CDS interventions related to 4 or more CQMs for the entire EHR reporting period
2. Enable and implement drug-drug & drug-allergy interaction checks for the entire EHR reporting period

Exclusion for Measure 2

Any EP who writes fewer than 100 medication orders during EHR reporting period

MU Supporting Documentation: Clinical Decision Support (CDS)

Measure 1

- Screenshots of 5 CDS interventions dated within EHR reporting period and identifying both EP and organization

- Documentation showing that CDS interventions were enabled for the **entire EHR reporting period**
  - If screenshots don't display enabled dates, submit either
    - CEHRT audit logs with enabled dates, or
    - vendor letter confirming enabled dates and that EPs are unable to deactivate interventions

- Documentation showing interventions tie to 4 or more CQMs related to the scope of practice, **OR** a letter from EP's Supervisor or Medical Director explaining CDS's relationship to patient population and high priority conditions

* For global CDS implementations, you must also submit:

- *Screenshot with practice name and enabled date*
- *Global CDS Letter on letterhead and signed by Medical Director confirming relevance and including a list of all EPs using the CDS*

Measure 2

- Documentation from CEHRT identifying both EP & organization showing drug-drug and drug-allergy interaction checks were enabled for the entire reporting period

Supporting Documentation Example: Clinical Decision Support (CDS)

Screenshot of CDS alerts enabled in CEHRT with vendor name, EP name and enabled dates

Supporting Documentation Example: Clinical Decision Support (CDS)

EHR-generated screenshot of CDS interventions identifying the EP, organization and enable dates

Supporting Documentation Example: Clinical Decision Support (CDS)

MU Dashboard displays EP's name, organization, reporting period, and CDS enabled dates with CQMs

James Bond, MD   Reporting period: 10/03/2017 - 12/31/2017

National Provider Identifier (NPI)	Business Address (Business Listing ONLY)
# 0000000000	100 North Drive Westborough, MA 01581
Taxpayer Identification Number (TIN)	Business Email
# 0000000000	bond@masstech.org

Measure		Status
Clinical decision support rule ⓘ	a. Clinical decision support rule	Satisfied : EHR vendor enabled clinical decision support interventions related to the clinical quality measures listed below for the entire reporting period.
	b. Implement drug/drug and drug/allergy interaction checks	Satisfied : EHR vendor enabled required functionality during reporting period.

Clinical Quality Measure	Enrollment Date
Controlling High Blood Pressure	12/19/2016
Pneumonia Vaccination Status for Older Adults	12/19/2016
Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up	12/19/2016
Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention	12/19/2016
Use of Imaging Studies for Low Back Pain	12/19/2016

Supporting Documentation Example: Clinical Decision Support (CDS)

EHR Vendor Letter confirming CDS enabled dates and that EPs cannot deactivate alerts

Patient Electronic Access and API

Q&A Session: Common Challenges – Patient Electronic Access and API

- Dashboard tracking both portal and API access

- Calculating Opt Out patients

- Email education resources

- Vendor engagement and support

- Obtaining proper supporting documentation
  - Two parts to API Instructions to patients
  - API and Opt Out logs

Objective 5: Patient Electronic Access and API

Provide patients with timely electronic access to their health information and patient-specific education

Measure 1* For **more than 80%** of patients:

1) the patient is provided timely access to view, download, and transmit (VDT) their health info; and

2) 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 Programming 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

* 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.

MU Supporting Documentation: Patient Electronic Access and API

Measure 1: Access to View, Download and Transmit (VDT) and API Access*

- 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 or during the MU reporting period.
- A copy of the instructions provided to patients with
  - a) how to authenticate their access through an API and
  - b) information on available applications that leverage API

Measure 2: Electronic Access to Patient Specific Education

- EHR-generated MU Dashboard or report

* If the EP used the **Opt Out** method to meet the measure threshold(s), additional supporting documentation is required to show how the EP added **Opt Out** patients to the numerator(s). Speak with a TA on using **Opt Out**.

MU Supporting Documentation: Patient Electronic Access and API

Screen shot of audit log displaying API enabled date

Letter from EHR vendor verifying API enabled date

letter date

EHR vendor name/logo

Dear Practice Contact,

EHR Vendor **has enabled API functionality for** EHR name/version **based on the requirements associated with §170.315(g)(7), §170.315(g)(8), and §170.315(g)(9). The Developer Portal gives** EHR Vendor **clients and third-party health IT companies access to our APIs and sandbox environment to develop integrated solutions that will enhance the value and functionality offered by** EHR Vendor **services. These criteria were initially certified in December 2018 and the applicable APIs were available on or before January 1, 2019.**

Additionally, EHR Vendor **makes patient data automatically integrated in the** Patient Portal, **which also allows patients to view, download, and transmit their health information as required by §170.315 (e)(1): View, Download, and Transmit to 3rd Party.**

Sincerely,

signature, name and
title of authorized official

MU Supporting Documentation: Patient Electronic Access and API

API Instructions provided to patients including
- how to authenticate their app
- list of or Information on available apps

If you are new to Patient Portal, complete your enrollment by following these steps:

1. Follow the link below to Patient Portal. https://www. EHR   /Enroll

2. Enter your enrollment token   , your last name, date of birth, and email address. Select "Sign up for a new account" on the following screen.

3. Create a username and password. Make sure your username and password meet the requirements listed on the screen.

4. Select five security questions from the list and provide your answer for each question. These will be used for password reset security.

If you already have a   Patient Portal account, you can enroll in multiple practices by following these steps:

1. Follow the link below to   Patient Portal. https://www. EHR .com/

2. Log in to the Patient Portal website using your original username and password. Remember that your password is case sensitive.

3. From the Menu on the left, under **My Account**, click the **Manage Practices** link to go to the multiple practice enrollment page.

4. Enter your newly assigned enrollment token   , date of birth, and email address.

Your Patient Portal account enables you to access your data through other apps and web sites using the   API.

Go here for more information. http:// EHR   /patientAPI

MeHI | MASSACHUSETTS eHEALTH INSTITUTE | at the MassTech Collaborative

MU Supporting Documentation: Patient Electronic Access and API

Central Massachusetts Internal Medicine
100 North Drive
Westborough, MA 01581

Date

To Whom It May Concern:

Letter confirming the Opt Out patients were provided all necessary information to access their information, obtain access through a patient-authorized representative, or other wise opt back in without further follow-up action required by the provider.

The letter must include a description of how a patient's Opt Out action was recorded (for example a form, or other method). The letter must be signed by an authorized official at the location where the Opt Outs occurred (EP, Designee, Clinical or Medical Director).

Sincerely,

Name

NAME
Medical Director

Sample Letter and audit log for Opt Out patients

Patient ID	Patient DOB	Service Date	Provider	Reason for Opt Out
1111111	1/1/2000	1/1/2020	Clark Kent, MD	Declined patient portal
2222222	1/10/2009	1/10/2020	Clark Kent, MD	No internet access
3333333	1/12/2002	1/12/2020	Clark Kent, MD	Declined patient portal
4444444	1/8/1996	1/14/2020	Clark Kent, MD	Declined patient portal
5555555	3/15/2001	1/14/2020	Clark Kent, MD	Declined patient portal

MeHI
MASSACHUSETTS eHEALTH INSTITUTE | at the MassTech Collaborative

Health Information Exchange (HIE)

Q&A Session: Common Challenges - Health Information Exchange

- Summary of Care (SOC) record sent electronically

- Query HIE Functionality not enabled vs. not available

- Meeting two of three measures

- Claiming exclusions to satisfy the objective

- Obtaining proper supporting documentation
  - Confirmation of receipt
  - SOC: Minimum problem list, medications and allergies

Objective 7: Health Information Exchange (HIE)

Measure 1

For **more than 50%** of transitions and referrals, the referring EP:

1. Uses CEHRT to create a Summary of Care record
2. Electronically exchanges the summary of care record

Measure 2

For **more than 40%** of transitions and referrals received and encounters where the EP has never before seen the patient, EP incorporates an electronic Summary of Care record in patient's EHR

- A record cannot be considered incorporated if it is discarded without the reconciliation of clinical information, or if it is stored in a manner not accessible for EP use within the EHR

Measure 3

For **more than 80%** of transitions received and encounters where the EP has never before seen the patient, EP performs a clinical information reconciliation for the following three clinical information sets:

1. Medication
2. Medication allergy
3. Current problem list

MU Supporting Documentation: Health Information Exchange (HIE)

Measure 1: Referrals and transitions of care electronically exchanged

- EHR-generated MU Dashboard or report

- Copy of one unique Summary of Care Record created by the EP

- Confirmation of receipt or proof that the receiving provider made a query of the same Summary of Care Record

Measure 2: Electronic summary of care records received and incorporated

- EHR-generated MU Dashboard or report

Measure 3: Clinical information reconciliation

- EHR-generated MU Dashboard or report covering clinical reconciliation of medication, medication allergies and current problem list
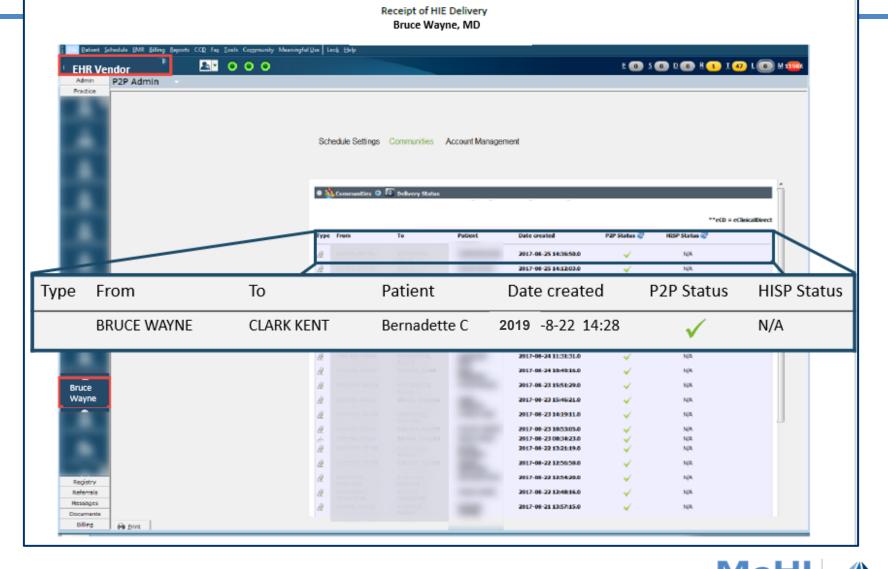
MU Supporting Documentation: Health Information Exchange (HIE)

Summary of Care record for Patient 101 includes Problems, Allergies and Medications

MU Supporting Documentation: Health Information Exchange (HIE)

Confirmation of Receipt
Log showing electronic P2P
status (provider to provider)

Receipt of HIE Delivery
Bruce Wayne, MD

Type	From	To	Patient	Date created	P2P Status	HISP Status
	BRUCE WAYNE	CLARK KENT	Bernadette C	2019 -8-22 14:28	✓	N/A

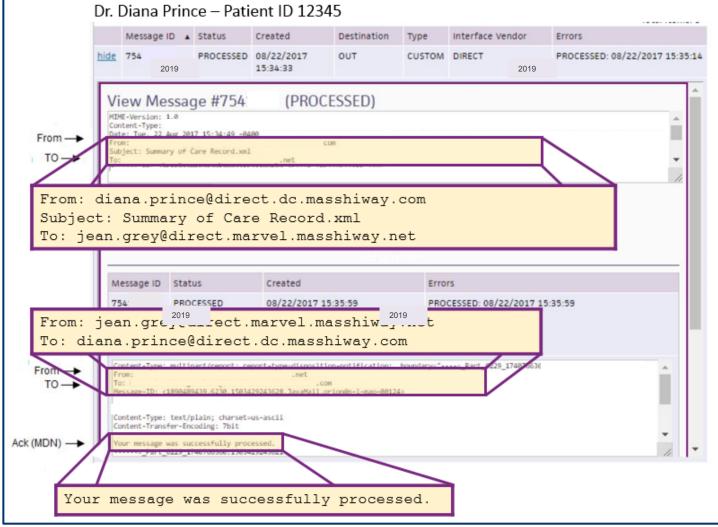*Note: This is a fictional patient record

MU Supporting Documentation: Health Information Exchange (HIE)

Confirmation of Receipt
Log confirming SOC for "Patient 12345" was both electronically sent and received

From: diana.prince@direct.dc.masshiway.com
Subject: Summary of Care Record.xml
To: jean.grey@direct.marvel.masshiway.net

From: jean.grey@direct.marvel.masshiway.net
To: diana.prince@direct.dc.masshiway.com

Your message was successfully processed.

*Note: This is a fictional record

PY2020 MU Q&A Session

Other challenges, questions and best practices

Helpful MU Resources

❖MU TOOLKIT FOR ELIGIBLE PROFESSIONALS

▪ https://mehi.masstech.org/education/health-it-toolkits/mu-toolkit/medicaid-EP

❖MU SUPPORTING DOCUMENTATION GUIDE FOR PY 2020

▪ https://mehi.masstech.org/sites/mehi/files/documents/Medicaid/MU_Toolkit_2015/Massachusetts%20Medicaid%20EHR%20Incentive%20Program%27s%202020%20Supporting%20Documentation%20Requirements%2008-12-2020.pdf

❖API ATTESTATION GUIDE PY 2020

▪ https://mehi.masstech.org/sites/mehi/files/documents/Medicaid/MU_Toolkit_2015/API_Attestation_Guide_PY2020_2020_08_19.pdf

❖CMS SPEC SHEETS STAGE 3 PY 2020

▪ https://www.cms.gov/files/document/medicaid-ep-2020-table-contents.pdf

Contact Us

mehi.masstech.org   1.855.MassEHR

ehealth@masstech.org   Follow us @MassEHealth

Thomas Bennett

Client Services Relationship Manager

tbennett@masstech.org

(508) 870-0312 ext. 403

Margaret Lellman

Technical Assistant Specialist

lellman@masstech.org

(508) 870-0312 ext. 370