Final Rule Regarding EHR Certification Flexibility for 2014

Today’s presenters:

Al Wroblewski, Client Services Relationship Manager
Thomas Bennett, Client Services Relationship Manager
MeHI is the designated state agency for:

- Coordinating health care innovation, technology and competitiveness
- Accelerating the adoption of health information technologies
- Promoting health IT to improve the safety, quality and efficiency of health care in Massachusetts
- Advancing the dissemination of electronic health records systems in all health care provider settings

MeHI is a division of the Massachusetts Technology Collaborative, a public economic development agency
MeHI eHealth Services and Support Overview

- Support all healthcare providers in achieving Meaningful Use (MU) of EHR technology
  - MU Gap Analysis
  - Registration and Attestation support
  - Secure document storage and audit preparation

- Support providers with Physician Quality Reporting System (PQRS) reporting
  - Qualified registry for submitting PQRS measures

- Collaborate with external partners to offer:
  - patient engagement resources
  - privacy and security tools
  - other health IT resources
Goals of today’s session:

1. Provide information about the Final Rule as it relates to the Medicare and Medicaid EHR Incentive Payment Programs

2. Clarify key components of the Final Rule

3. Offer an opportunity for the provider community to ask questions
Office of the National Coordinator for Health Information Technology (ONC) sets standards for certified EHR technology (CEHRT)

In September 2012, Final Rules were published by both CMS and ONC
- CMS Final Rule revised objectives and measures for both Stage 1 and Stage 2 Meaningful Use
- ONC Final Rule established specifications and certification criteria for 2014 Edition certified EHRs
- 2014 Edition certification criteria were designed to support the changes to MU measures and EHR Incentive Programs

2014 Edition criteria required extensive changes by EHR vendors
- many EHR products were certified later than anticipated

Provider associations noted a backlog of many months for updated version to be installed
Released August 29, 2014 by CMS in collaboration with ONC

Eligible Professionals (EPs) and Eligible Hospitals (EHs) participating in the Medicare or Medicaid EHR Incentive Program in 2014 can attest using 2011 Edition CEHRT

- Goal is to provide EPs and EHs more flexibility in which CEHRT they can use to achieve Meaningful Use (MU) in 2014

Any of the following can be used to meet MU measures in 2014:
- 2011 Edition CEHRT
- a combination of 2011 and 2014 Edition CEHRT
- 2014 Edition CEHRT
CMS Final Rule, continued

- Adopt, Implement, Upgrade (AIU) attestation in 2014 still requires 2014 Edition CEHRT

- Beginning in 2015, all EPs and EHs are required to attest using a 2014 Edition CEHRT

- Final Rule also formalizes CMS and ONC’s previously stated intention to extend Stage 2 through 2016 and begin Stage 3 in 2017
2013 Stage 1 vs 2014 Stage 1

- In the 2012 Stage 2 Final Rule, changes were made to Stage 1 MU
  - some changes took effect in 2013; others took effect in 2014
  - to differentiate, CMS uses the following terminology:
    - 2013 Stage 1 objectives and measures
    - 2014 Stage 1 objectives and measures

- Under the new Final Rule, EPs and EHs have the option to attest to 2013 Stage 1 objectives and measures
  - includes 2013 Stage 1 Clinical Quality Measures (CQMs)

- Providers may attest to the 2013 Stage 1 objectives and measures regardless of whether they were planning to attest to Stage 1 or Stage 2 in 2014
Providers in their first or second year of Stage 1 in 2014 can attest to:

- 2013 Stage 1 objectives and measures, using 2011 Edition CEHRT, or using a combination of 2011 and 2014 Edition CEHRT
- 2014 Stage 1 objectives and measures, using 2014 Edition CEHRT

Providers in their first year of Stage 2 in 2014 can attest to:

- 2013 Stage 1 objectives and measures, using 2011 Edition CEHRT, or using a combination of 2011 and 2014 Edition CEHRT*
- 2014 Stage 1 objectives and measures, using 2014 Edition CEHRT*
- Stage 2, using either a combination of 2011 and 2014 Edition CEHRT or a 2014 Edition CEHRT

*Providers in their first year of Stage 2 who attest to Stage 1 objectives and measures will attest to their **second year of Stage 2** in 2015.
<table>
<thead>
<tr>
<th>If you were scheduled to demonstrate:</th>
<th>use 2011 Edition CEHRT to demonstrate</th>
<th>use 2011 &amp; 2014 Edition CEHRT to demonstrate</th>
<th>use 2014 Edition CEHRT to demonstrate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stage 1 in 2014</td>
<td>2013 Stage 1 objectives and measures</td>
<td>2013 Stage 1 objectives and measures</td>
<td>2014 Stage 1 objectives and measures</td>
</tr>
<tr>
<td>Stage 2 in 2014</td>
<td>2013 Stage 1 objectives and measures</td>
<td>2013 Stage 1 objectives and measures</td>
<td>2014 Stage 1 objectives and measures</td>
</tr>
<tr>
<td></td>
<td></td>
<td>-OR-2014 Stage 1 objectives and measures</td>
<td>-OR-2014 Stage 1 objectives and measures</td>
</tr>
<tr>
<td></td>
<td></td>
<td>-OR-Stage 2 objectives and measures</td>
<td>-OR-Stage 2 objectives and measures</td>
</tr>
</tbody>
</table>
Proposed Changes to MU Timeline

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>2011</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1 OR 2</td>
<td>2</td>
<td>3 → 2</td>
<td>3</td>
<td>TBD</td>
<td>TBD</td>
<td>TBD</td>
<td>TBD</td>
</tr>
<tr>
<td>2012</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1 OR 2</td>
<td>2</td>
<td>3 → 2</td>
<td>3</td>
<td>TBD</td>
<td>TBD</td>
<td>TBD</td>
<td>TBD</td>
</tr>
<tr>
<td>2013</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>2</td>
<td>2</td>
<td>3</td>
<td>3</td>
<td>TBD</td>
<td>TBD</td>
<td>TBD</td>
<td>TBD</td>
</tr>
<tr>
<td>2014</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>2</td>
<td>2</td>
<td>3</td>
<td>3</td>
<td>TBD</td>
<td>TBD</td>
<td>TBD</td>
<td>TBD</td>
</tr>
<tr>
<td>2015</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>2</td>
<td>2</td>
<td>3</td>
<td>3</td>
<td>TBD</td>
<td>TBD</td>
<td>TBD</td>
<td>TBD</td>
</tr>
<tr>
<td>2016</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>2</td>
<td>2</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>2017</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>2</td>
<td>2</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td>3</td>
</tr>
</tbody>
</table>
Important Considerations

- **Reporting periods**
  - Any 90-day or calendar quarter reporting period
  - 365-day reporting period in 2015

- **MU Measures and CQMs**
  - Transition of Care limited exception
  - No change in CQMs (Medicare vs Medicaid)

- **Supporting Documentation for delays or hardships**
  - Medicare vs Medicaid
  - Hardship exception applications in 2015

- **EPs practicing in multiple locations**

- **Immunization Public Health Reporting**

- **Reason for delaying Stage 3 until 2017**
Press release regarding the Final Rule:
Questions, Concerns, Feedback
Contact Us

Al Wroblewski
Client Services Relationship Manager
(508) 870-0312, ext. 603
wroblewski@masstech.org

Thomas Bennett
Client Services Relationship Manager
(508) 870-0312, ext. 403
tbennett@masstech.org

Website:
http://mehi.masstech.org/