# 2017 Supporting Documentation Requirements Massachusetts Medicaid EHR Incentive Program

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## Agenda

- Program Year 2017
  - Requirements
  - Timeline
- Attestation Protocol
- MU Supporting Documentation
  - Modified Stage 2
  - Stage 3



## Program Year 2017 Requirements

#### For Program Year 2017:

- EPs who have never submitted an application can no longer participate in the Medicaid EHR Incentive Program
- Program Year 2017 and beyond focuses on Meaningful Use participants only
- EPs must have acquired a 2014 or 2015 Edition CEHRT or combination CEHRT
- EPs who have attested at least once still have time to collect the total incentive payout of \$63,750 (EPs) or \$49,585 (board-certified pediatricians) by 2021
- All actions or exchanges for MU must be completed and recorded prior to or within the calendar year of the attesting Program Year (Jan 1, 2017 – Dec 31, 2017)
  - Can no longer include actions taken after end of CY but before date of attestation



## Program Year 2017 Timeline

#### For Program Year 2017:

- EHR reporting period is any continuous 90 days from Jan 1, 2017 Dec 31, 2017
- MAPIR scheduled launch is date is Oct 2017
- PY2017 deadline is slated for March 31, 2018

Providers who receive an incentive payment for their 6<sup>th</sup> and final participation year

- Will receive a congratulatory email
- Can no longer attest in MAPIR



#### **Attestation Protocol**

#### For Program Year 2017 and beyond:

- All attesting Providers <u>must</u> prove eligibility each Program Year:
  - ✓ Non-Hospital-Based or Practice Predominantly at an FQHC
  - ✓ Acquired a 2014 Edition CEHRT or higher
  - ✓ Satisfies the Medicaid Patient Volume Threshold (PVT) requirement
- All MU supporting documentation <u>must</u> be uploaded to the EP's MAPIR application
- All PHI <u>must</u> be removed from supporting documentation detail or it will not be accepted
- All EPs attesting to MU <u>must</u> upload an MU Aggregation Form to confirm data was combined across all locations where the EP rendered services



## Modified Stage 2 & Stage 3

 Security Risk Analysis (SRA)/Security Risk Review (SRR) must be submitted for each location where the EP practiced and utilized CEHRT during the EHR reporting period.

#### Be sure to include:

- Name of practice
- Location
- Date completed
- Signature of authorized official
- Name and title of person who conducted SRA/SRR
- Mitigation plan detailing action steps to correct/diminish identified security gaps
- Completed SRA/SRR cover sheet attesting to the truthfulness and accuracy of the analysis must also be submitted.



## Objective: Clinical Decision Support (CDS)



## Modified Stage 2 & Stage 3

#### **Upload Supporting Documentation for Measure 1**

- EHR-generated screenshots of 5 CDS interventions dated within EHR reporting period and identifying both EP and organization
- Documentation showing interventions relate 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:

- Screenshot with practice name and enabled date
  - If screenshots don't display enabled dates, submit either CEHRT audit logs with enabled dates, OR a vendor letter confirming enabled dates and that EPs are unable to deactivate interventions
- Letter on letterhead and signed by Medical Director confirming relevance to EP and including a list of all EPs using the CDS





## Objective: Clinical Decision Support, continued



## Modified Stage 2 & Stage 3

## Upload Supporting Documentation for Measure 2

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

# Objective: Computerized Provider Order Entry (CPOE)



## Modified Stage 2 & Stage 3

 In MAPIR, enter the numerators/denominators lifted directly from the MU report to show the EP meets the required threshold

#### **Upload Supporting Documentation**

- Selected MU reporting period
- EP's name
- Recorded volumes for; medication, lab and radiology orders



## Objective: eRx



## Modified Stage 2 & Stage 3

 In MAPIR, enter the numerators/denominators lifted directly from the MU report to show the EP met the required threshold

### **Upload Supporting Documentation**

- Selected MU reporting period
- EP's name
- Recorded volumes for eRx



## Objective: Health Information Exchange (HIE)



#### Modified Stage 2 & Stage 3

In MAPIR, enter the numerators/denominators lifted directly from the MU report to show the EP met the required threshold

## **Upload Supporting Documentation**

#### **Measure 1**:

- EHR generated report that displays:
  - Selected MU reporting period
  - EP's name
  - Recorded volumes for HIE
- One unique Summary of Care Record per EP that:
  - Occurred within the same calendar year of the EHR reporting period
  - Includes, at a minimum, current problem list, current medication list, current medication allergy list
  - Is in human readable format
- Confirmation of receipt, or proof that the receiving provider made a query, of this one Summary of Care record



## Objective: Health Information Exchange (HIE)



## Stage 3

In MAPIR, enter the numerators/denominators lifted directly from the MU report to show the EP met the required threshold

- Measure 2: a SOC document is created for transitions or referrals received and patient encounters where the Provider never before encountered the patient
- Measure 3: for transitions or referrals received and patient encounters where the Provider never before encountered the patient, the Provider performs a clinical information reconciliation. The EP must implement reconciliation for 3 clinical information sets:
  - 1. Medication
  - 2. Medication Allergy
  - 3. Current Problem List

#### **Upload Supporting Documentation**

- Selected MU reporting period
- EP's name
- Recorded volumes for HIE



## Objective: Medication Reconciliation



## Modified Stage 2

 In MAPIR, enter the numerator/denominator lifted directly from the MU Dashboard to show the EP met the required threshold

## **Upload Supporting Documentation**

- Selected MU period
- EP's name
- Recorded volumes for Medication Reconciliation



## Objective: Patient Specific Education



## Modified Stage 2

 In MAPIR, enter the numerators/denominators lifted directly from the MU report to show the EP met the required threshold

## **Upload Supporting Documentation**

- Selected MU period
- EP's name
- Recorded volumes for Patient Specific Education



## Objective: Patient Electronic Access



## Modified Stage 2

 In MAPIR, enter the numerators/denominators lifted directly from the MU Dashboard to show the EP met the required thresholds

Measure 1: Patients were given timely access to View, Download and Transmit (VDT)

Measure 2: Number of Patients who actually Viewed, Downloaded or Transmitted

#### **Upload Supporting Documentation**

- Selected MU period
- EP's name
- Recorded volumes for Patient eAccess



## Objective: Patient e-Access to Health Information



## Stage 3

In MAPIR, enter the numerators/denominators lifted directly from the MU Report to show the EP met the required thresholds

## **Upload Supporting Documentation**

Measure 1: Access to View, Download and Transmit and API Access

- EHR generated report displaying the selected reporting period, the EP's name, and recorded volumes
- Documentation that shows an API was enabled prior to or during the EHR reporting period
- Copy of instructions provided to patients on how to access API

Measure 2: e-Access to Patient Specific Education

 EHR generated report displaying the selected reporting period, the EP's name, and recorded volumes



## Objective: Coordination of Care through Patient Engagement



## Stage 3

 In MAPIR, enter the numerators/denominators lifted directly from the MU Dashboard to show the EP met the required thresholds

Measure 1: Patients Viewed, Downloaded or Transmitted, or Accessed API

Measure 2: Secure Messaging

Measure 3: Incorporation of Patient Generated Health Data or Data from a Non-Clinical setting

#### **Upload Supporting Documentation**

- Selected MU period
- EP's name
- Recorded volumes for all 3 components of Coordination of Care



## Objective: Medication Reconciliation



## Modified Stage 2

 In MAPIR, enter the numerator/denominator lifted directly from the MU Dashboard to show the EP met the required threshold

#### **Upload Supporting Documentation**

- Selected MU period
- EP's name
- Recorded volumes for Medication Reconciliation



# Objective: Secure Electronic Messaging



## Modified Stage 2

 In MAPIR, enter the numerator/denominator lifted directly from the MU Report to show the EP met the required threshold

#### **Upload Supporting Documentation**

- Selected MU period
- EP's name
- Recorded volumes for Secure eMessaging



## Objective: Public Health Reporting - Modified Stage 2



#### Measure 1 – Immunization Registry

MIIS Immunization Acknowledgement (ACK), MIIS Registration of Intent, or MIIS MU Scorecard to demonstrate active engagement

Exclusion: PCPs claiming an immunization exclusion must upload a letter attesting to the accuracy of the exclusion



#### Measure 2 – Syndromic surveillance

Applies to EPs in freestanding Urgent Care Facility. Documentation to demonstrate active engagement.



## Measure 3 – Specialized Registry

Documentation from a Specialized Registry to demonstrate active engagement with the Cancer Registry and/or Infectious Disease Registry

# Objective: Public Health Reporting – Stage 3



#### Measure 3 – Electronic Case Reporting

Not required for PY2017



#### Measure 4 – Public Health Registry

Documentation from a Public Health Registry to demonstrate active engagement with the Cancer and/or Infectious Disease Registry



#### Measure 5 – Clinical Data Registry Reporting

Unavailable in MA

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