

eHealth Vendor Workgroup

April 30, 2014
12:00 PM ET

Agenda

- » Reminder: Submit Feedback on Sepsis eCQM
- » CMS Test EHR: Using the Designated Test EHRs to Achieve Transitions of Care Measure #3

Next call: Thursday, May 15 at 12:00 PM ET,
listserv to follow

Submit Comments on Sepsis eCQM

- » Submit feedback on NQF #500 “Severe Sepsis and Septic Shock: Management Bundle”
- » Previously included on the CMS Measures Under Consideration List for the Hospital IQR program
- » Limit comments to the eSpecification, and not the measure construct itself
- » Deadline: May 14, 2014
- » Listserv includes more details
- » <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/MMS/CallforPublicComment.html>



CMS Test EHR: Using the Designated Test EHRs to Achieve Transitions of Care Measure #3

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CNI Advantage

April 30, 2014

- When to use the Test EHR
- EHR Randomizer
 - Provider Registration Process
 - Vendor Supported Process
 - DirectTrust Accreditation
 - Trust Anchor Exchange
- Increasing the pool of Test EHRs
- Q&A

Meaningful Use

- For Meaningful Use Stage 2, the ToC objective includes 3 measures:
- Measure #1: requires that a provider send a summary care record for more than 50% of transitions of care and referrals.
- Measure #2 requires that a provider electronically transmit a summary care record for more than 10% of transitions of care and referrals using CEHRT or eHealth Exchange participant
- Measure #3 requires at least one summary care record electronically transmitted to recipient with different EHR vendor **OR** to CMS test EHR

2014 Edition Certification

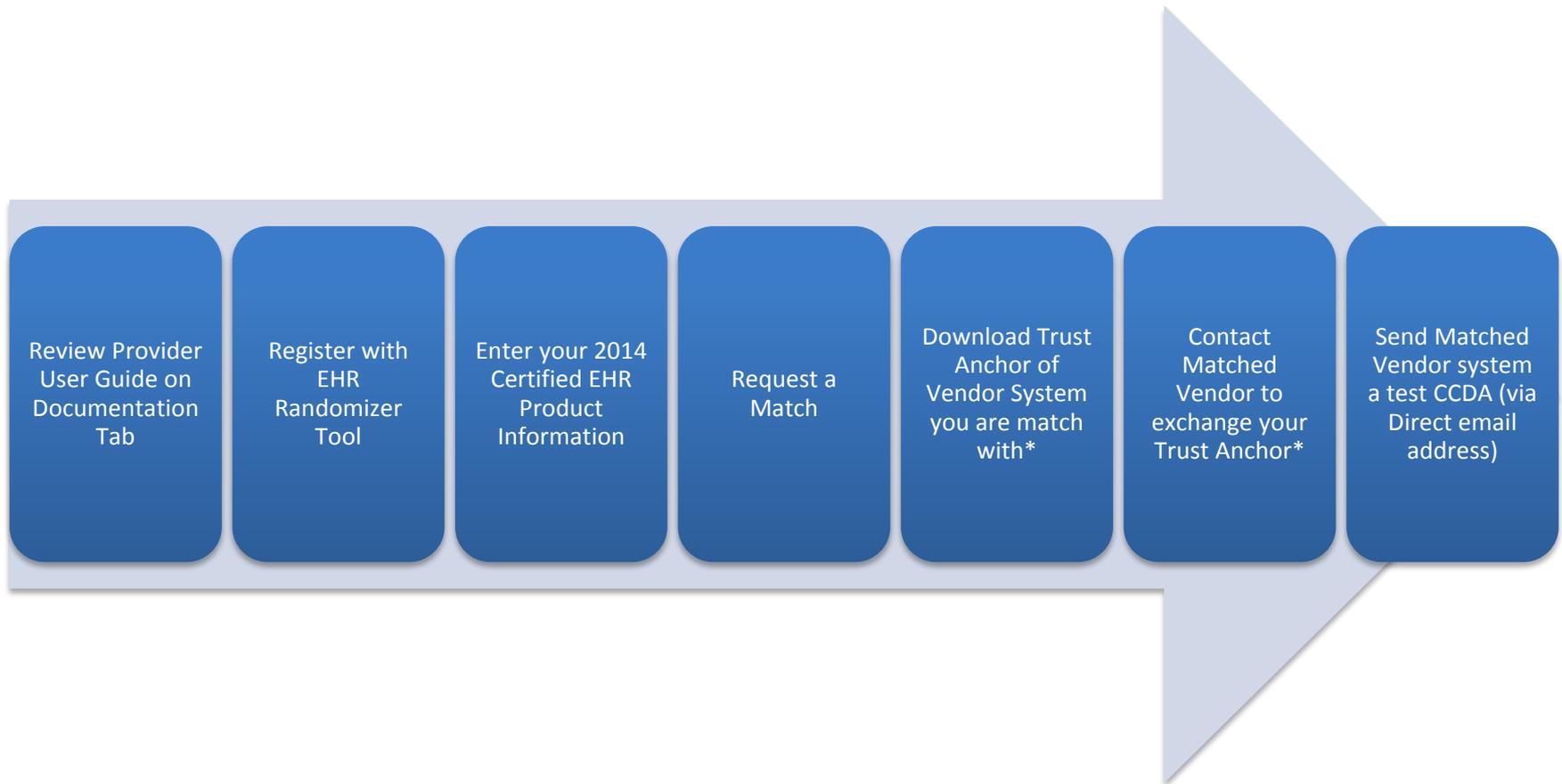
- Two 2014 Edition EHR certification criteria
- 170.314(b)(1) : Transitions of care—receive, display, and incorporate transition of care/referral summaries.
- 170.314(b)(2) : Transitions of care—create and transmit transition of care/referral summaries.

CMS Test EHR is only required in the case where exchange can't occur during regular course of action

- Developed and Hosted by NIST to support ToC Measure #3
- ONC & NIST provide oversight
- URL: <https://ehr-randomizer.nist.gov>
- Avenues for users to ask questions: EHR Randomizer Google Group or ehr-randomizer@nist.gov
- Registration is done at the Provider level
 - One registration AND test per CEHRT for groups with multiple locations all using the same instance of EHR
 - Registrant can be staff person performing the test on behalf of the EP or EH

- McKesson
- Meditech
- iPatientCare
- ONC and NIST would like to acknowledge the efforts of the Test EHRs in supporting providers and improving the testing process
- Being a Test EHR highlights interoperability and real-life experience with exchange
- Ongoing process to add Test EHRs - [details here](#)
- Additional Test EHRs streamline the process for providers to meet Measure #3

Provider Process for Test EHR



Welcome to the NIST EHR-Randomizer application.

As part of meaningful use Stage 2's transition of care objective, measure #3 [PDF - 231 KB] requires eligible professionals (EPs) and eligible hospitals/critical access hospitals (CAHs) to either:

- Conduct one or more successful electronic exchanges of a summary of care document, with a recipient who has EHR technology designed by a different EHR technology developer than the sender's.
- or
- Conduct one or more successful tests with the CMS designated test EHR during the EHR reporting period

The EHR Randomizer supports the testing of exchange with a designated test EHR. If you successfully exchanged summary of care document with at least one provider with a different EHR than yours and documented that exchange, you do not need to use this website for the test exchange measure.

In case you need support, please post a message on the [ehr-randomizer](#) group.

Objectives

Provider Workflow

Vendor Workflow

Overall Workflow

Documentation

User Guides

- [Vendor User Guide](#)
- [Provider User Guide](#)



Other Resources

- [ONC Direct Basics](#)
- [Process to Become CMS Designated Test EHR](#)

Pre-Registration Checklist – For Providers Using Non DirectTrust Accredited CEHRT/HIS

- Prior to starting the Test EHR process, Providers must ensure the following information is available:
 - ✓ Direct Address
 - ✓ Access to the provider CEHRT's Trust Anchor
 - ✓ CCDA from a Test Patient from the CEHRT

- Prior to starting the Test EHR process, Providers must ensure the following information is available:
 - ✓ Direct Address
 - ✓ CCDA from a Test Patient from the CEHRT
 - ✓ Trust Anchors **do not need** to be exchanged because matching occurs with a DirectTrust Accredited Test EHR

- Confusion around what a Direct Address is, how they get one, how they use it?
- Providers are starting the Test EHR process without understanding the process and obtaining all the necessary information, resulting in:
 - Delays in completing the test
 - Substantial effort on the part of the designated Test EHRs to educate the providers
- Level of technical understanding of how their system was certified to send Direct messages which is directly related to DirectTrust accreditation questions and exchange of Trust Anchors

Recommended Vendor Strategies to Ensure Customer Success with Test EHR

When

- At the start of the EHR Reporting Period

Why

- No electronic exchange with different EHR

How

- Reference/Link to the Provider User Guide

The Office of the National Coordinator for
Health Information Technology



Q&A

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