
**Oregon's Medicaid EHR Incentive Program
(aka Medicaid Promoting Interoperability Program)**

Program Year 2019 Webinar

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Agenda

- Program Year 2018 Reminders
- Clinical Quality Metrics Registry (CQMR) Update
- Program Year 2019 Requirements
- Program Resources
- Q & A

Program Year 2018 Reminders

- Medicaid EHR Incentive Program is now called the Medicaid Promoting Interoperability (PI) Program
- Program Year 2018 will be open for attestations **01/14/19 – 03/31/19**
- PI/EHR reporting period = any continuous 90 days in 2018
- eCQM reporting period = full year (unless attesting to MU for the first time, then any continuous 90 days in 2018)
- 2014, 2015, or 2014/2015 combo CEHRT allowed
- Modified Stage 2 or Stage 3 allowed
- Security Risk Analysis (SRA) must be completed in 2018

Program Year 2018 Reminders

- Before taking an exclusion on Objective 10 Measure 3 (Specialized Registry Reporting), the EP must complete a couple steps of due diligence:
 - Check the available Oregon Public Health registries [here](#)
 - Check the EP's specialty society to see if there's a specialized registry ready to receive data for meaningful use
- If the EP determines no registries are available, he/she may exclude from the measure. To ensure an exclusion is appropriate, staff may request supporting documentation.
- For more information on this exclusion see [CMS FAQ #13657](#)

Oregon Public Health Specialized Registries

- Blood Lead Reporting (ELR)
- Communicable Disease Reporting (ELR)
- Prescription Drug Monitoring Program (PDMP)
- Electronic Case Reporting (eCR)

For information on what counts as a specialized registry see [CMS FAQ #13653](#)

Medicaid EPs and Oregon's Clinical Quality Metrics Registry (CQMR)

Kate Lonborg, CQMR Program Manager, OHA



What is the Clinical Quality Metrics Registry (CQMR)?

- New streamlined quality reporting solution in implementation
 - Planned to go live in December for reporting starting in January
 - Contingency plan: Continue to use MAPIR for eCQMs
- Consolidates reporting across programs
- Collects [electronic Clinical Quality Measures](#) (eCQMs) specified for CMS programs per national standards
 - Also collects state-specific EHR-based CCO incentive measures (smoking prevalence, SBIRT)

What does this mean for Medicaid EPs?

- Most components of attestation (patient volume, MU objectives) will continue to occur in MAPIR
- ***Only eCQM reporting will switch over to CQMR***
 - No more manual entry of eCQMs into MAPIR
- You have multiple eCQM submission options in CQMR
 - CQMR web portal
 - Direct secure messaging
 - SFTP
 - API
- You have options to upload your EHR Incentive Program eCQM data:
 - QRDA III or
 - Excel template

For more CQMR information

- Visit the CQMR webpage:
<https://www.oregon.gov/oha/HPA/OHIT/Pages/CQMR.aspx>
 - Onboarding and training information coming this fall
- Email Kate Lonborg, CQMR Program Manager:
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Program Year 2019 Requirements



Summary of Requirements for EPs

PI/EHR Reporting Period	Minimum of any continuous 90-day period between January 1, 2019 and December 31, 2019
Meaningful Use Stage	Stage 3
Certified EHR Technology	2015 Edition
eCQM Reporting Period	Full Year <i>Exception: Any continuous 90-day period in calendar year 2019 <u>for EPs attesting to meaningful use for the first time</u></i>
# eCQMs Required for Reporting	6/53
Other	No alternate exclusions Objective 0 required (Prevention of Information Blocking Attestation)

Providers must attest to Stage 3 Objectives and Measures

First Year Demonstrating Meaningful Use	Stage of Promoting Interoperability Programs								
	2011	2012	2013	2014	2015	2016	2017	2018	2019 and Future Years*
2011	Stage 1	Stage 1	Stage 1	Stage 1 or Stage 2	Modified Stage 2	Modified Stage 2	Modified Stage 2 or Stage 3	Modified Stage 2 or Stage 3	Stage 3
2012	N/A	Stage 1	Stage 1	Stage 1 or Stage 2	Modified Stage 2	Modified Stage 2	Modified Stage 2 or Stage 3	Modified Stage 2 or Stage 3	Stage 3
2013	N/A	N/A	Stage 1	Stage 1	Modified Stage 2	Modified Stage 2	Modified Stage 2 or Stage 3	Modified Stage 2 or Stage 3	Stage 3
2014	N/A	N/A	N/A	Stage 1	Modified Stage 2	Modified Stage 2	Modified Stage 2 or Stage 3	Modified Stage 2 or Stage 3	Stage 3
2015	N/A	N/A	N/A	N/A	Modified Stage 2	Modified Stage 2	Modified Stage 2 or Stage 3	Modified Stage 2 or Stage 3	Stage 3
2016	N/A	N/A	N/A	N/A	NA	Modified Stage 2	Modified Stage 2 or Stage 3	Modified Stage 2 or Stage 3	Stage 3
2017	N/A	N/A	N/A	N/A	NA	NA	Modified Stage 2 or Stage 3	Modified Stage 2 or Stage 3	Stage 3
2018	N/A	N/A	N/A	N/A	NA	NA	NA	Modified Stage 2 or Stage 3	Stage 3
2019 and Future Years	N/A	N/A	N/A	N/A	NA	NA	NA	NA	Stage 3

Link to table: https://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/Downloads/Stages_ofMeaningfulUseTable.pdf

Providers must have a 2015 Edition Certified EHR Technology (CEHRT)

Certification Requirements Beginning in 2019

Beginning with the EHR reporting period in CY 2019, participants in the Promoting Interoperability Programs are required to use the 2015 Edition of CEHRT ...In reviewing the state of health information technology, it is clear the 2014 Edition certification criteria are out of date and insufficient for provider needs in the evolving health IT industry.

Link to the Final Rule language:

<https://www.federalregister.gov/documents/2018/08/17/2018-16766/medicare-program-hospital-inpatient-prospective-payment-systems-for-acute-care-hospitals-and-the#p-5297>

2015 CEHRT Implications

- 2015 System does not have to be implemented by January 1, 2019 (full year of eCQM data can be combined from 2014 and 2015 CEHRT editions)
- However, 2015 system does need to be implemented and functional by **September 30, 2019** to be able to capture a full 90 day PI/EHR reporting period
- A security risk analysis must be done upon installation/upgrade to a new system

Stage 3 MU for 2019

- Objective 1 – *Protect Patient Health Information*:
 - Conduct or review an SRA...including addressing the security (including encryption) of data created or maintained by CEHRT..., implement security updates as necessary, and correct identified security deficiencies as part of the provider's risk management process
- Objective 2 – *Electronic Prescribing (eRx)*:
 - More than **60%** of all permissible prescriptions written by the EP are queried for a drug formulary and transmitted electronically using CEHRT

Stage 3 MU for 2019

- Objective 3 – *Clinical Decision Support*:
 - EPs must satisfy both measures to meet the objective:
 - Measure 1: Implement five CDS interventions related to four or more CQMs at a relevant point in patient care for the entire PI/EHR reporting period. Absent four CQMs related to an EPs scope of practice or patient population, the CDS interventions must be related to high-priority health conditions
 - Measure 2: The EP has enabled and implemented the functionality for drug-drug and drug-allergy interaction checks for the entire PI/EHR reporting period

Stage 3 MU for 2019

- Objective 4 – *Computerized Provider Order Entry (CPOE)*:
 - EPs must satisfy all three measures to meet the objective:
 - Measure 1: More than 60% of medication orders created by the EP during the PI/EHR reporting period are recorded using CPOE
 - Measure 2: More than **60%** of laboratory orders...
 - Measure 3: More than **60%** diagnostic imaging orders...

Stage 3 MU for 2019

- Objective 5 – *Patient Electronic Access to Health Information*:
 - EPs must satisfy both measures to meet the objective:
 - Measure 1: For more than **80%** of all unique patients seen by the EP
 1. The patient (or authorized rep.) is provided timely access to view online, download, and transmit his/her health information; and
 2. **The provider ensures the patient’s health information is available for the patient to access using any application of their choice that is configured to meet the technical specifications of the Application Programming Interface (API) in the provider’s CEHRT**

Stage 3 MU for 2019

- Objective 5 – *Patient Electronic Access to Health Information*:
 - EPs must satisfy both measures to meet the objective:
 - Measure 2: The EP must use clinically relevant information from CEHRT to identify patient-specific educational resources and provide electronic access to those materials to more than **35%** of unique patients seen by the EP during the PI/EHR reporting period

Stage 3 MU for 2019

- Objective 6 – *Coordination of Care through Patient Engagement*:
 - EPs must attest to all three measures and must meet the thresholds for at least two to meet the objective:
 - Measure 1: More than ~~10%~~ **5%** of all unique patients (or their authorized rep.) seen by the EP actively engage with the EHR made accessible by the provider and either –
 1. View, download or transmit to a third party their health information; or
 2. Access their health information through the use of an API that can be used by applications chosen by the patient and configured to the API in the provider's CEHRT; or
 3. A combination of 1 and 2

Stage 3 MU for 2019

- Objective 6 – *Coordination of Care through Patient Engagement*:
 - EPs must attest to all three measures and must meet the thresholds for at least two measures to meet the objective:
 - Measure 2: For more than ~~25%~~ **5%** of all unique patients seen by the EP during the PI/EHR reporting period, a secure message was sent using the electronic messaging function of CEHRT to the patient (or authorized rep.), or in response to a secure message sent by the patient (or authorized rep.)
 - **Measure 3: Patient generated health data or data from a non-clinical setting is incorporated into the CEHRT for more than 5% of all unique patients seen by the EP during the PI/EHR reporting period**

Stage 3 MU for 2019

- Objective 7 – *Health Information Exchange (HIE)*:
 - EPs must attest to all three measures and must meet the threshold for at least two to meet the objective:
 - Measure 1: For more than **50%** of transitions of care and referrals, the EP that transitions or refers their patient to another setting of care or provider of care:
 1. Creates a summary of care recording using CEHRT; and
 2. Electronically exchanges the summary of care record

Stage 3 MU for 2019

- Objective 7 – *Health Information Exchange (HIE)*:
 - EPs must attest to all three measures and must meet the threshold for at least two to meet the objective:
 - **Measure 2: For more than 40% of transitions or referrals received and patient encounters in which the provider has never before encountered the patient, the EP incorporates into the patient's EHR an electronic summary of care document**

Stage 3 MU for 2019

- Objective 7 – *Health Information Exchange (HIE)*:
 - EPs must attest to all three measures and must meet the threshold for at least two to meet the objective:
 - Measure 3: For more than **80%** of transitions or referrals received and patient encounters in which the provider has never before encountered the patient, the EP performs a clinical information reconciliation. The provider must implement clinical information reconciliation for the following three clinical info. sets:
 1. Medication
 2. Medication Allergy
 3. Current Problem List

Stage 3 MU for 2019

- Objective 8 – *Public Health and Clinical Data Registry Reporting*:
 - The EP must attest to at least two of the five measures:
 - Measure 1: Immunization Registry Reporting
 - Measure 2: Syndromic Surveillance Reporting
 - **Measure 3: Electronic Case Reporting**
 - Measure 4: Public Health Registry Reporting
 - **Measure 5: Clinical Data Registry (CDR) Reporting**

Measure	Maximum times measure can count towards objective for EP
Measure 1 – Immunization Registry Reporting	1
Measure 2 – Syndromic Surveillance Reporting	1
Measure 3 – Electronic Case Reporting	1
Measure 4 – Public Health Registry Reporting	2
Measure 5 – Clinical Data Registry Reporting	2
Total required	2

2019 Required Documentation

- 2015 CEHRT documentation; must include
 - Organization/clinic name
 - Date upgraded
- EHR Scorecard/Dashboard for Objectives & Measures
- Security Risk Assessment for 2015 CEHRT (2019)
- eCQM Report (via CQMR)
- Objective 8 supporting documentation

Program Resources/Links

- [Oregon Medicaid EHR Incentive Program](#)
- [Stage 3 for Eligible Professionals](#)
- [MAPIR](#) (attestation web portal)
- [Oregon Public Health Registries](#)
- [Oregon's Medicaid Meaningful Use Technical Assistance Program \(OMMUTAP\)](#)
 - Offers technical assistance in four categories, at no cost the provider/clinic:
 - **Certified EHR Assessment, Implementation, and Upgrade Assistance**
 - **Interoperability Consulting and Technical Assistance**
 - **Risk and Security Training and Assessment**
 - **Meaningful Use Education and Attestation Assistance**



Contact:

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Questions?

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