CORHIO
COLORADO REGIONAL HEALTH INFORMATION ORGANIZATION

COLORADO MEDICAID
EHR INCENTIVE PROGRAM

PROGRAM UPDATE

December 09, 2015

As previously reported in the November newsletter, CMS released the Final Rule for Meaningful Use 2015-2017 and Stage 3 on October 6th. Included in the rule is the finalization of modified Stage 2. The rule requires that all providers who are attesting to Meaningful Use this year meet the modified Stage 2 objectives with alternate exclusions for providers scheduled to attest to Stage 1 in 2015.

For more information, please refer to the CMS EHR Incentive Programs website for tipsheets for Eligible Professionals and Hospitals/CAHs, 2015 Specification Sheets, alternate exclusion tipsheets for providers scheduled to attest to Stage 1 in 2015, and more. CORHIO recently published a webinar reviewing the changes to the program. View the webinar at *Meaningful Use in 2015 and Beyond: Changes to Stage 2*.

REMINDER! Colorado Medicaid Registration and Attestation Site

The modifications to the program necessitate system updates to the Colorado Registration & Attestation (R&A) site. Due to the amount of changes that need to be made, the site is currently closed for all registrations, AIU, and attestations.

The R&A is currently scheduled to open **Spring 2016** for EPs and **Fall 2016** for EHs for the 2015 program year, pending further notice. Additionally, due to the program changes, the 2015 program year eligibility workbooks required updating. The 2015 workbooks will be published on the CORHIO website as soon as they are available.

Federal Interoperability Roadmap: Part II

In October, the Office of the National Coordinator for Health IT (ONC) released the Shared Interoperability Roadmap. This roadmap describes the ONC's vision and framework for connectivity and health IT infrastructure between today and the end of 2024. The Roadmap will be an important guide as Meaningful Use continues to progress towards Stage 3 and health IT furthers its impact on healthcare. There are a number of milestones (see page 52 in the above link) that impact Meaningful Use in the Roadmap.

In November's newsletter, we outlined the shift to value-based payment, verifiable identity, and the collection of data elements. This month we will discuss Health IT certifications.

There are two important milestones in the Interoperability Roadmap related to health IT certifications. First, the ONC and industry-led testing and certification programs will develop a standard set of practices and policies that ensure consistency across testing and certification bodies that will encourage technology developers to

accelerate testing tools for interoperability in EHRs. This milestone aims to produce consistency across EHRs in the development of technology for interoperability between systems. The goal, by 2024, is a comprehensive testing process that allows providers to continuously test their health IT systems for interoperability as new components are added.

The second certification milestone asks Standards Development Organizations (SDOs) to create standards for the development of Application Programming Interfaces (API) without discouraging creativity or limiting opportunities for innovation. This is a challenging milestone as the need for the APIs to be aligned with existing standards is critical while the need to be innovative for the next wave of healthcare evolution is equally important. The ultimate goal is for more than 75 percent of technology developers participating in national projects to provide access to electronic health information through standard, public APIs. Access for patients to health data via an API on their mobile device, if the API is crafted properly, could fundamentally change the way healthcare is delivered. This work will be exciting to watch over the next decade. Stay tuned for Part 3 of this article next month!

A Closer Look at 2015 Patient Engagement Objectives

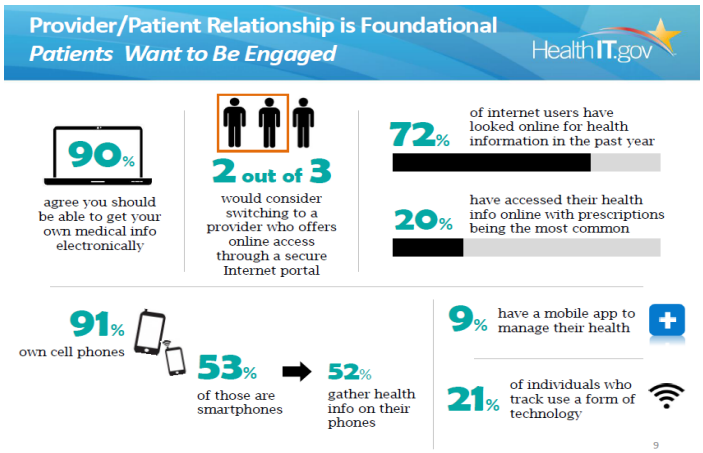
The patient engagement objectives Patient Electronic Access Measure 1, View, Down, Transmit Measure 2, and Secure Messaging have been an area of concern for providers. Software cost and implementation, practice workflow re-design, and patient participation can make meeting these objectives difficult for providers.

CMS was responsive to provider input and modifications were made in the Final Rule to help providers successfully meet these objectives well as continue progress towards the EHR Incentive Program goals.

- ***Stage 2, Patient Electronic Access, Measure 2****:* For an EHR reporting period in 2015 and 2016, instead of the previous 5 percent threshold, this measure now requires that at least one patient seen by the EP during the EHR reporting period, or discharged from the inpatient or emergency department of an eligible hospital or CAH, views, downloads or transmits to a third party their health information during the EHR reporting period. In 2017, the threshold* goes back up to the original 5 percent.

- ***Stage 2, EP Secure Electronic Messaging****:* The use of secure electronic messaging for communication between patients and providers previous 5 percent threshold has been changed to the "capability" for patients to send and receive a secure electronic message with the EP. The previously required percentage is now a "Yes/No" attestation that the functionality was fully enabled during the EHR reporting period. In 2016, the threshold* requirement is that one patient uses secure messaging and increases to 5 percent in 2017.

*Threshold modifications are for Stage 2 only; there are special exclusions for providers scheduled to attest to Stage 1 in 2015



These patient engagement objectives set the foundation for patients to become more involved and better understand their health status and the care they are provided, which can lead to better outcomes. Per the ONC, 80 percent of Americans who have access to their health information use it, and a full two-thirds of those who don't yet have electronic access say they want it.

The lower patient engagement thresholds are nice in the short term but practices will need to use this time and plan accordingly to meet the future reporting requirements.

In next month's newsletter, we will take a deep dive in to the Public Health objectives.

Updated Anticipated Timeline – Colorado Medicaid EHR Incentive Program

Event	Status/Expected Date
CO R&A System open for EPs to attest to 2015 Meaningful Use	Late Spring, 2016
CO R&A System open for EHs to attest to 2015 Meaningful Use	Fall, 2016

Medicaid Program Point of Contact and Partnerships

The Department of Healthcare Policy and Finance (the Department) has partnered with CORHIO to provide program coordination and assist with provider communications and outreach regarding the Medicaid EHR Incentive Program. The Medicaid EHR Incentive Program Coordinator will be the central point of contact for Eligible Professionals, Eligible Hospitals, partners and other interested parties on requirements and processes. Inquiries regarding the Medicaid EHR Incentive Program can be sent to MedicaidEHR@corhio.org or 720.285.3232.

Xerox has been contracted by the Department to manage the Provider Outreach Page and to provide the Colorado R&A System, including the web portal through which eligible providers can register and attest to receive the EHR incentive payments.