

Certified EHRs Remain Central to Patient Care in CMS Quality Payment Program

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2016 marks final Year to initiate participation in Medicaid EHR Incentive Program

Although the term “Meaningful Use” will sunset as eligible professionals (EPs) in the Medicare EHR Incentive Program transition into the new Centers for Medicare and Medicaid Services (CMS) Quality Payment Program, the use of certified health information technology remains central to health care delivery, including the use of certified electronic health records (EHR). Meaningful Use lives on for EPs serving Medicaid patients, as 2016 is the final year to initiate participation in the Medicaid EHR Incentive Program.

CMS Reforms Medicare Payment Through Quality Payment Program

On April 27, 2016, CMS announced the proposed rule for the Quality Payment Program, which puts the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) legislation into action. MACRA, with bipartisan support, replaces the Sustainable Growth Rate (SGR) formula in what many have called the most significant change in Medicare reimbursement in over 30 years. The Quality

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Payment Program represents a large step from fee-for-service payment systems to a push towards value-based payment, which specifically incentivizes quality and value.

The proposed rule includes 2 paths: (1) the Merit-based Incentive Payment System (MIPS) and (2) the Advanced Alternative Payment Models (APMs). The use of certified EHR technology is a cornerstone requirement for both paths. This reinforces CMS’s stance that certified EHR technology is a critical factor for improving health outcomes. The focus on certified EHRs is pivoting from the basic movement of paper to electronic patient health records to a more comprehensive inclusion of certified information technology (IT) solutions to advance patient engagement, interoperability, and care coordination.

As the proposed rule outlines, the majority of Stage 3 Meaningful Use objectives from the EHR Incentive programs are represented in MIPS under the new Advancing Care Information category score, which accounts for a 25% weight of the Year 1 composite score. Year 1 Performance Category Weights also include Clinical Practice Improvement Activities (15%), Cost (10%), and Quality (50%). The quality measures and many of the clinical practice improvement activities rely on data generated from certified EHRs.

The use of certified EHR technology is the first criterion of an Advanced APM. It is

expected that 50% of eligible clinicians in APMs would use certified EHR technology to document and communicate clinical care information in the first performance year. That number is expected to increase to 75% in subsequent years.

Meaningful Use Still ‘Meaningful’ to EPs in Medicaid EHR Incentive Program

The Medicaid EHR Incentive program provides incentive payments for EPs of up to \$63,750 over 6 years for adopting, implementing, upgrading, or demonstrating Meaningful Use of certified EHR technology. To date, more than 10,600 EPs have received incentive payments through this program, and incentive payments will be made through 2021. EPs include physicians, dentists, certified nurse midwives, advanced practice nurse prescribers, nurse practitioners, and physician assistants. (Physician assistants must practice at a federally qualified health center or a rural health clinic led by a physician assistant in order to be eligible for incentives.) EPs must also meet at least 30% Medicaid patient volume (20% for pediatricians) to be eligible for incentives.

MetaStar Provides Technical Assistance

MetaStar has been involved in the EHR incentive programs since the inception of the Regional Extension Centers (RECs). In 2010, the Health Information Technology for Economic and Clinical Health Act (HITECH) provided funding for the Office of the National Coordinator for Health Information Technology

to establish 62 RECs. The goal of the REC programs was to support the adoption of EHRs and demonstration of Meaningful Use. In 2010, MetaStar established the federally designated Wisconsin Health Information Technology Extension Center (WHITEC), which helped more than 1400 primary care providers achieve Stage 1 Meaningful Use. The REC program recently concluded.

Many health care organizations and EPs find it challenging to understand Meaningful Use, the Physician Quality Reporting System (PQRS), and staying on top of the rapid change in health care toward payment for performance. MetaStar offers technical assistance through a variety of programs.

In early 2015, MetaStar received grant funding from the Wisconsin Department of Health Services to provide technical assistance to Wisconsin Medicaid-enrolled EPs—including

primary care, specialists, and dentists—through the Health IT Extension Program. The goal of this program is to make sure EPs and the organizations where they work receive the grant-funded technical assistance needed to attest successfully to Meaningful Use. These services can be customized to meet each practice’s particular needs. Once a practice is enrolled in the Health IT Extension Program, some of the most common technical assistance includes:


- Patient Encounter Volume and Medicaid EHR Incentive Program registration assistance.
- Vendor-neutral EHR selection and implementation.
- Quick answers to tough Meaningful Use questions.
- Up-to-the-minute Meaningful Use educa-

tion, including provider-level or clinic-level education.

- Workflow optimization and best practices.
- Audit preparation guidance.
- Public health objective assistance—MetaStar has an expert working at the Wisconsin Immunization Registry to troubleshoot issues.
- Security risk assessment facilitation.

For more information about receiving assistance in this effort, visit www.metastar.com/healthitextension.

MetaStar also offers Meaningful Use consulting, HIPAA Security Risk Assessments, and policy and procedure services on a fee-for-service basis. To learn more about these services, visit <http://www.metastar.com/services/meaningful-use-consulting/>.




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