

Medicare and Medicaid EHR Incentive Programs: Certified EHR Technology



National Provider Call
CMS and ONC
June 27, 2013

Medicare Learning Network

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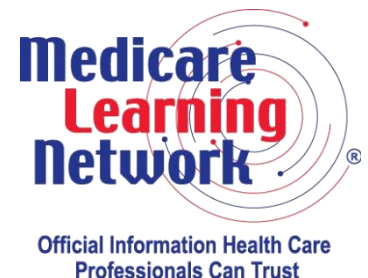
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Agenda

Centers for Medicare & Medicare Services

- Meaningful Use of EHRs

Office of the National Coordinator for Health Information Technology

- Certification of EHR Technology

What is Meaningful Use?

- ☐ Meaningful Use is using certified EHR technology to
 - ☐ Improve quality, safety, efficiency, and reduce health disparities
 - ☐ Engage patients and families in their health care
 - ☐ Improve care coordination
 - ☐ Improve population and public health
 - ☐ All the while maintaining privacy and security
- ☐ Meaningful Use mandated in law to receive incentives

What are the Requirements of Stage 1 Meaningful Use?

Basic Overview of Stage 1 Meaningful Use:

- ❑ Reporting period is 90 days for first year and 1 year subsequently
- ❑ Reporting through attestation
- ❑ Objectives and Clinical Quality Measures
- ❑ Reporting may be yes/no or numerator/denominator attestation
- ❑ To meet certain objectives/measures, 80% of patients must have records in the certified EHR technology

Stage 1 Meaningful Use for EPs

	Core Objectives	Menu Objectives	Clinical Quality Measures
2013	13	5 of 10	6 (3 core/alt.core + 3 of 38)
2014 and beyond	13	5 of 9	9 of 64 (Covering 3 care domains)

EP Core Objectives

Improving Care, Efficiency and Safety

- Computerized Provider Order Entry
- Electronic Prescribing
- Clinical Decision Support
- Drug-drug and drug-allergy interactions

Data you can use and share

- Record demographics
- Maintain an up-to-date problem list of current and active diagnoses
- Maintain active medication list
- Maintain active medication allergy list
- Record and chart changes in vital signs
- Record smoking status for patients 13 years or older

Engaging your patients

- (2013) Provide patients with an electronic copy of their health information, upon request
- (2014+) Make patient information available online
- Provide clinical summaries for patients for each office visit

Protecting Health Information

- Conduct a HIPAA complaint security risk assessment that includes your EHR

EP Menu Objectives

Improving Care, Efficiency and Safety

- Drug-formulary checks
- Generate lists of patients by specific conditions
- Medication reconciliation
- Summary of care record for each transition of care/referral

Data you can use and share

- Incorporate clinical lab test results as structured data

Engaging your patients

- Send reminders to patients per patient preference for preventive/follow up care
- Provide patients with timely electronic access to their health information (moves to core in 2014)
- Use certified EHR technology to identify patient-specific education resources and provide to patient, if appropriate

Improving Public and Population Health

- Capability to submit electronic data to immunization registries/systems*
- Capability to provide electronic syndromic surveillance data to public health agencies*
- *Must choose one or meet the exclusion for both.

Stage 1 Meaningful Use for Hospitals

	Core Objectives	Menu Objectives	Clinical Quality Measures
2013	12	5 of 10	15 of 15
2014 and beyond	11	5 of 10	16 of 29 (Covering 3 care domains)

EH Core Objectives

Improving Care, Efficiency and Safety

- Computerized Provider Order Entry
- Clinical Decision Support
- Drug-drug and drug-allergy interactions

Data you can use and share

- Record demographics
- Maintain an up-to-date problem list of current and active diagnoses
- Maintain active medication list
- Maintain active medication allergy list
- Record and chart changes in vital signs
- Record smoking status for patients 13 years or older

Engaging your patients

- (2013) Provide patients with an electronic copy of their health information, upon request
- (2013) Provide patients with an electronic copy of their discharge instructions, upon request
- (2014+) Make patient information available online

Protecting Health Information

- Conduct a HIPAA complaint security risk assessment that includes your EHR

EH Menu Objectives

Improving Care, Efficiency and Safety

- Drug-formulary checks
- Generate lists of patients by specific conditions
- Medication reconciliation
- Summary of care record for each transition of care/referral

Data you can use and share

- Incorporate clinical lab test results as structured data
- Record advanced directives for patients 65 years or older


Engaging your patients

- Provide patients with timely electronic access to their health information (moves to core in 2014)
- Use certified EHR technology to identify patient-specific education resources and provide to patient, if appropriate

Improving Public and Population Health

- Capability to submit electronic data to immunization registries/systems*
- Capability to provide electronic submission of reportable lab results to public health agencies*
- Capability to provide electronic syndromic surveillance data to public health agencies*
- *Must choose one or meet the exclusion for all.

Meaningful Use Spec Sheets



Eligible Professional
Meaningful Use Table of Contents
Core and Menu Set Objectives

Eligible Professional Core Objectives	
(1) Use CPOE for medication orders directly entered by any licensed healthcare professional who can enter orders into the medical record per state, local and professional guidelines.	AVAILABLE
(2) Implement drug-drug and drug-allergy interaction checks.	AVAILABLE
(3) Maintain an up-to-date problem list of current and active diagnoses.	AVAILABLE
(4) Generate and transmit permissible prescriptions electronically (eRx).	AVAILABLE
(5) Maintain active medication list.	AVAILABLE
(6) Maintain active medication allergy list.	AVAILABLE
(7) Record all of the following demographics: (A) Preferred language. (B) Gender. (C) Race. (D) Ethnicity. (E) Date of birth.	AVAILABLE
(8) Record and chart changes in the following vital signs: (A) Height. (B) Weight. (C) Blood pressure. (D) Calculate and display body mass index (BMI). (E) Plot and display growth charts for children 2–20 years, including BMI.	AVAILABLE
(9) Record smoking status for patients 13 years old or older.	AVAILABLE
(10) Report ambulatory clinical quality measures to CMS or, in the case of Medicaid EPs, the States.	AVAILABLE
(11) Implement one clinical decision support rule relevant to specialty or high clinical priority along with the ability to track compliance with that rule.	AVAILABLE
(12) Provide patients with an electronic copy of their health information (including diagnostics test results, problem list, medication lists, medication allergies) upon request.	AVAILABLE
(13) Provide clinical summaries for patients for each office visit.	AVAILABLE

You can find detailed information on all the meaningful use objectives and measures in our [Meaningful Use Specification Sheets](#).

To find the specification sheets:

- ☐ Visit our website
(www.cms.gov/EHRIncentivePrograms)
- ☐ Click on the ‘Meaningful Use’ tab
- ☐ Scroll to the bottom
- ☐ Select either “Eligible Professional” or “Eligible Hospital”

EP Clinical Quality Measures

2013

3 Core CQMs
(or 3 Alternate Core
CQMs)



Choose 3 Additional
CQMs
(from a list of 38)

2014+

9 of 64
(Covering 3 care domains)

Things you should know:

- ☐ There are no thresholds to meet for CQMs
- ☐ Always report directly out of your certified EHR
- ☐ Reporting zeros is acceptable
- ☐ There may not be CQMs applicable to everyone (e.g., specialists)

EP Clinical Quality Measures

2013

15 of 15

2014+

16 of 29
(Covering 3 care domains)

Things you should know:

- ☐ There are no thresholds to meet for CQMs
- ☐ Always report directly out of your certified EHR
- ☐ Reporting zeros is acceptable

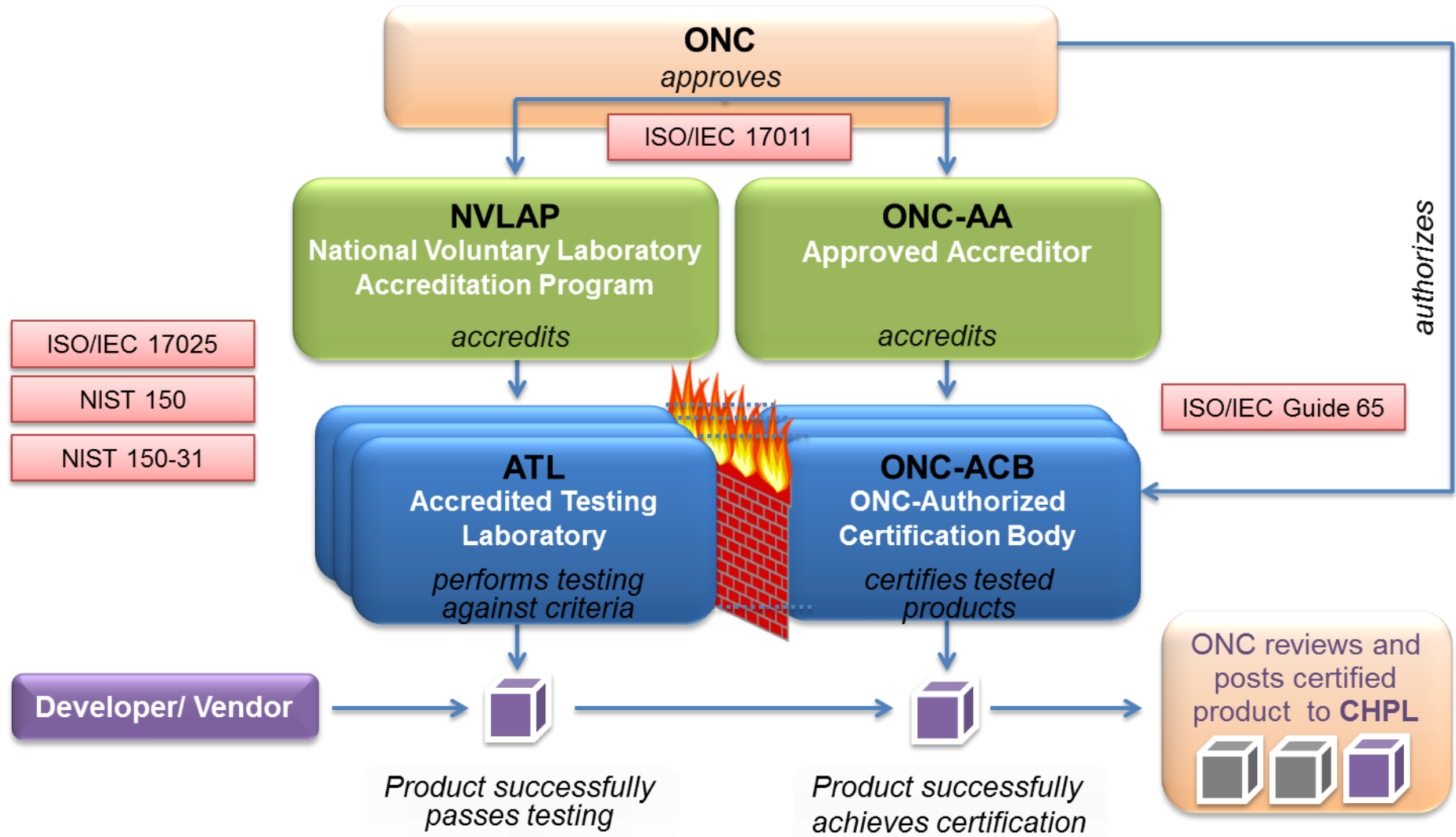
ONC HIT Certification Program

The ONC HIT Certification Program is the second part of ONC's two-part approach to establish a transparent and objective certification process, following the Temporary Certification Program.

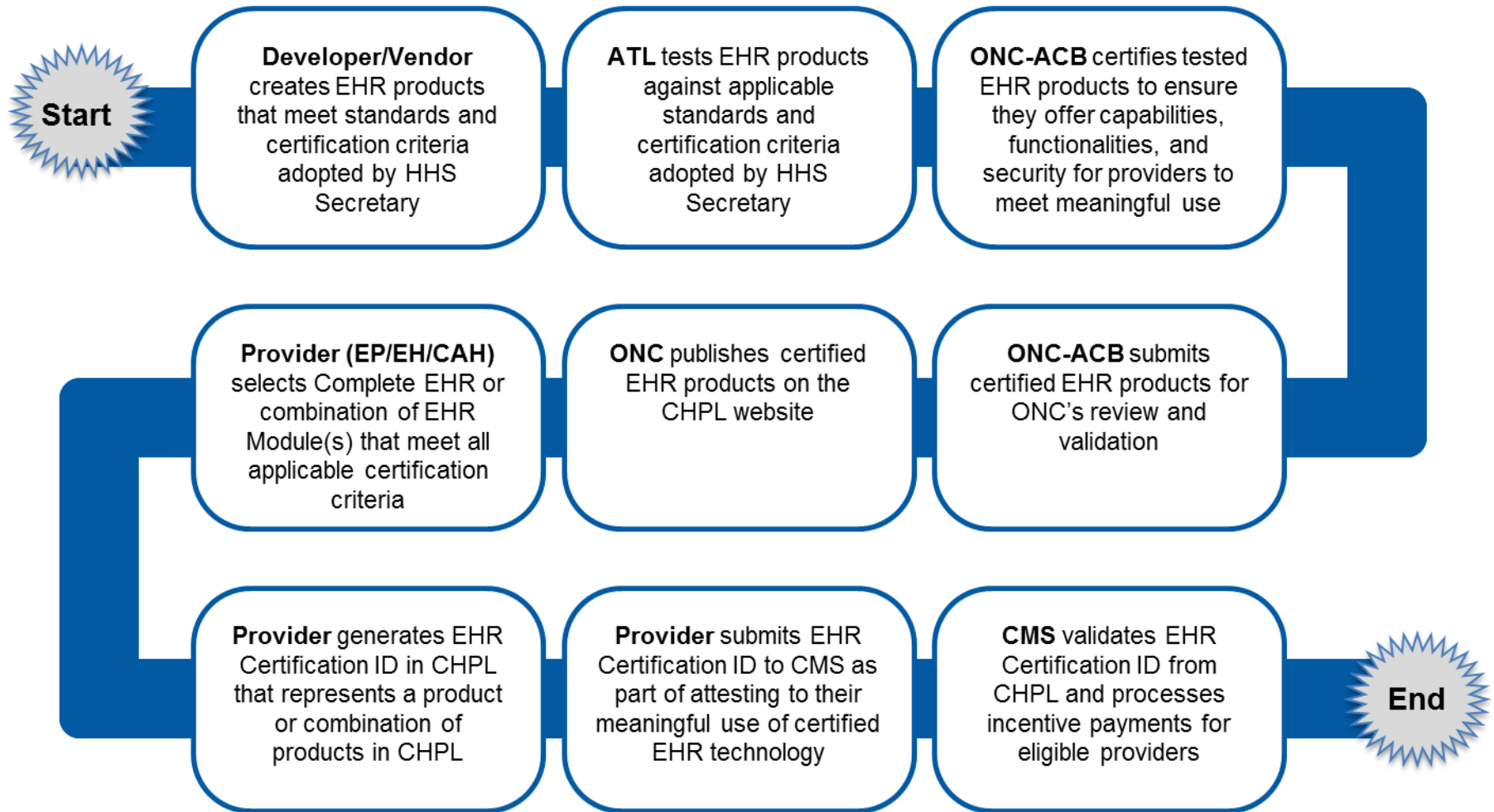
Certification of Health Information Technology (IT) gives providers and patients confidence that the electronic Health IT products and systems they use are secure and can work with other systems to share information accurately. Confidence in Health IT systems is an important part of advancing Health IT system adoption and allowing for the realization of the benefits of improved patient care.

The ONC Certification Program provides a defined process to ensure that EHR technologies meet the standards and certification criteria adopted by the Secretary of HHS to help providers and hospitals achieve Meaningful Use objectives and measures established by CMS.

ONC HIT Certification Program – Structure



ONC HIT Certification Program – Sequence



Certified Health IT Product List (CHPL)

CHPL provides the authoritative, comprehensive listing of certified Complete EHRs and EHR Modules

CHPL*

- ☐ Managed by ONC
- ☐ Currently Version 3.0
 - ☐ Launched in January 2013
 - ☐ 2011 edition, 2014 edition, and combination of 2011 and 2014 edition
- ☐ Downloadable “CHPL Product Information” report
 - ☐ Updated weekly
 - ☐ Contains all CHPL data

*<http://healthit.gov/chpl>

CHPL Users

Certified Health IT Product List (CHPL) Users

EHR Vendors

- Demonstrate that their EHR technology meets the standards and certification criteria adopted by the HHS Secretary
- Promote EHR products that align with providers practice size, medical specialty, and clinical goals

Providers (EP/EH/CAH)

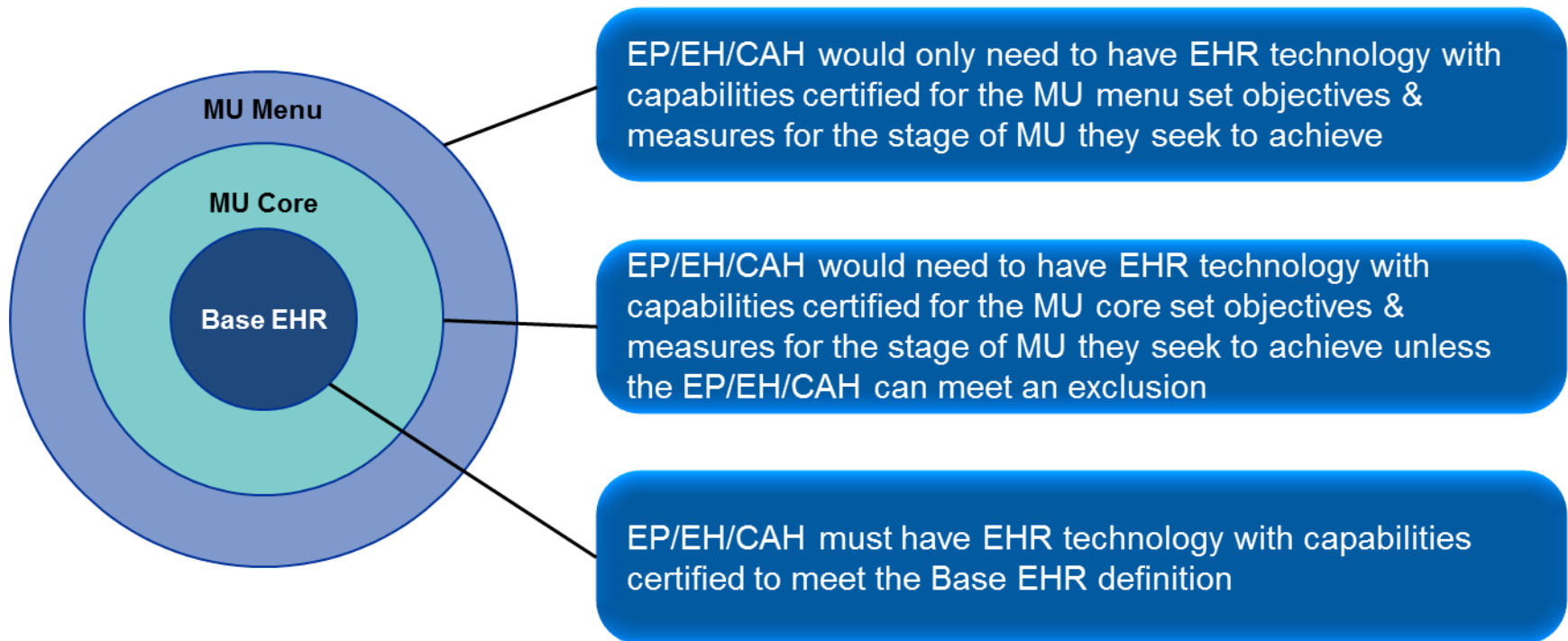
- Find an EHR product or combination of products that are certified for meaningful use
- Find EHR modules that allow practices with existing software to add new functionality
- List self-developed or custom-developed EHR technology on CHPL after it's tested and certified
- Document the products used as part of the attestation process for CMS incentive payments

CMS

- Accepts EHR CERT IDs generated on CHPL for attestation purposes under the EHR Incentive Programs
- Uses CHPL data to track trends in the marketplace by vendor, product, practice type, ACB, and product type (complete vs. modular)

CHPL 3.0 Changes – 2014 EHR Certification

Starting in 2014, all EHR Incentive Programs participants will have to adopt certified EHR technology that meets ONC's Standards & Certification Criteria adopted in 2014 Final Rule



CHPL 3.0 Changes – Combination of 2011 & 2014 EHR Certification

For Federal fiscal year (FY) and calendar year (CY) up to and including 2013, eligible providers can use EHR technology that is certified to 2011 Edition certification criteria AND/OR equivalent 2014 Edition certification criteria

Equivalency Table

2011 Edition		2014 Edition		Certification Criterion Name
<i>Ambulatory</i>	<i>Inpatient</i>	<i>Ambulatory</i>	<i>Inpatient</i>	
§ 170.304(a)	§ 170.306(a)	§ 170.314(a)(1)		Computerized provider order entry
§ 170.302(a)		§ 170.314(a)(2)		Drug-drug, drug-allergy interaction checks
§ 170.304(c)	§ 170.306(b)	§ 170.314(a)(3)		Demographics
§ 170.302(f)		§ 170.314(a)(4)		Vital signs, BMI, & growth charts
§ 170.302(c)		§ 170.314(a)(5)		Problem list
§ 170.302(d)		§ 170.314(a)(6)		Medication list
§ 170.302(e)		§ 170.314(a)(7)		Medication allergy list

CHPL 3.0 Changes – CHPL 2014 Edition EHR Certification ID

Base EHR Definition

- 21 certification criteria (20 = required, 1 = optional) associated with a Base EHR
 - Certification to Privacy & Security policy not required; policy outcome is now reflected in the Base EHR definition

Clinical Quality Measure – EP

- EHR technology to be certified to ≥ 9 CQMs
 - ≥ 6 from CMS' recommended core set
 - ≥ 3 domains from the set selected by CMS for EPs

Clinical Quality Measure – EH/CAH

- EHR technology to be certified to ≥ 16 CQMs from CMS' selected set for EH/CAH
 - ≥ 3 domains from the set selected by CMS for EH/CAHs

CHPL 2014
Edition EHR
Certification ID

Test Method – 2011 and 2014 Edition Comparison

On December 14, 2012, the approved 2014 Edition Test Method was posted and is being updated as necessary.

2011 Edition

- ☐ Aligned to Stage 1 MU
- ☐ 42 certification criteria
- ☐ 20 criteria require standards (48%)
- ☐ 14 criteria have test data (33%)
- ☐ 2 test tools

2014 Edition

- ☐ Aligned to Stage 2 MU
- ☐ 49 certification criteria
- ☐ 28 criteria require standards (57%)
- ☐ 29 criteria have test data (59%)
- ☐ 9 test tools

2014 Edition Testing and Certification began on January 2, 2013.

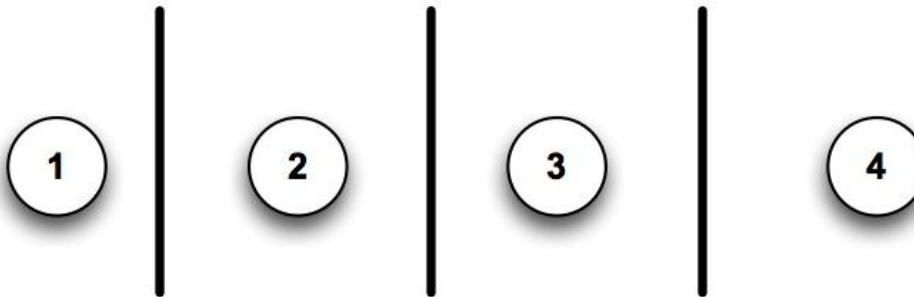
Test Procedures: “Unit-Based” Testing

2011 Edition Test Procedures only allow for individual testing of each certification criterion

Independent data and results

Must keep Unit-based capability for 2014 Edition

Unit Based Testing



Each criterion is tested individually. Current method of testing.

Test Procedures: Scenario-Based Testing

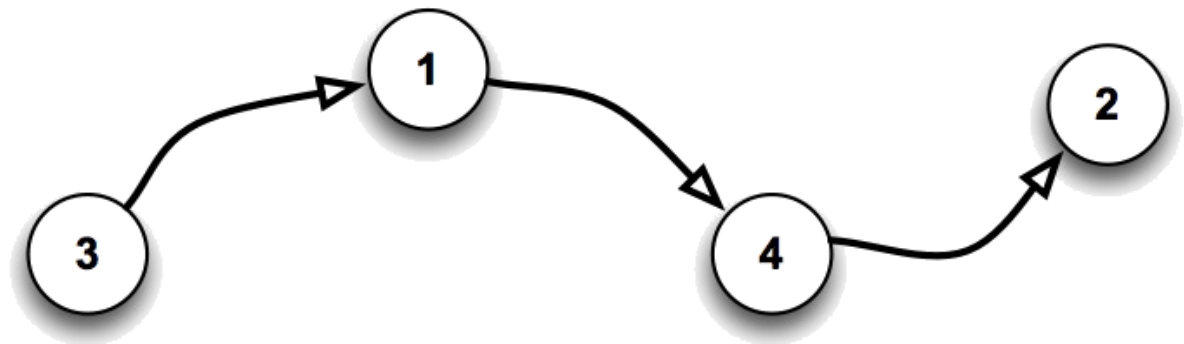
Proposed optional approach for 2014 Edition

Results and data can be “threaded” forward

Modular so individual tests can be skipped for products which don’t have/use given capability

Implementation Work Group

Incremental Workflow Based Testing





Login Instructions

Eligible Professionals (EPs)

- If you are an EP, you must have an active National Provider Identifier (NPI) and have a National Plan and Provider Enumeration System (NPPES) web user account. Use your NPPES user ID and password to log into this system.
- If you are an EP who does not have an NPI and/or an NPPES web user account, navigate to [NPPES](#) to apply for an NPI and/or create an NPPES web user account.
- Users working on behalf of an Eligible Professional(s) must have an Identity and Access Management system (I&A) web user account (User ID/Password) and be associated to the Eligible Professional's NPI. If you are working on behalf of an Eligible Professional(s) and do not have an I&A web user account, [Create a Login](#) in the I&A System.

Eligible Hospitals

- If you are an Eligible Hospital, you must have an active NPI. If you do not have an NPI, apply for an NPI in [NPPES](#).
- Users working on behalf of an Eligible Hospital(s) must have an Identity and Access Management system (I&A) web user account (User ID/Password) and be associated to an organization NPI. If you are working on behalf of an Eligible Hospital(s) and do not have an I&A web user account, [Create a Login](#) in the I&A System.

Associated with both Eligible Professionals (EPs) and Eligible Hospitals

- If you are an EP using your NPPES web user account, you may also be permitted to work on behalf of a hospital. Navigate to the I&A System and use your NPPES User ID and password to request to work on behalf of an organization.
- Users working on behalf of an Eligible Professional(s) may also work on behalf of an Eligible Hospital(s). An Identity and Access Management system (I&A) web user account (User ID/Password) can be associated to both an Eligible Professional NPI and an organization NPI. If you do not have an I&A web user account, [Create a Login](#) in the I&A System.

Account Management

- If you are an existing user and need to reset your password, visit the [I&A System](#).
- If you are having issues with your User ID/Password and are unable to log in, please contact the EHR Incentive Program Information Center at 888-734-6433 / TTY: 888-734-6563.

(*) Red asterisk indicates a required field.

*User ID:

*Password:

- View our [checklist of required materials](#) here.

Log In

Cancel

Web Policies & Important Links

[CMS.gov](#)

Department of Health & Human Services

[Accessibility](#)

[File Formats and Plugins](#)



EPs and hospitals will use the NPPES/NPI web user account user name and password.



Home

Registration

Attestation

Status

Welcome to the Medicare & Medicaid EHR Incentive Program Registration & Attestation System

Last Successful Login: 12/15/2011 | Unsuccessful Login Attempts: 0

For Medicare EHR incentive program participants, you will need to demonstrate meaningful use of certified EHR technology.

For Medicaid EHR incentive program participants, you will need to demonstrate adoption, implementation, upgrading, or meaningful use of certified EHR technology in your first year and demonstrate meaningful use for the remaining years in the program. Attestation for Medicaid occurs through your State Medicaid Agency.

Instructions

Select any topic to continue.

Registration

- Register in the Incentive Payment Program
- Continue Incomplete Registration
- Modify Existing Registration
- Resubmit a Registration that was previously deemed ineligible
- Reactivate a Registration
- Switch Incentive Programs (Medicare/Medicaid)
- Switch Medicaid State
- Cancel participation in the Incentive Program

Attestation

Medicare

- Attest for the Incentive Program
- Continue Incomplete Attestation
- Modify Existing Attestation
- Discontinue Attestation
- Resubmit Failed or Rejected Attestation
- Reactivate Canceled Attestation

Note: Attestation for the Medicaid incentive program occurs at the State Medicaid Agency.

Status

- View current status of your Registration, Attestation, and Payment(s) for the Incentive Program



[Web Policies & Important Links](#)

[Department of Health & Human Services](#)

[CMS.gov](#)

[Accessibility](#)

[File Formats and Plugins](#)



Tabs will guide users through each phase.



[Home](#)

[Registration](#)

[Attestation](#)

[Status](#)

Registration

Registration Instructions

Welcome to the Registration Page.

Depending on the current status of your registration, please select one of the following actions:

- Register** Register for the EHR Incentive Programs
Continue an incomplete registration
- Modify** Modify Existing Registration
Switch incentive programs (Medicare/Medicaid)
Switch Medicaid state
- Cancel** Discontinue participation in the Medicare & Medicaid EHR Incentive Programs
- Reactivate** Reactivate a previously canceled registration
- Resubmit** Resubmit a registration that was previously deemed ineligible

Registration Selection

Identify the desired registration and select the Action you would like to perform. Please note only one Action can be performed at a time on this page.

Existing registration(s):

Name	Tax Identifier	National Provider Identifier (NPI)	Incentive Type	Registration Status	Action
Jane Doe, MD	XXX-XX-3568 (SSN)	000000000000	Medicare	Active	<input type="button" value="Register"/>

[Web Policies & Important Links](#)

[CMS.gov](#)

[Department of Health & Human Services](#)

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[Home](#)

[Registration](#)

[Attestation](#)

[Status](#)

Progress: 1 of 1

Completed

EHR Incentive Program

Incentive Program Questionnaire

(*) Red asterisk indicates a required field.

Not sure which incentive program to select? Please visit the CMS Website for information on the requirements and the differences between the [Medicare and Medicaid EHR Incentive programs](#).

Note: Hospitals that are eligible or may be eligible for EHR incentive payments under both Medicare and Medicaid should select **BOTH Medicare and Medicaid** during the registration process, even if

1) Their Medicaid State has not officially launched their EHR incentive program.

2) They plan to apply only for a Medicaid EHR incentive payment by adopting, implementing, or upgrading certified EHR technology.

Dually-eligible hospitals can then attest through CMS for their Medicare EHR incentive payment at a later date.

Note: Medicare EPs cannot receive both Medicare EHR and e-Prescribing incentive payments.

* Please select your Incentive Program

☒ Medicare ☐ Medicaid

* Please select your Eligible Professional Type:

Doctor of Medicine or Osteopathy

The EHR incentive programs require the use of EHR technology certified for this program. Please visit the CMS Website, for additional information on [certified EHR technology](#) for this program.

Note: A certified EHR is not required to complete the registration process, but an EHR Certification Number will be required when you attest for payment.

* Do you have a certified EHR? [What is an EHR Certification Number?](#)

☒ Yes ☐ No

EHR Certification Number (Optional): 0000000000000000

Please select the **Previous** button to go back a page. Please note that any changes that you have made on this page will not be saved. Please select the **Save & Continue** button to save your entry and proceed.

[Previous](#)

[Save & Continue](#)



[Web Policies & Important Links](#)

[Department of Health & Human Services](#)

[CMS.gov](#)

[Accessibility](#)

[File Formats and Plugins](#)



You do not need a certified EHR to complete the registration process, but you must have an EHR Certification Number for attestation.

CMS EHR Certification ID

[CHPL]

=

EHR Certification Number [Registration & Attestation]

Helpful Resources

HHS Office of National Coordinator Health IT - certified EHR technology list <http://healthit.hhs.gov/CHPL>

CMS EHR Incentive Program website
www.cms.gov/EHRIncentivePrograms

- ☐ Frequently Asked Questions (FAQs)
- ☐ Stage 1 and Stage 2 Final Rules
- ☐ Meaningful Use Attestation Calculator
- ☐ Registration & Attestation User Guides
- ☐ Listserv



Questions & Answers

Evaluate Your Experience with Today's National Provider Call

- ❑ To ensure that the National Provider Call (NPC) Program continues to be responsive to your needs, we are providing an opportunity for you to evaluate your experience with today's NPC. Evaluations are anonymous and strictly voluntary.
- ❑ To complete the evaluation, visit <http://npc.blhtech.com/> and select the title for today's call from the menu.
- ❑ All registrants will also receive a reminder email within two business days of the call. Please disregard this email if you have already completed the evaluation.
- ❑ We appreciate your feedback!



Thank You

- ❑ For more information about the MLN, please visit <http://cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNGenInfo/index.html>
- ❑ For more information about the National Provider Call Program, please visit <http://cms.gov/Outreach-and-Education/Outreach/NPC/index.html>

