## Modified Stage 2 Meaningful Use: Objective #8 – Patient Electronic Access Massachusetts Medicaid EHR Incentive Payment Program

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# The attestation deadline for Program Year 2015 is August 14, 2016



- What is Meaningful Use (MU) Objective #8 all about?
- Steps to meet MU Objective #8
  - 1. Do the right thing
  - 2. Ensure data is entered correctly
  - 3. Ensure data is captured correctly
  - 4. Ensure Certified EHR Technology (CEHRT) can report data correctly (EHR dashboard)
  - 5. Generate supporting documentation
  - 6. Retain supporting documentation
- Attesting for MU Objective #8
- Common Issues
- Questions and Answers









Patient Electronic Access				
Objective	Provide patients the ability to view online, download, and transmit their health information within 4 business days of the information being available to the EP.			
Measures	<ul> <li>EPs must satisfy both measures in order to meet this objective:</li> <li>Measure 1: More than 50 percent of all unique patients seen by the EP during the EHR reporting period are provided timely access to view online, download, and transmit to a third party their health information subject to the EP's discretion to withhold certain information.</li> <li>Measure 2: For an EHR reporting period in 2015, at least one patient seen by the EP during the EHR reporting period (or patient-authorized representative) views, downloads or transmits his or her health information to a third party during the EHR reporting period.</li> </ul>			
Exclusions	<ul> <li>Measure 1: Any EP who:</li> <li>Neither orders nor creates any of the information listed for inclusion as part of the measures except for "Patient Name" and "Provider's name and office contact information"</li> <li>Measure 2: Any EP who:</li> <li>Neither orders nor creates any of the information listed for inclusion as part of the measures except for "Patient Name" and "Provider's name and office contact information" or</li> <li>Conducts 50 percent or more of his or her patient encounters in a county that does not have 50 percent or more of his or her patient encounters in a county that does not have 50 percent or more of his for the first day of the EHR reporting period.</li> </ul>			
Alternate Exclusion	<b>Measure 2:</b> Providers may claim an exclusion for the second measure if for an EHR reporting period in 2015 they were scheduled to demonstrate Stage 1, which does not have an equivalent measure.			

#### **Patient Electronic Access - Attestation Requirements**

#### Measure 1:

- DENOMINATOR: Number of unique patients seen by the EP during the EHR reporting period.
- NUMERATOR: The number of patients in the denominator who have access to view online, download and transmit their health information within 4 business days after the information is available to the EP.
- THRESHOLD: The resulting percentage must be more than 50% for an EP to meet this measure.
- EXCLUSION: Any EP who neither orders nor creates any of the information listed for inclusion as part of the measures except for "Patient Name" and "Provider's Name and Office Contact Information."



#### **Patient Electronic Access - Attestation Requirements**

### Measure 2:

- DENOMINATOR: Number of unique patients seen by the EP during the EHR reporting period.
- NUMERATOR: The number of patients (or patient-authorized representatives) in the denominator who view, download, or transmit to a third party their health information.
- THRESHOLD: The numerator must be equal to or greater than 1.
- EXCLUSIONS: Any EP who
  - (a) Neither orders nor creates any of the information listed for inclusion as part of the measures except for "Patient Name" and "Provider's Name and Office Contact Information" or
  - (b) Conducts 50% or more of his or her patient encounters in a county that does not have 50% or more of its housing units with 4Mbps broadband availability.
- ALTERNATE EXCLUSION: Provider may claim an exclusion for the second measure if, for an EHR reporting period in 2015, they were scheduled to demonstrate Stage 1, which does not have an equivalent measure.



#### **Patient Electronic Access – Additional Information**

In order to meet this objective, the following information must be made available to patients electronically within 4 business days of the information being made available to the EP:

- Patient name
- Provider's name and office contact information
- Current and past problem list
- Procedures
- Laboratory test results
- Current medication list and medication history
- Current medication allergy list and medication allergy history
- Vital signs (height, weight, blood pressure, BMI, growth charts)
- Smoking status
- Demographic information (preferred language, sex, race, ethnicity, date of birth)
- Care plan field(s), including goals and instructions
- Any known care team members including the primary care provider (PCP) of record



#### Patient Electronic Access – Additional Information

- An EP can make additional information available
- If there is no information available for one or more of the fields previously listed, either because the EP can be excluded from recording such information (e.g., vital signs) or because there is no information to record (e.g., patient has no medication allergies), the EP may indicate that the information is not available and still meet the objective
- A patient who has multiple encounters during the EHR reporting period must be provided access for each encounter where they are seen by the EP
- If a patient elects to "opt out" of participation, that patient must still be included in the denominator.
  - These patients may also be counted in the numerator if they are provided all of the necessary information to subsequently access their information, or otherwise opt back in without further action required by the provider



## Steps to meet MU Objective #8



## Meeting MU Objective #8

## 1. Do the right thing



Provide patients the ability to view online, download, and transmit their health information within 4 business days of the information being available to the EP.



### 2. Ensure data is entered correctly

 Remember, even patients who "opt out" can be counted in the numerator if they are provided with all of the information needed to access their health information and/or "opt back in" at a later date





### 3. Ensure data is captured correctly

- For Measure 1, ensure that CEHRT gives you credit each time a patient is provided with the information needed to access their health information online
- For Measure 2, ensure that CEHRT captures at least one instance where a patient viewed, downloaded or transmitted his or her health information to a third party during the EHR reporting period



- 4. Ensure CEHRT can report the data correctly
  - Test EHR reports (or regularly check EHR dashboard) to ensure accuracy

e€ Show me Reports Meaningful Use dashboard ×	e 🥐 Help 🗸 🛛 Sophie Sc	heidlinger MD			
Meaningful Use dashboard					Act
Sophie Scheidlinger         2015         Stage 1         Medicare           CUSTOM PERIOD:         10/3/2014         to 01/01/2015         to 01/01/2015	New custom period 💊	-			
MEASURE	STATUS	GOAL	CURRENT	NUM/DEN	REPORT
1. CPOE for Medication Orders					
CPOE for Medication Orders	1 to satisfy	>30%	0%	0/0	Included
CPOE for Medication Orders (Alternate)	1 to satisfy	>30%	0%	0/0	C Included
2. Drug-Drug & Drug-Allergy Interaction Checks	Incomplete	n/a	Incomplete	n/a	
3. Maintain Problem List	1 to satisfy	>80%	0%	0/0	
4. e-Prescribing	Excluded	>40%	0%	0/0	C Exclude
5. Active Medication List	1 to satisfy	>80%	0%	0/0	
6. Medication Allergy List	1 to satisfy	>80%	0%	0/0	
7. Record Demographics	1 to satisfy	>50%	0%	0/0	
	1 to satisfy	>50%	0%	0/0	
MEASURE	STATUS	GOAL	CURRENT	NUM/DEN	REPORT
Drug Formulary Checks	Incomplete	n/a	Incomplete	n/a	💽 Inclu
Clinical Lab Test Results	1 to satisfy	>40%	0%	0/0	Inclu



## 5. Generate supporting documentation

- For Measure 1, an EHR-generated MU dashboard or report for the selected EHR reporting period that shows the EP's name, numerator, denominator and resulting percentage
- For Measure 2, an EHR-generated report showing at least one patient (or patient authorized representative) seen by the EP during the selected EHR reporting period viewed, downloaded, or transmitted their health information, no earlier than the start of the calendar year and no later than the date of attestation
  - Work with EHR vendor to ensure CEHRT is capturing patient portal usage



- 6. Retain supporting documentation
  - Attestation purposes vs. audit purposes



## Attesting for MU Objective #8



(*) Red aster	risk indicates a required field.
Objective:	Provide patients the ability to view online, download, and transmit their health information within four business days of the information being available to the EP.
	Exclusion Measure 1 and 2: Any EP who neither orders nor creates any of the information listed for inclusion as part of the measures. This will exclude both measures.
	* Does the exclusion apply to you? If 'Yes', do not complete Measure 1. If 'No', complete entries for Measure 1. ○ Yes ○ No
	Measure 1: More than 50 percent of all unique patients seen by the EP during the EHR reporting period are provided timely access to view online, download, and transmit to a third party their health information subject to the EP's discretion to withhold certain information.
	Numerator 1: The number of patients in the denominator who have timely (within four business days after the information is available to the EP) online access to their health information. Denominator 1: Number of unique patients seen by the EP during the EHR reporting period.
	Numerator 1: Denominator 1:
	Exclusion Measure 2: Conducts 50 percent or more of his or her patient encounters in a county that does not have 50 percent or more of its housing units with 4Mbps broadband availability according to the latest information available from the FCC on the first day of the EHR reporting period. This will only exclude Measure 2. Does the exclusion apply to you? If 'Yes', do not complete Measure 2. If 'No', complete entries for Measure 2. $\bigcirc$ Yes $\bigcirc$ No
	Measure 2: At least one patient seen by the EP during the EHR reporting period (or patient-authorized representative) views, downloads, or transmits to a third party his or her health information during the EHR reporting period.
	Numerator 2: The number of patients in the denominator (or patient-authorized representative) who view, download, or transmit to a third party their health information. Denominator 2: Number of unique patients seen by the EP during the EHR reporting period.
	Numerator 2: Denominator 2:



## **Common Issues**







- CEHRT only includes in the numerator patients whose email, login, password is recorded in the system, even though the practice gives access in a different way
- Literacy, health literacy and language barriers
- Producing supporting documentation



## Questions?



- <u>CMS 2015 Program Requirements page</u>
- MeHI Medicaid EHR Incentive Program page
- MeHI 2015 Supporting Documentation Requirements Guide



## **Contact Us**

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