



Meaningful Use: Navigating the Path to Payment

Statewide Rural Health Conference
Mohican State Lodge
October 19, 2011





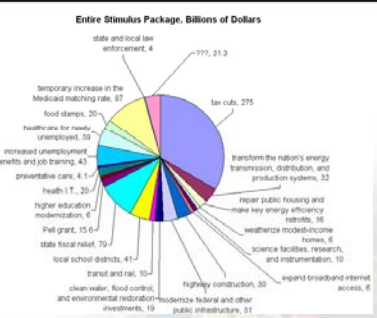
TECHNOLOGY

Everyone is Here To Save You, But Unfortunately
... You're Not In The Computer




Economic Stimulus Package - ARRA

- On February 17, 2009, President Obama signed the American Recovery and Reinvestment Act of 2009 (ARRA).
- The ARRA provides over \$20 billion in stimulus expenditures for the development and adoption of HIT.
- \$17 billion for incentive payments through the Medicare and Medicaid reimbursement systems to encourage providers and hospitals to implement EHR technology systems



Entire Stimulus Package, Billions of Dollars

Category	Amount (Billions of Dollars)
tax cuts	275
state and local law enforcement	4
temporary increase in the Medicaid matching rate	87
food stamps	20
healthcare for newly unemployed	10
increased unemployment benefits and job training	43
preventative care	8.1
health I.T.	20
higher education modernization	6
Felt grant	15.6
state fiscal relief	79
local school districts	41
transit and rail	10
clean water, flood control, and environmental restoration investments	19
highway construction	20
public infrastructure	31
expand broadband internet access	6
science facilities, research, and instrumentation	10
weatherize middle-income homes	6
repair public housing and make key energy efficiency retrofits	16
transform the nation's energy transmission, distribution, and production systems	32



Who is eligible?

Medicare eligible professionals	Medicaid eligible professionals
Doctors of medicine	Physicians (MD, DO)
Doctors of osteopathy	Nurse practitioners
Doctors of dental surgery or dental medicine	Certified nurse-midwives
Doctors of podiatric medicine	Podiatrist (DPM)
Doctors of optometry	Dentists (DDS, DMD)
Chiropractors	Physicians assistants working in a Federally Qualified Health Center (FQHC) or rural health clinic (RHC) that is so led by a physicians assistant

•EPs must chose either Medicare or Medicaid, can't participate in both

•EPs may not be **hospital-based**

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Who is eligible?

Medicare Providers	Medicaid Providers
Subsection D hospitals paid under PPS	Acute care hospitals, with at least 10% Medicaid volume. Includes CAHs and Cancer Hospitals
Critical access hospital (CAH)	Children's hospitals
Medicare Advantage affiliated hospitals	


Hospitals can participate in both Medicare and Medicaid incentive payments

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Eligible Provider (EP) flow chart


How to Use This Flow Chart: A Medicaid eligible professional may also be eligible for the Medicare incentive and should follow the path of answering as to the quantity of Medicaid patient volume to determine Medicare eligibility. An eligible professional who qualifies for both programs may only participate in one program. Eligible Professionals eligible to receive EHR incentive payments under Medicare or Medicaid will maintain their programs by following the Medicaid EHR Incentive Program.

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Meaningful use requirements: Stage 1 Objectives and Quality Measures

- 15 core objectives for Eligible Professionals
- 14 of 15 core objectives for hospitals (not eRx)
 - 5 additional objectives chosen from menu set of 10
- Quality Measures
 - Eligible Professional
 - 6 total clinical quality measures
 - 3 core or alternate core measures
 - 3 out of 38 from menu set
 - Hospitals
 - 15 Quality Measures



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Meaningful use requirements: Stage 1 Objectives and Quality Measures

- Some MU objectives not applicable to every EP
 - Chiropractors who do not e-prescribe
 - Dentists who do not perform immunizations
 - Exclusions don't count against EP – they will only need to report on objectives in which they have data



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Core objective and measures- percentage based measures

Objective	Measure
Objective: Record patient demographics	Measure: More than 50 percent of patients' demographic data recorded as structured data.
Objective: Record vital signs and chart changes (height, weight, blood pressure, body mass index, growth charts for children)	Measure: More than 50 percent of patients two years of age or older have height, weight and blood pressure recorded as structured data.
Objective: Maintain up-to-date problem list of current and active diagnoses	Measure: More than 80 percent of patients have at least one entry as structured data.
Objective: Maintain active medication list	Measure: More than 80 percent of patients have at least one entry recorded as structured data.
Objective: Maintain active allergy list	Measure: More than 80 percent of patients have at least one entry recorded as structured data.
Objective: Record smoking status for patients 13 years of age or older	Measure: More than 50 percent of patients 13 years if age of older have smoking status recorded as structured data.
Objective: For individual professionals, provide patients with clinical summaries for each office visit, for hospitals, provide an electronic copy of hospital discharge instructions on request	Measure: Clinical summaries provided to patients for more than 50 percent of all office visits within three business days.
Objective: On request, provide patients with an electronic copy of their health information (including diagnostic test results, problem list, medication list, medication allergies, and for hospitals, discharge summary and procedures)	Measure: More than 50 percent of requesting patients receive electronic copy within three business days.
Objective: Generate and transmit permissible prescriptions electronically (does not apply to hospitals)	Measure: More than 40 percent are transmitted electronically using certified EHR technology.
Objective: Computer provider order entry (CPOE) for medication orders	Measure: More than 30 percent of patients with at least one medication in their medication ordered through CPOE.

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Core objective and measures- yes/no response


Objective	Measure
Objective: Implement drug-drug and drug-allergy interaction checks	Measure: Functionality is enabled for these checks for the entire reporting period
Objective: Implement capability to electronically exchange key clinical information among providers and patient-authorized entities	Measure: Perform at least one test of EHR's capacity to electronically exchange information
Objective: Implement one clinical decision support rule and ability to track compliance with the rule	Measure: One clinical decision support rule implemented
Objective: Implement systems to protect privacy and security of patient data in the EHR	Measure: Conduct or review a security risk analysis, implement security updates as necessary and correct identified security deficiencies
Objective: Report clinical quality measure to CMS or states	Measure: For 2011, provide aggregate numerator and denominator through attestation; for 2012, electronically submit measures



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Menu objectives – must complete 5 of 10


Objective	Measure
Objective: Incorporate clinical laboratory test results into EHRs as structured data	Measure: More than 40 percent of clinical laboratory test results whose results are in positive/negative or numerical format are incorporated into EHRs as structured data
Objective: Use EHR technology to identify patient-specific education resources and provide to the patient as appropriate	Measure: More than 10 percent of patients are provided patient-specific education resources
Objective: Perform medical reconciliation between care settings	Measure: Medication reconciliation is performed for more than 50 percent of transitions of care
Objective: Provide summary of care record for patients referred or transitioned to another provider or setting	Measure: Summary of care record is provided for more than 50 percent of patient transitions or referrals
Objective: Send reminders to patients (per patient preference) for preventative and follow-up care	Measure: More than 20 percent of patients 65 years of age or older or five years if age or younger are sent appropriate reminders
Objective: Provide patients with timely electronic access to their health information (including laboratory results, problem list, medication lists, medication allergies)	Measure: More than 10 percent of patients are provided electronic access to information within four days of it being updated in the EHR
Objective: Implement drug formulary checks	Measure: Drug formulary check system is implemented and has access to at least one internal or external drug formulary for the entire reporting period
Objective: Generate lists of patients by specific conditions to use for quality improvement, reduction of disparities, research or outreach	Measure: Generate at least one listing of patients with specific condition
Objective: Submit electronic immunization data to immunization registries or immunization information systems	Measure: Perform at least one test of data submission and follow-up submission (where registries can accept electronic submission)
Objective: Submit electronic syndromic surveillance data to public health agencies	Measure: Perform at least one test of data submission and follow-up submission (where public health agencies can accept electronic submission)



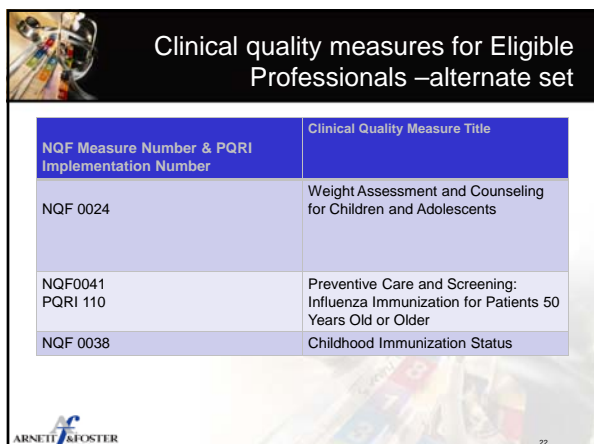
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Clinical quality measures – Eligible Professionals report on Core Set (3)

NQF Measure Number & PQRI Implementation Number	Clinical Quality Measure Title
NQF 0013	Hypertension: Blood Pressure Measurement
NQF 0028	Preventive Care and Screening Measure Pair: a) Tobacco Use Assessment, b) Tobacco Cessation Intervention
NQF 0421 PQRI 128	Adult Weight Screening and Follow-up



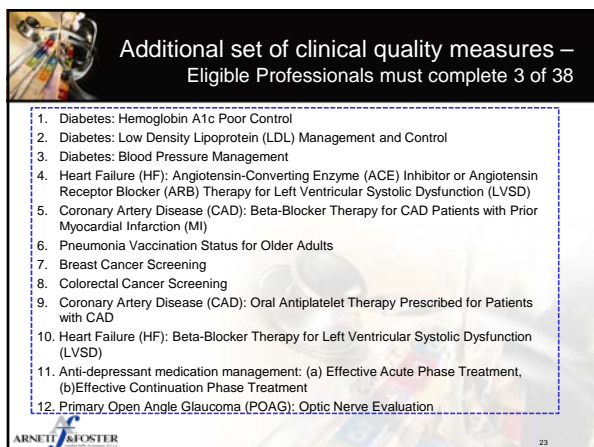
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Clinical quality measures for Eligible Professionals –alternate set

NQF Measure Number & PQRI Implementation Number	Clinical Quality Measure Title
NQF 0024	Weight Assessment and Counseling for Children and Adolescents
NQF0041 PQRI 110	Preventive Care and Screening: Influenza Immunization for Patients 50 Years Old or Older
NQF 0038	Childhood Immunization Status

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Additional set of clinical quality measures – Eligible Professionals must complete 3 of 38

1. Diabetes: Hemoglobin A1c Poor Control
2. Diabetes: Low Density Lipoprotein (LDL) Management and Control
3. Diabetes: Blood Pressure Management
4. Heart Failure (HF): Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy for Left Ventricular Systolic Dysfunction (LVSD)
5. Coronary Artery Disease (CAD): Beta-Blocker Therapy for CAD Patients with Prior Myocardial Infarction (MI)
6. Pneumonia Vaccination Status for Older Adults
7. Breast Cancer Screening
8. Colorectal Cancer Screening
9. Coronary Artery Disease (CAD): Oral Antiplatelet Therapy Prescribed for Patients with CAD
10. Heart Failure (HF): Beta-Blocker Therapy for Left Ventricular Systolic Dysfunction (LVSD)
11. Anti-depressant medication management: (a) Effective Acute Phase Treatment, (b) Effective Continuation Phase Treatment
12. Primary Open Angle Glaucoma (POAG): Optic Nerve Evaluation

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Additional set of clinical quality measures – must complete 3 of 38

13. Anti-depressant medication management: (a) Effective Acute Phase Treatment, (b) Effective Continuation Phase Treatment
14. Primary Open Angle Glaucoma (POAG): Optic Nerve Evaluation
15. Diabetic Retinopathy: Documentation of Presence or Absence of Macular Edema and Level of Severity of Retinopathy
16. Diabetic Retinopathy: Communication with the Physician Managing Ongoing Diabetes Care
17. Asthma Pharmacologic Therapy
18. Asthma Assessment
19. Appropriate Testing for Children with Pharyngitis
20. Oncology Breast Cancer: Hormonal Therapy for Stage IC-IIIC Estrogen Receptor/Progesterone Receptor (ER/PR) Positive Breast Cancer
19. Oncology Colon Cancer: Chemotherapy for Stage III Colon Cancer Patients
20. Prostate Cancer: Avoidance of Overuse of Bone Scan for Staging Low Risk Prostate Cancer Patients

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Additional set of clinical quality measures – must complete 3 of 38

- 21. Smoking and Tobacco Use Cessation, Medical Assistance: a) Advising Smokers and Tobacco Users to Quit, b) Discussing Smoking and Tobacco Use Cessation Medications, c) Discussing Smoking and Tobacco Use Cessation Strategies
- 22. Diabetes: Eye Exam
- 23. Diabetes: Urine Screening
- 24. Diabetes: Foot Exam
- 25. Coronary Artery Disease (CAD): Drug Therapy for Lowering LDL-Cholesterol
- 26. Heart Failure (HF): Warfarin Therapy Patients with Atrial Fibrillation
- 27. Ischemic Vascular Disease (IVD): Blood Pressure Management
- 28. Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antithrombotic
- 29. Initiation and Engagement of Alcohol and Other Drug Dependence Treatment: a) Initiation, b) Engagement
- 30. Prenatal Care: Screening for Human Immunodeficiency Virus (HIV)
- 31. Prenatal Care: Anti-D Immune Globulin




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Additional set of clinical quality measures – must complete 3 of 38

- 32. Controlling High Blood Pressure
- 33. Cervical Cancer Screening
- 34. Chlamydia Screening for Women
- 35. Use of Appropriate Medications for Asthma
- 36. Low Back Pain: Use of Imaging Studies
- 37. Ischemic Vascular Disease (IVD): Complete Lipid Panel and LDL Control
- 38. Diabetes: Hemoglobin A1c Control (<8.0%)




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Quality Measures– Hospitals report on 15 measures for Stage 1

One of the 14 core objectives is to report hospital clinical quality measures to CMS or the states. The EHR Incentive Program Final Rule and the associated Initial Set of Standards, Implementation Specifications, and Certification Criteria for EHR Technology Final Rule specify 15 hospital quality measures to meet Stage 1 quality reporting objective

Clinical Quality Measure Title
1. Emergency Department Throughput – admitted patients – Median time from ED arrival to ED departure for admitted patients
2. Emergency Department Throughput – admitted patients – Admission decision time to ED departure time for admitted patients
3. Ischemic stroke – Discharge on antithrombotics
4. Ischemic stroke – Anticoagulation for A-fib/flutter
5. Ischemic stroke – Thrombolytic therapy for patients arriving within 2 hours of symptom onset
6. Ischemic or hemorrhagic stroke – Antithrombotic therapy by day 2
7. Ischemic stroke – Discharged on statins
8. Ischemic or hemorrhagic stroke – Stroke education
9. Ischemic or hemorrhagic stroke – Rehabilitation assessment
10. VTE prophylaxis within 24 hours of arrival
11. Intensive Care Unit VTE prophylaxis
12. VTE – Anticoagulation overlap therapy
13. VTE – Platelet monitoring on unfractionated heparin
14. VTE discharge instructions
15. Incidence of potentially preventable VTE



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Questions

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