MeHI
MASSACHUSETTS eHEALTH INSTITUTE
at the MassTech Collaborative

Medicaid EHR Incentive Program

PY2021 Virtual MU Info Session

June 9, 2021

Today's presenters:
Thomas Bennett
Margaret Lellman

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Agenda

- Attestation Timeline and Program Sunset
- PY2021 MU Requirements
  - Objective 1 Protected Health Information (SRA)
  - Objective 3 Clinical Decision Support (CDS)
  - Objective 5 Patient Electronic Access and API
  - Objective 7 Health Information Exchange (HIE)
- Documentation and Post-Audits
- MU Resources and Technical Assistance

Attestation Timelines and Program Sunset

The Program Year 2021 attestation period is scheduled for
June 1, 2021 – August 3, 2021

The deadline to submit PY2021 applications is
August 3, 2021

To allow time to process applications and ensure that all incentives are **paid** by December 31, 2021, the PY2021 deadline needs to be well before the end of 2021

To prepare for Program Sunset at the end of 2021:

- adjustments were made to the deadlines for both PY2020 and PY2021
- MAPIR was updated to allow more than one active application to be open simultaneously (only applies to PY2020 and PY2021 apps)
    - In order to have two applications open simultaneously, an EP must have at least two payment years left

PY2021 MU Requirements

Protected Health Information Security Risk Analysis (SRA)

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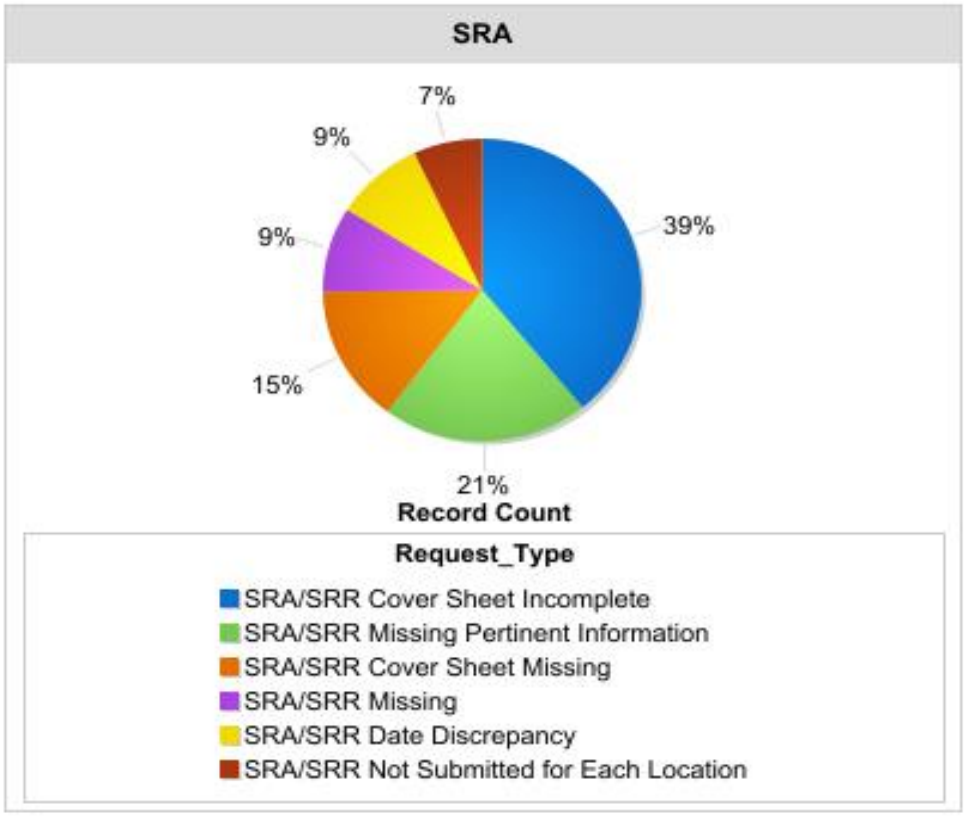
Common Issues –
Security Risk Analysis (SRA)

Common reasons for apps cycling
(PY2020 MU applications)



- SRA/SRR Cover Sheet missing/incomplete
- SRA/SRR missing required information
- SRA not provided for all locations
- Completing SRA after August 3rd deadline

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PY2021 MU Requirements –
Security Risk Analysis (SRA)

Security Risk Analysis (SRA)

Measure

Conduct or review security risk analysis (SRA/SRR), including:

- Address encryption and other technical, administrative, and physical safeguards
- Identify potential risks and vulnerabilities, and include in risk management process
- Correct identified security deficiencies and implement updates as necessary

- Conduct SRA within the calendar year of the EHR reporting period (Jan 1, 2021 – Dec 31, 2021)

- EPs can complete an SRA/SRR after the deadline or date of attestation, but must pledge to upload a completed SRA/SRR by December 31, 2021. Designees will be required to attest as such in MAPIR (see next slide).

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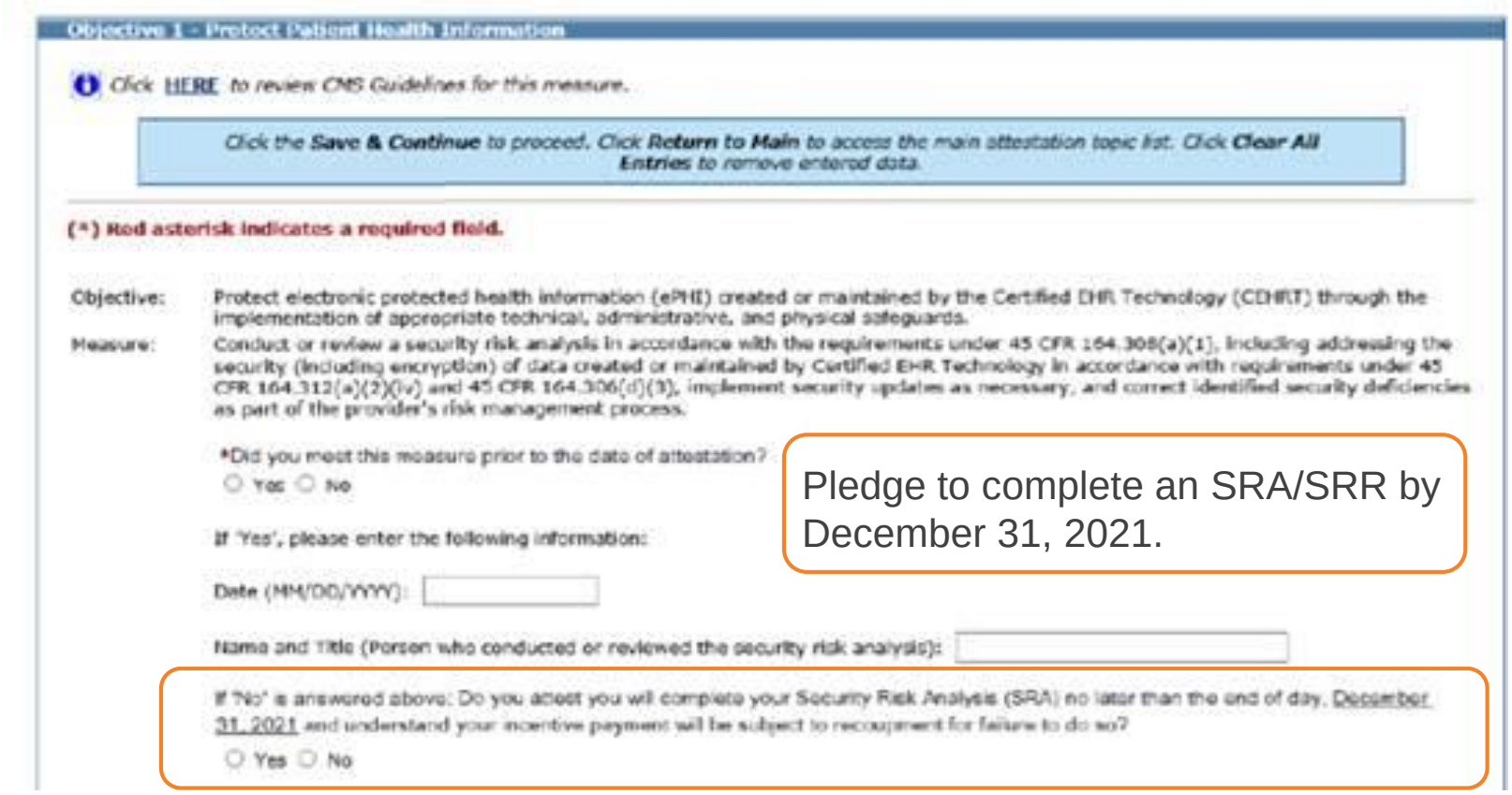
PY2021 MU Requirements –
Security Risk Analysis (SRA)

Security Risk Analysis (SRA)

- EPs will be able to complete an SRA/SRR after the date of attestation but must pledge in MAPIR to complete it by the end of calendar year 2021. EPS are strongly encouraged to conduct the analysis or review by the time of attestation or by August 3.



PY2021 MU Requirements –
Security Risk Analysis (SRA)

Security Risk Analysis Supporting Documentation

- Security Risk Analysis/Review Cover Sheet
  - Initialed next to all the applicable responses
  - Signed by the authorized official

- Security Risk Analysis (SRA)
  - Date analysis/review was conducted
  - All locations/practices EP worked during the selected EHR reporting period
  - Name and Title of the person who performed the analysis /review
  - Signature of the authorized person
  - Required safeguards and mitigation plan

Protect electronic protected health information (ePHI) created or maintained by the Certified EHR Technology through the implementation of appropriate technical capabilities.	Measure = **Yes** Date = **02/13/2019** Name and Title = **Bhawna Sehgal, PEVA**

1) To meet my Meaningful Use objectives, I am:

_____ Submitting an SRA for the first time

-or-

_____ Submitting an SRR or update to a previously submitted SRA

PY2021 MU Requirements

Clinical Decision Support (CDS)

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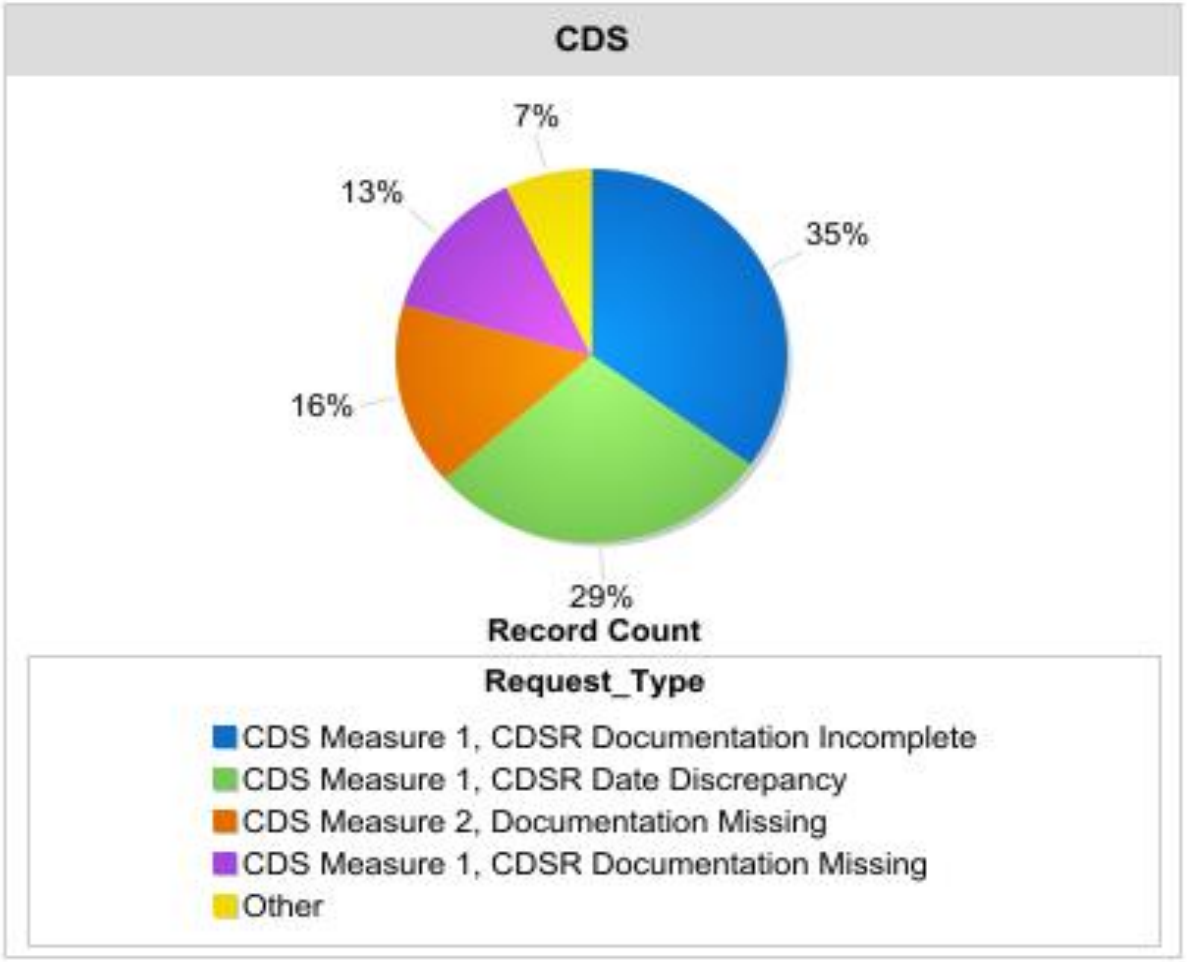
Common Issues –
Clinical Decision Support (CDS)

Common reasons for apps cycling
(PY2020 MU applications)



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PY2021 MU Requirements –
Clinical Decision Support (CDS)

- CDS defined too narrowly
  - Not just alerts
  - Not just for physicians
- CEHRT does not have relevant CDS interventions implemented
- Alert fatigue; alerts ignored and not recorded
- CDS do not relate to reported CQMs
- Obtaining proper supporting documentation
  - Locating screenshots of 5 CDS interventions; CEHRT functionality
  - Screenshots missing profile info and/or CDS enabled date
  - Audit logs/reports tracking CDS intervention history unavailable
  - EHR vendor engagement and support

PY2021 MU Requirements –
Clinical Decision Support (CDS)

Use clinical decision support (CDS) to improve performance on high-priority health conditions

Measures

1. Implement 5 CDS interventions related to 4 or more CQMs for the entire EHR reporting period
2. Enable and implement drug-drug & drug-allergy interaction checks for the entire EHR reporting period

Exclusion for Measure 2

Any EP who writes fewer than 100 medication orders during EHR reporting period

MU Supporting Documentation:
Clinical Decision Support (CDS)

Measure 1

- Screenshots of 5 CDS interventions dated within EHR reporting period and identifying both EP and organization
- Documentation showing that CDS interventions were enabled for the **entire EHR reporting period**
  - If screenshots don't display enabled dates, submit either
    - CEHRT audit logs with enabled dates, or
    - vendor letter confirming enabled dates and that EPs are unable to deactivate interventions
- Documentation showing interventions tie to 4 or more CQMs related to the scope of practice, **OR** a letter from EP's Supervisor or Medical Director explaining CDS's relationship to patient population and high priority conditions

* *For global CDS implementations, you must also submit:*

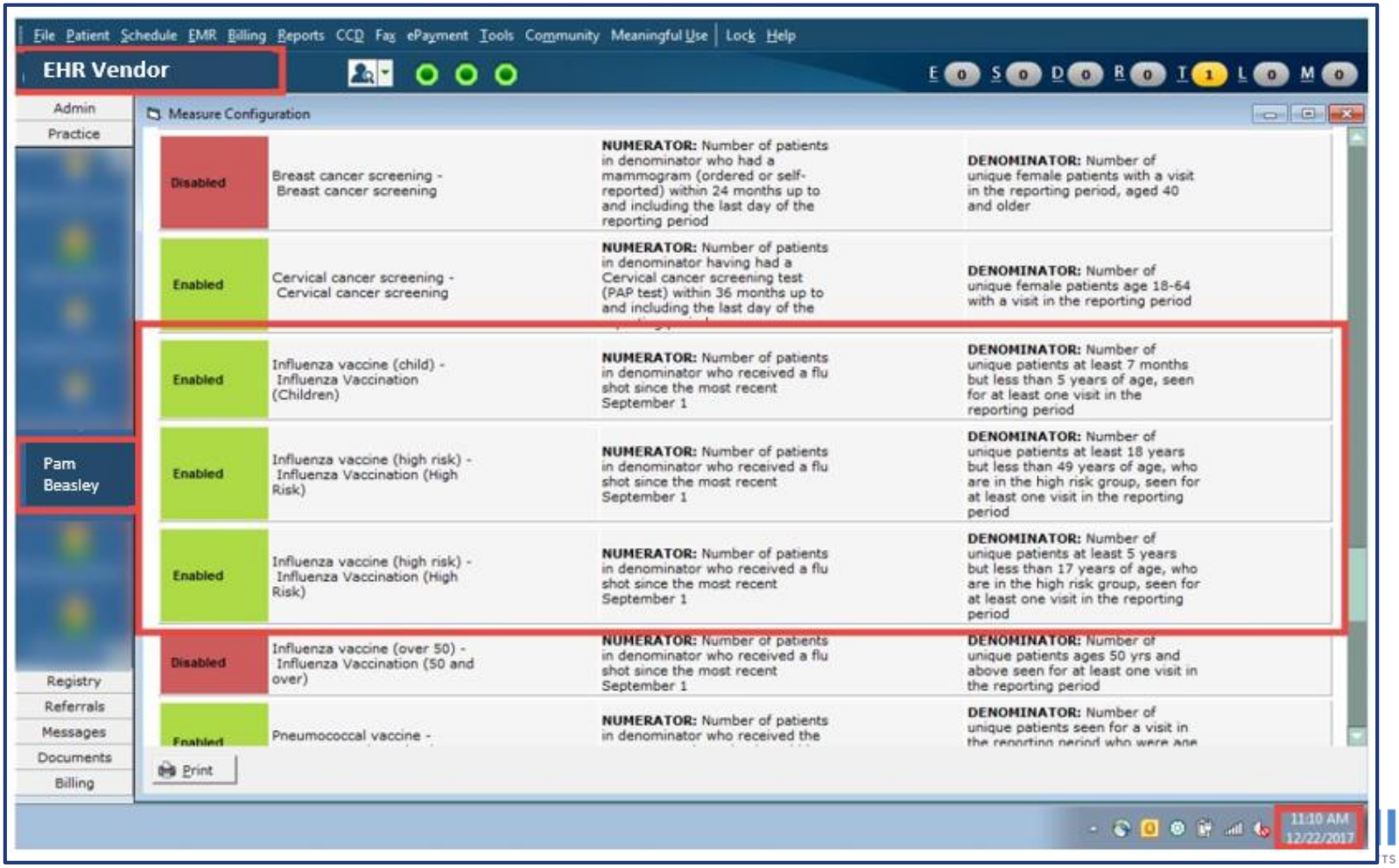
- *Screenshot with practice name and enabled date*
- *Global CDS Letter on letterhead and signed by Medical Director confirming relevance and including a list of all EPs using the CDS*

Measure 2

- Documentation from CEHRT identifying both EP & organization showing drug-drug and drug-allergy interaction checks were enabled for the entire reporting period

Supporting Documentation Example:
Clinical Decision Support (CDS)

Screenshot of CDS alerts enabled in CEHRT with vendor name, EP name and enabled dates



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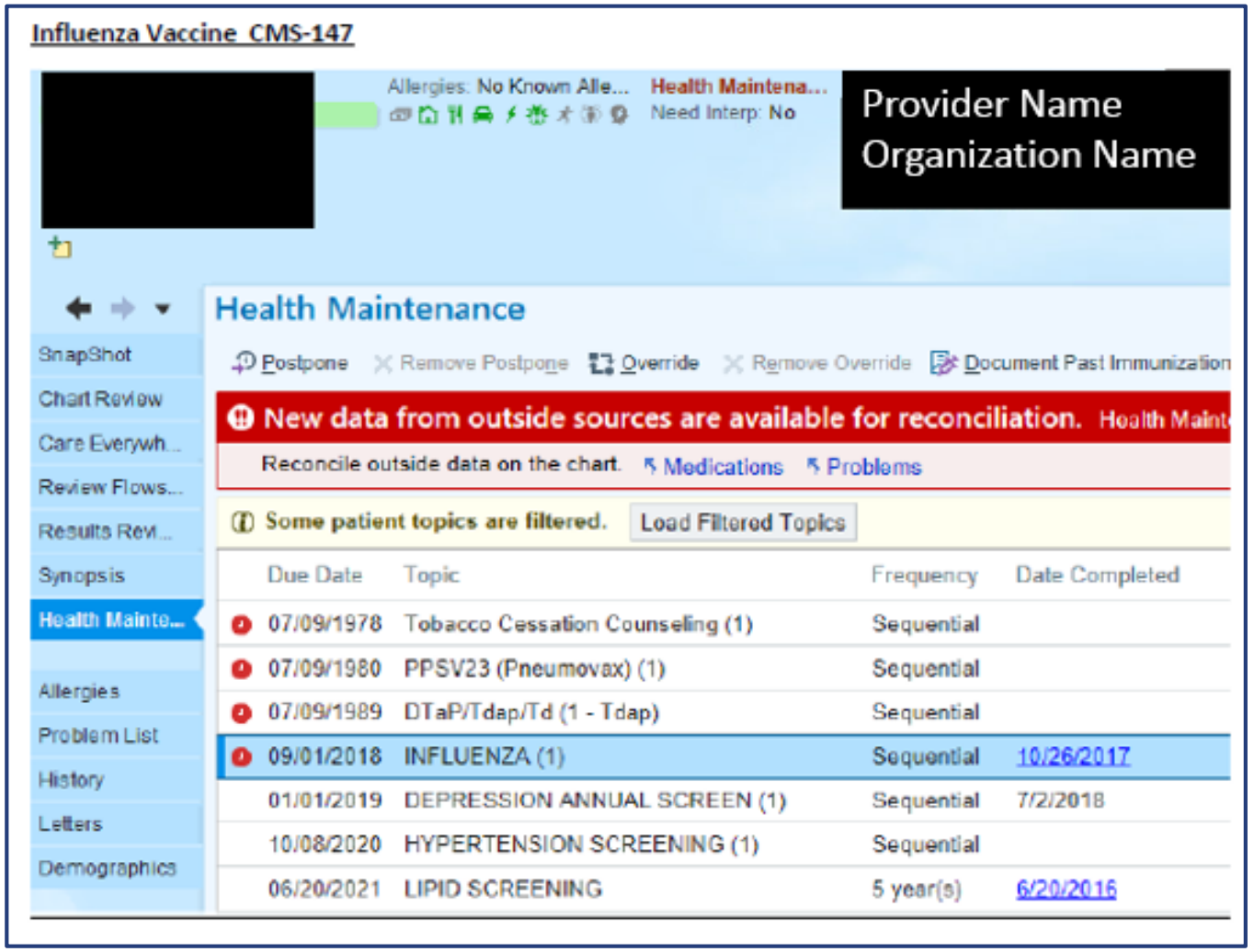
Supporting Documentation Example:
Clinical Decision Support (CDS)

EHR-generated screenshot of CDS interventions identifying the EP, organization and enable dates



Supporting Documentation Example:
Clinical Decision Support (CDS)

MU Dashboard displays EP's name, organization, reporting period, and CDS enabled dates with CQMs

James Bond, MD **Reporting period: 10/03/2017 - 12/31/2017**

National Provider Identifier (NPI)
0000000000

Taxpayer Identification Number (TIN)
0000000000

Business Address (Business Listing ONLY)
100 North Drive
Westborough, MA 01581

Business Email
bond@masstech.org

Measure		Status
Clinical decision support rule ⓘ	a. Clinical decision support rule	Satisfied : EHR vendor enabled clinical decision support interventions related to the clinical quality measures listed below for the entire reporting period.
	b. Implement drug/drug and drug/allergy interaction checks	Satisfied : EHR vendor enabled required functionality during reporting period.

Clinical Quality Measure	Enrollment Date
Controlling High Blood Pressure	12/19/2016
Pneumonia Vaccination Status for Older Adults	12/19/2016
Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up	12/19/2016
Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention	12/19/2016
Use of Imaging Studies for Low Back Pain	12/19/2016

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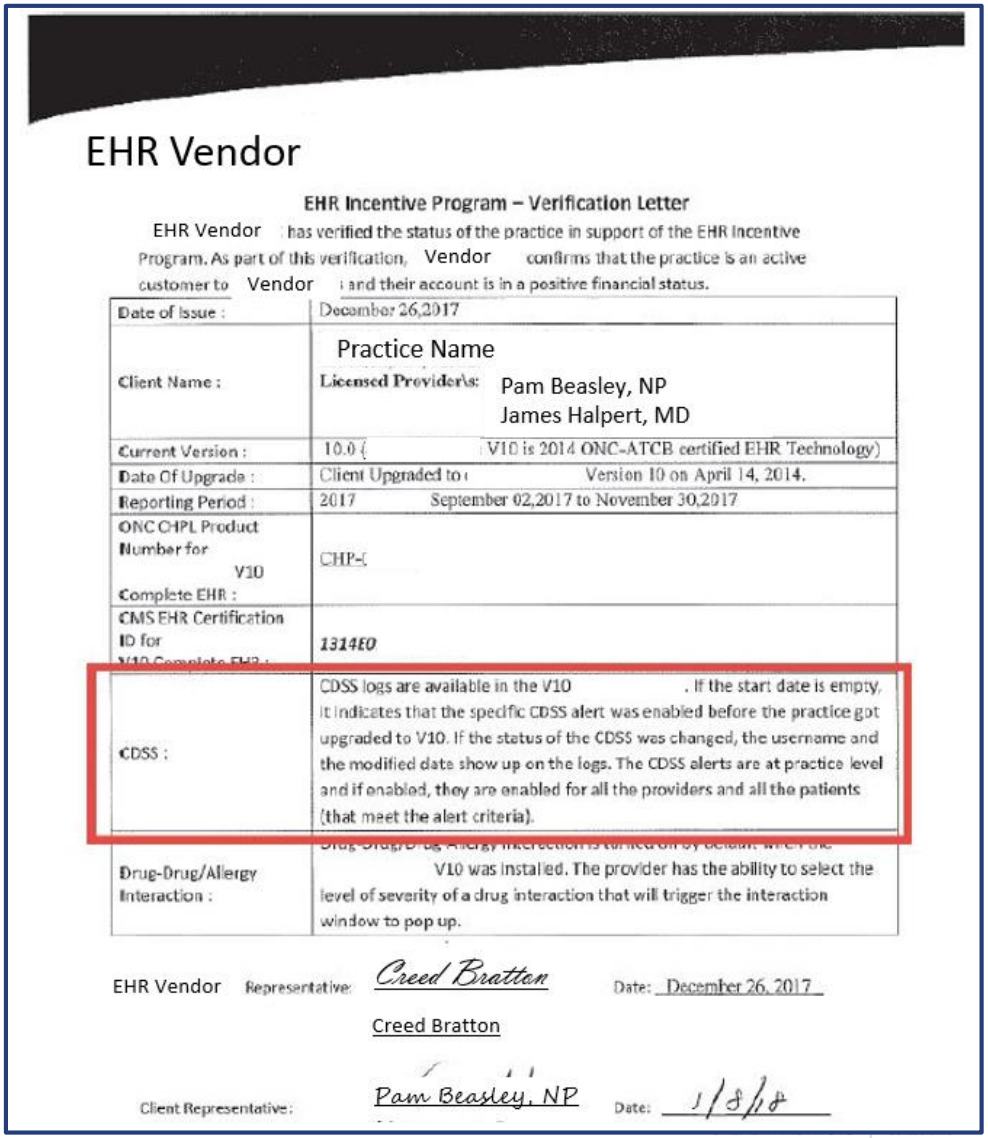
Supporting Documentation Example:
Clinical Decision Support (CDS)

EHR Vendor Letter confirming CDS enabled dates and that EPs cannot deactivate alerts



EHR Vendor

EHR Incentive Program – Verification Letter

EHR Vendor has verified the status of the practice in support of the EHR Incentive Program. As part of this verification, Vendor confirms that the practice is an active customer to Vendor and their account is in a positive financial status.

Date of Issue :	December 26,2017
Client Name :	Practice Name Licensed Provider\s: Pam Beasley, NP James Halpert, MD
Current Version :	10.0 (V10 is 2014 ONC-ATCB certified EHR Technology)
Date Of Upgrade :	Client Upgraded to Version 10 on April 14, 2014.
Reporting Period :	2017 September 02,2017 to November 30,2017
ONC CHPL Product Number for V10 Complete EHR :	CHP-
CMS EHR Certification ID for V10 Complete EHR :	*1314E0*
CDSS :	CDSS logs are available in the V10 . If the start date is empty, it indicates that the specific CDSS alert was enabled before the practice got upgraded to V10. If the status of the CDSS was changed, the username and the modified date show up on the logs. The CDSS alerts are at practice level and if enabled, they are enabled for all the providers and all the patients (that meet the alert criteria).
Drug-Drug/Allergy Interaction :	Drug-Drug/Drug-Allergy interaction is turned on by default when the V10 was installed. The provider has the ability to select the level of severity of a drug interaction that will trigger the interaction window to pop up.

EHR Vendor Representative: *Creed Bratton* Date: December 26, 2017

Creed Bratton

Client Representative: *Pam Beasley, NP* Date: *1/8/18*

PY2021 MU Requirements

Patient Electronic Access and API

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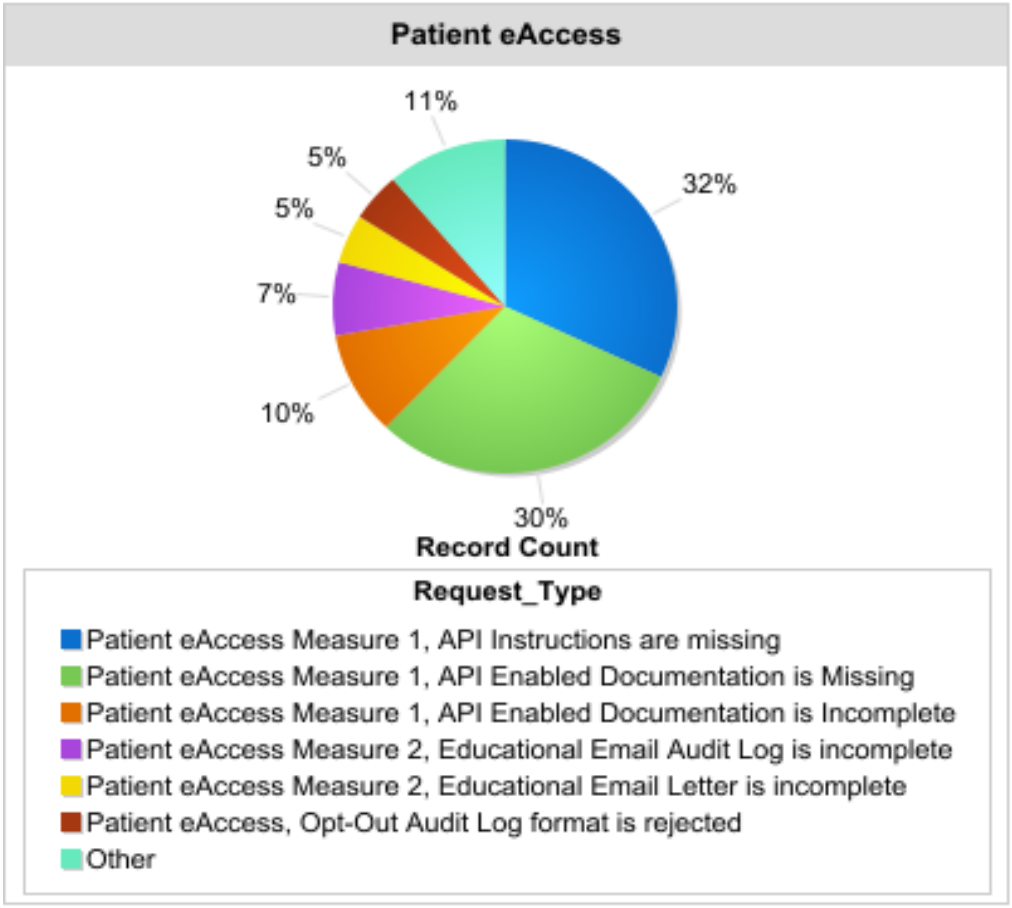
Common Issues –
Patient Electronic Access and API

Common reasons for apps cycling
(PY2020 MU applications)



- Dashboard tracking both portal and API access
- Calculating Opt Out patients
- Email education resources
- Vendor engagement and support
- Obtaining proper supporting documentation
  - Two parts to API Instructions to patients
  - API and Opt Out logs

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PY2021 MU Requirements –
Patient Electronic Access and API

Provide patients with timely electronic access to their health information and patient-specific education

Measure 1* For **more than 80%** of patients:

1) the patient is provided timely access to view, download, and transmit (VDT) their health info; and
2) the patient's health info is available for the patient to access using any app of their choice configured to meet the technical specs of the Application Programming Interface (API) in the provider's CEHRT

Measure 2* For **more than 35%** of patients, EP must use clinically relevant information from CEHRT to identify patient-specific educational resources and provide electronic access to those materials

* When patients decline to participate in electronic access to their health information and/or education, the EP can use **Opt Out** to count those patients in order to meet the thresholds for both Measure 1 and Measure 2.

PY2021 MU Requirements – Patient Electronic Access and API

Three Options to Meet the API Requirements

(1) API was enabled before the start of the MU Reporting Period

(2) API was enabled during the MU Reporting Period, the MU Dashboard tracked API access

(3) API was enabled during the MU Reporting Period but the MU Dashboard **did not** track API access

- Only patients who received both VDT and API access can be included in the numerator. For this option, you need to manually calculate your numerator and submit an API Access Audit log of patients who were given both types of access.

For more information, see our API Guide
(the guidelines are the same for PY2020 and PY2021)

NOTE: As always, if you fail to meet the requirements of the MU objectives, you can try using a different MU Reporting Period, but keep in mind that this may change which option you'll need to use for Objective 5 Measure 1, and therefore the supporting documentation required.

MU Supporting Documentation – Patient Electronic Access and API

Measure 1: Access to View, Download and Transmit (VDT) and API Access*

- An EHR-generated MU dashboard or report for the selected MU reporting period that shows the EP's name, numerator, denominator and percentage for this measure.
- Documentation that shows an API was **enabled** prior to or during the MU reporting period.
- A copy of the instructions provided to patients with
    a) how to authenticate their access through an API and
    b) information on available applications that leverage API

Measure 2: Electronic Access to Patient Specific Education

- EHR-generated MU Dashboard or report

* If the EP used the **Opt Out** method to meet the measure threshold(s), additional supporting documentation is required to show how the EP added **Opt Out** patients to the numerator(s). Speak with a TA on using **Opt Out**.

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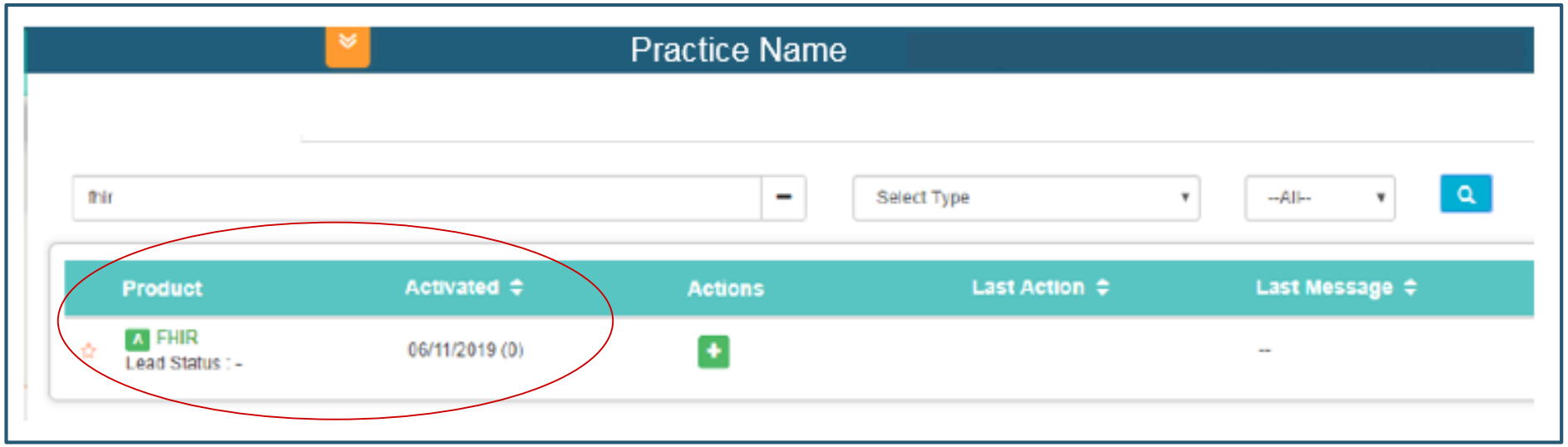
MU Supporting Documentation –
Patient Electronic Access and API

Screen shot of audit log displaying API enabled date



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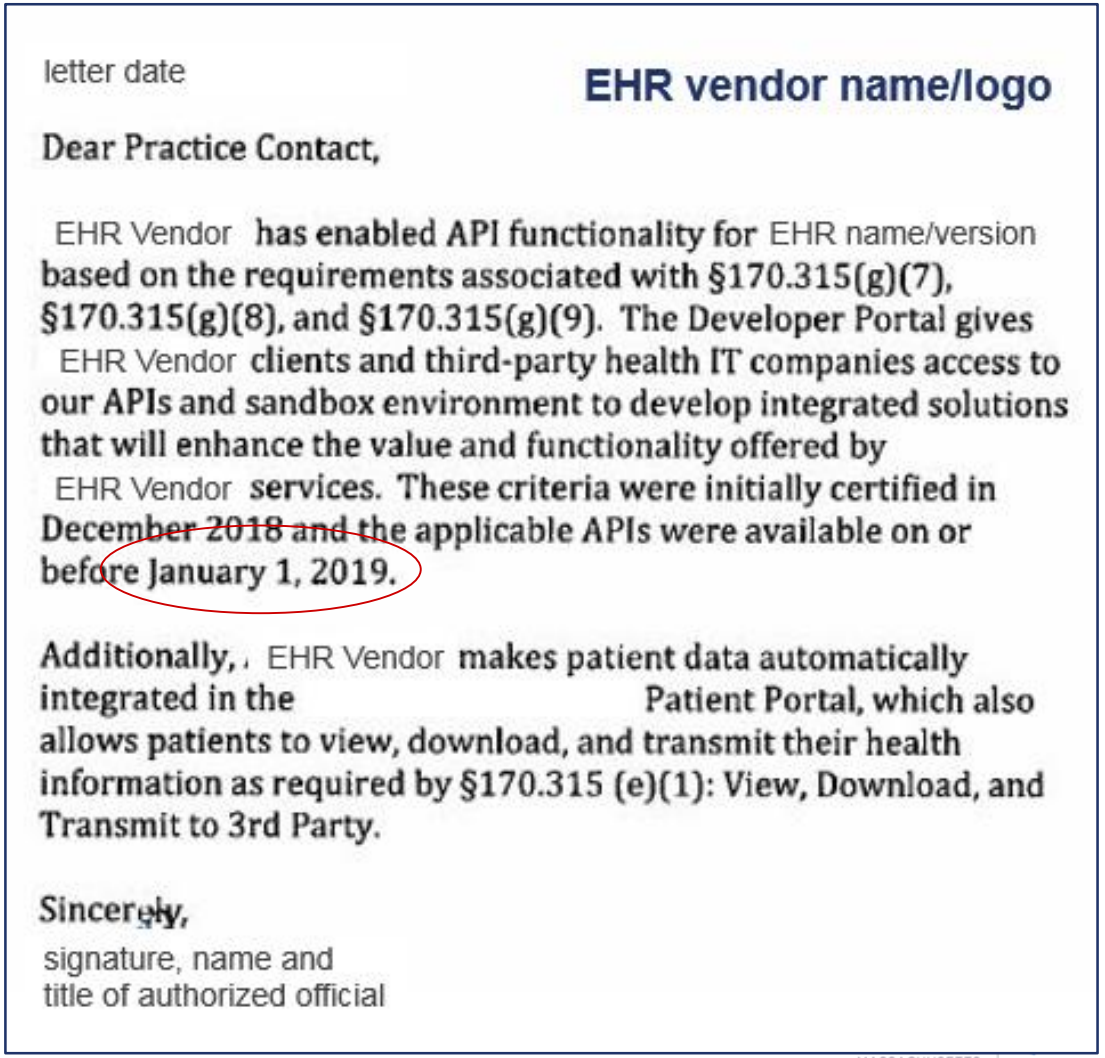
MU Supporting Documentation –
Patient Electronic Access and API

Letter from EHR vendor verifying API enabled date



letter date

EHR vendor name/logo

Dear Practice Contact,

EHR Vendor **has enabled API functionality for** EHR name/version **based on the requirements associated with §170.315(g)(7), §170.315(g)(8), and §170.315(g)(9). The Developer Portal gives** EHR Vendor **clients and third-party health IT companies access to our APIs and sandbox environment to develop integrated solutions that will enhance the value and functionality offered by** EHR Vendor **services. These criteria were initially certified in December 2018 and the applicable APIs were available on or before January 1, 2019.**

Additionally, EHR Vendor **makes patient data automatically integrated in the Patient Portal, which also allows patients to view, download, and transmit their health information as required by §170.315 (e)(1): View, Download, and Transmit to 3rd Party.**

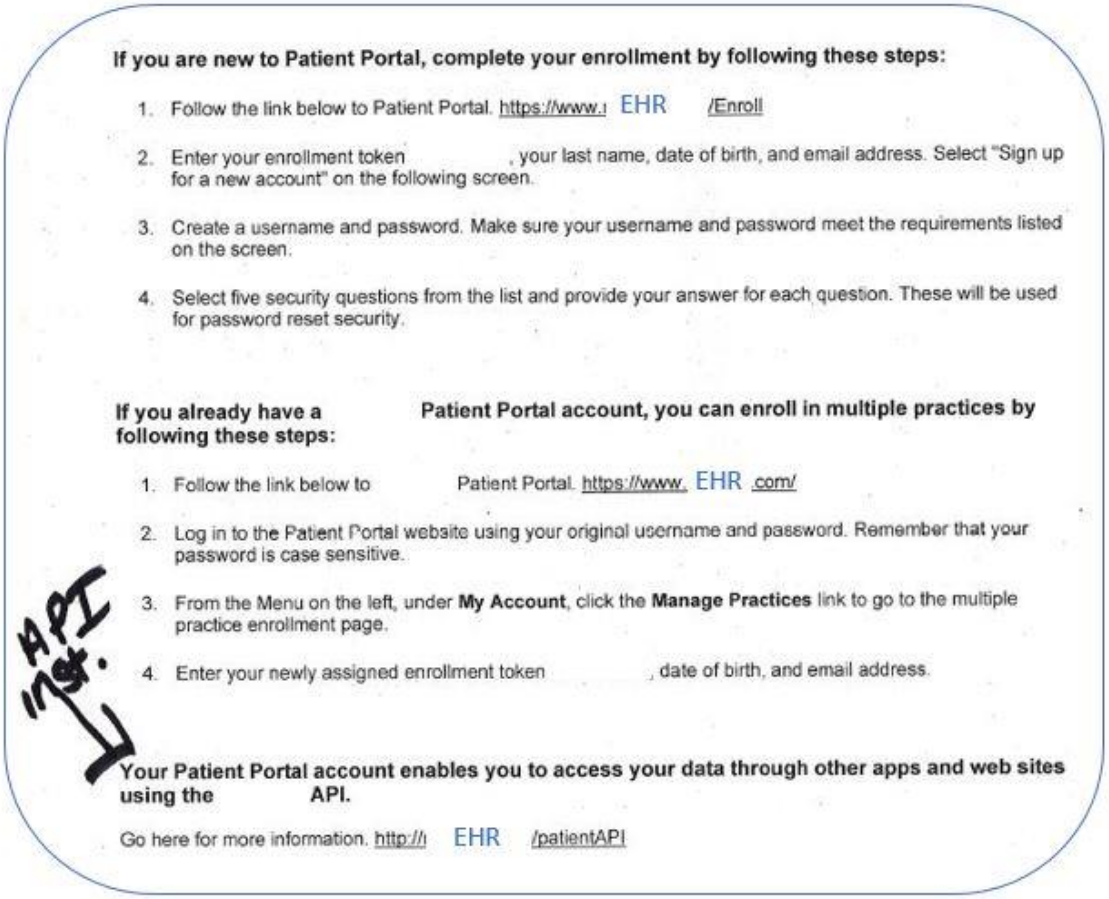
Sincerely,

signature, name and
title of authorized official

MU Supporting Documentation –
Patient Electronic Access and API

API Instructions provided to patients including

- how to authenticate their app
- list of or Information on available apps



If you are new to Patient Portal, complete your enrollment by following these steps:

1. Follow the link below to Patient Portal. https://www.EHR /Enroll
2. Enter your enrollment token , your last name, date of birth, and email address. Select "Sign up for a new account" on the following screen.
3. Create a username and password. Make sure your username and password meet the requirements listed on the screen.
4. Select five security questions from the list and provide your answer for each question. These will be used for password reset security.

If you already have a Patient Portal account, you can enroll in multiple practices by following these steps:

1. Follow the link below to Patient Portal. https://www.EHR.com/
2. Log in to the Patient Portal website using your original username and password. Remember that your password is case sensitive.
3. From the Menu on the left, under **My Account**, click the **Manage Practices** link to go to the multiple practice enrollment page.
4. Enter your newly assigned enrollment token , date of birth, and email address.

API Inst.

Your Patient Portal account enables you to access your data through other apps and web sites using the API.

Go here for more information. http://EHR /patientAPI

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MU Supporting Documentation –
Patient Electronic Access and API

Central Massachusetts Internal Medicine
100 North Drive
Westborough, MA 01581

Date

To Whom It May Concern:

Letter confirming the Opt Out patients were provided all necessary information to access their information, obtain access through a patient-authorized representative, or other wise opt back in without further follow-up action required by the provider.

The letter must include a description of how a patient's Opt Out action was recorded (for example a form, or other method). The letter must be signed by an authorized official at the location where the Opt Outs occurred (EP, Designee, Clinical or Medical Director).

Sincerely,
Name

NAME
Medical Director

Sample Letter and audit log for Opt Out patients (Measure 1)

Patient ID	Patient DOB	Service Date	Provider	Reason for Opt Out
1111111	1/1/2000	1/1/2020	Clark Kent, MD	Declined patient portal
2222222	1/10/2009	1/10/2020	Clark Kent, MD	No internet access
3333333	1/12/2002	1/12/2020	Clark Kent, MD	Declined patient portal
4444444	1/8/1996	1/14/2020	Clark Kent, MD	Declined patient portal
5555555	3/15/2001	1/14/2020	Clark Kent, MD	Declined patient portal

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MU Supporting Documentation –
Patient Electronic Access and API

Central Massachusetts Internal Medicine
100 North Drive
Westborough, MA 01581

Date

To Whom It May Concern:

Letter confirming patients were emailed patient-specific educational resources.

The letter must be signed by an authorized official at the location from which the educational emails were sent (EP, Designee, Clinical or Medical Director).

Sincerely,
Name

NAME
Medical Director

Patient ID	Patient DOB	Service Date	Provider	Date education was provided
2111111	1/2/2000	1/1/2020	Clark Kent, MD	1/2/2020
3222222	1/12/2009	1/12/2020	Clark Kent, MD	1/15/2020
4333333	1/14/2002	1/12/2020	Clark Kent, MD	1/13/2020
5444444	1/6/1996	1/14/2020	Clark Kent, MD	1/20/2020
6555555	3/20/2001	1/14/2020	Clark Kent, MD	1/25/2020

Sample Educational Email letter and Educational Email log (Measure 2)

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PY2021 MU Requirements

Health Information Exchange (HIE)

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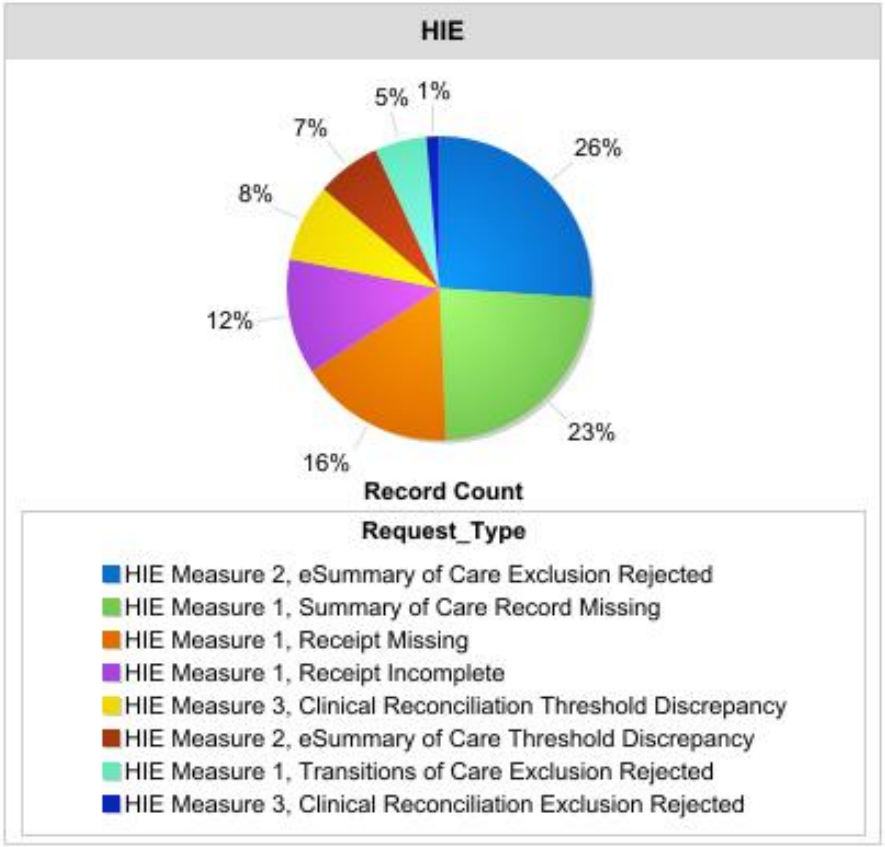
Common Issues –
Health Information Exchange

Common reasons for apps cycling (PY2020 MU applications)



- Summary of Care (SOC) record sent electronically
- Query HIE Functionality not enabled vs. not available
- Meeting two of three measures
- Claiming exclusions to satisfy the objective
- Obtaining proper supporting documentation
  - Confirmation of receipt
  - SOC: Minimum problem list, medications and allergies

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PY2021 MU Requirements – Health Information Exchange

Measure 1

For **more than 50%** of transitions and referrals, the referring EP:

1. Uses CEHRT to create a Summary of Care record
2. Electronically exchanges the summary of care record

Measure 2

For **more than 40%** of transitions and referrals received and encounters where the EP has never before seen the patient, EP incorporates an electronic Summary of Care record in patient's EHR

- A record cannot be considered incorporated if it is discarded without the reconciliation of clinical information, or if it is stored in a manner not accessible for EP use within the EHR

Measure 3

For **more than 80%** of transitions received and encounters where the EP has never before seen the patient, EP performs a clinical information reconciliation for the following three clinical information sets:

1. Medication
2. Medication allergy
3. Current problem list

PY2021 MU Requirements – Health Information Exchange

MEDICAID PROMOTING INTEROPERABILITY PROGRAM
ELIGIBLE PROFESSIONALS OBJECTIVES AND MEASURE FOR 2019
OBJECTIVE 7 of 8

Health Information Exchange	
Objective	The eligible professional (EP) provides a summary of care record when transitioning or referring their patient to another setting of care, receives or retrieves a summary of care record upon the receipt of a transition or referral or upon the first patient encounter with a new patient, and incorporates summary of care information from other providers into their electronic health record (EHR) using the functions of certified EHR technology (CEHRT).
Measures	An EP must attest to all three measures and meet the threshold for two measures for this objective. If the EP meets the criteria for exclusion from two measures, they must meet the threshold for the one remaining measure. If they meet the criteria for exclusion from all three measures, they may be excluded from meeting this objective.
	Measure 1: For more than 50 percent of transitions of care and referrals, the EP that transitions or refers their patient to another setting of care or provider of care: (1) Creates a summary of care record using CEHRT; and (2) Electronically exchanges the summary of care record
	Measure 2: For more than 40 percent of transitions or referrals received and patient encounters in which the EP has never before encountered the patient, he/she incorporates into the patient's EHR an electronic summary of care document.
	Measure 3: For more than 80 percent of transitions or referrals received and patient encounters in which the EP has never before encountered the patient, he/she performs a clinical information reconciliation. The EP must implement clinical information reconciliation for the following three clinical information sets: (1) Medication. Review of the patient's medication, including the name, dosage, frequency, and route of each medication. (2) Medication allergy. Review of the patient's known medication allergies.

The CMS specification sheet was updated in August 2019 to provide clarification about EPs who claim exclusions for 2 of the measures:

- An EP must attest to all three measures and meet the threshold for two measures for this objective.
- If the EP meets the criteria for exclusion from two measures, they must meet the threshold for the one remaining measure.
- Taking an exclusion for any given measure does **not** count toward meeting the objective.
- If they meet the criteria for exclusion from all three measures, they may be excluded from meeting this objective.

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PY2021 MU Requirements –
Health Information Exchange

Sample MU Dashboard for Objective 7

Objective 7

Measure Name		Status	Threshold	Score	Count
Send Summaries of Care	Exclusion Available: Minimum denominator	—	>50%	18.2%	2 / 11 Referrals
Incorporate Summaries of Care		✓	>40%	97.4%	110 / 113 Encounters
Clinical Information Reconciliation		✗	>80%	47.9%	68 / 142 Encounters

MU Supporting Documentation – Health Information Exchange

Measure 1: Referrals and transitions of care electronically exchanged

- EHR-generated MU Dashboard or report
- Copy of one unique Summary of Care Record created by the EP
- Confirmation of receipt or proof that the receiving provider made a query of the same Summary of Care Record

Measure 2: Electronic summary of care records received and incorporated

- EHR-generated MU Dashboard or report

Measure 3: Clinical information reconciliation

- EHR-generated MU Dashboard or report covering clinical reconciliation of medication, medication allergies and current problem list

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MU Supporting Documentation –
Health Information Exchange

Summary of Care record for Patient 101 includes Problems, Allergies and Medications

[redacted] (id #101[redacted], dob: [redacted])

Reason for Referral

ENT Referral

Problems

Name	Status	Onset Date	Source
[redacted]	Active	[redacted]	

Allergies

Code	Code System	Name	Reaction	Severity	Onset
NKDA					

Current Medications

Name	Start Date
acetaminophen 160 mg/5 mL (5 mL) oral suspension Take 5 mL every 4-6 hours by oral route.	

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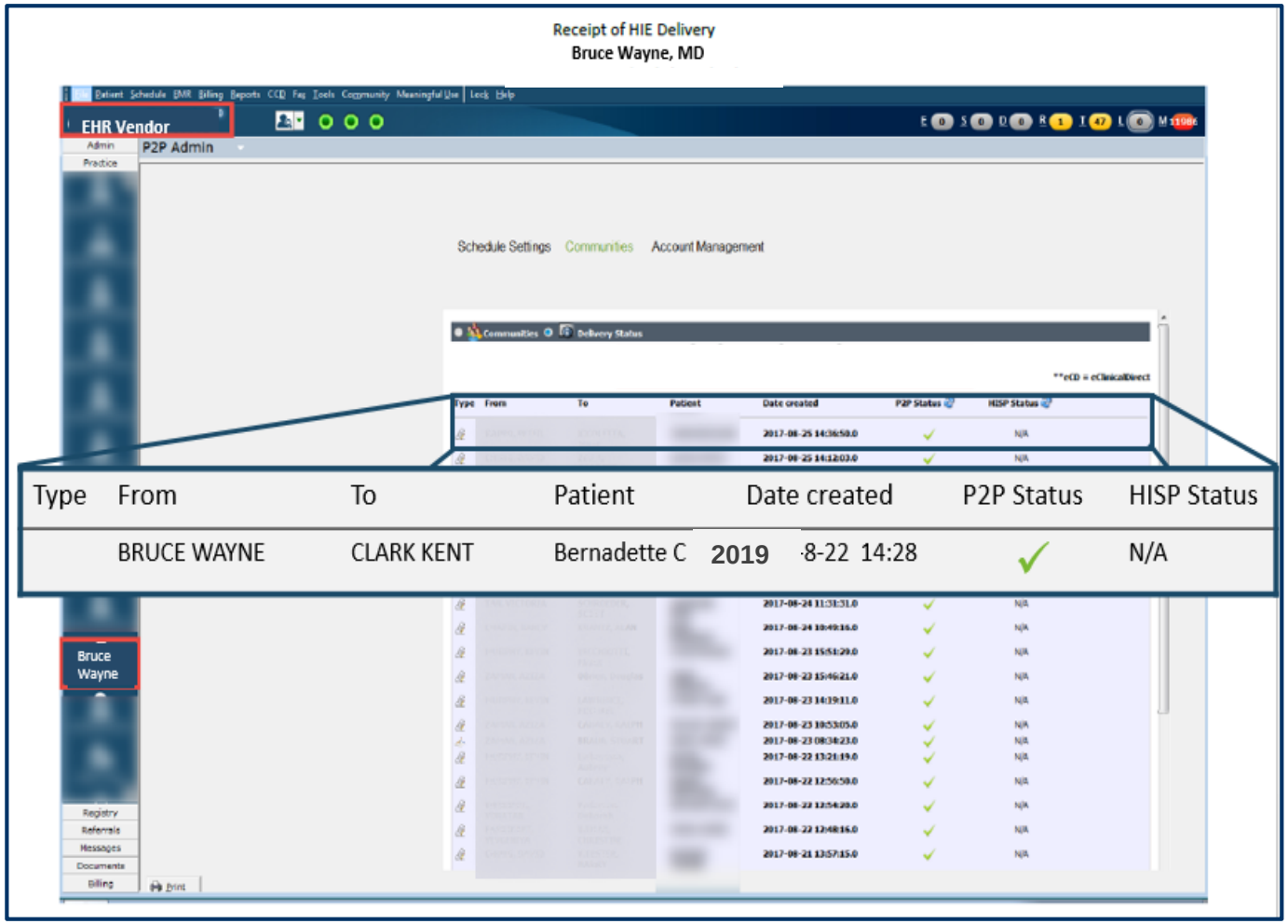
MU Supporting Documentation –
Health Information Exchange

Log showing electronic P2P status (provider to provider) – part 1 of 2



*Note: This is a fictional patient record

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MU Supporting Documentation –
Health Information Exchange

EYE AND EAR SPECIALISTS
CLARK KENT, MD
100 NORTH DRIVE
WESTBOROUGH, MA 01581

10/3/2019

RE: PATIENT ID #101[redacted], Bernadette C., DOB: 1/1/2016

Dr. Bruce Wayne
20 West Street
Hudson, MA 01749

Dear Dr. Bruce Wayne,

Your patient, Bernadette C. was seen today for evaluation of her right ear that has been draining on and off with an odor for the past two weeks. She had tubes placed in 15 months ago.

Upon examination the right tube is in place. The left tube has extruded. Perforation is present in the central portion of the left drum. She said she has been using Cipro Drops. I switched her to TobraDex drops today and I will see her back in two weeks for follow.

Thank you for referring your patient, Bernadette, to our office for evaluation.

Clark Kent, MD

Clark Kent, MD (Electronically signed by Clark Kent, MD)

EYE AND EAR SPECIALISTS (ID #101[redacted]) Bernadette C. DOB: 1/1/2016

Consult note demonstrating Confirmation of Receipt – part 2 of 2

*Note: This is a fictional patient record

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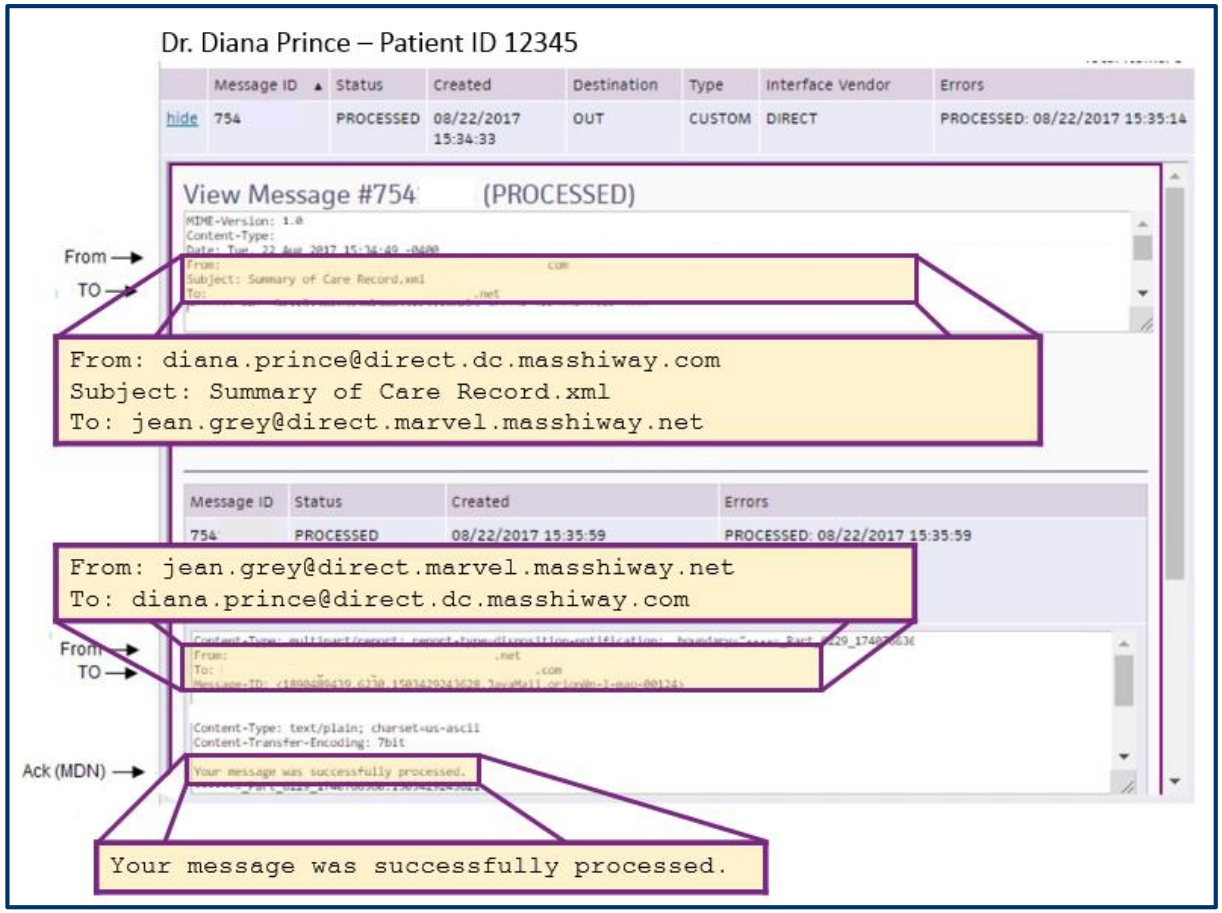
MU Supporting Documentation –
Health Information Exchange

Confirmation of Receipt Log confirming SOC for “Patient 12345” was both electronically sent and received



*Note: This is a fictional record

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Documentation and Post Audits

- To prepare for attestations, application validation and potential post-payment audits, it is essential to maintain documentation on how you adhered to the regulations and qualified for incentives.

- Some attesting EPs and organizations have already received requests for information from **Meyers and Stauffer**, the firm conducting post audits for earlier program years.

- All EHR Incentive Program-related records and documentation should be maintained for **at least 6 years**. Examples include:

  - Patient Volume Threshold (PVT) reporting used to demonstrate eligibility,
  - EHR generated dashboard reports,
  - Completed Security Risk Analyses (SRA) and mitigation plans, and
  - All other MU supporting documentation

Helpful MU Resources

- MU Toolkit For Eligible Professionals
- MU Supporting Documentation Guide For PY2021
- API Attestation Guide PY2020 and PY2021
- CMS Stage 3 Spec Sheets for PY2020 and PY2021
- Guidelines for Including Telehealth in PVT and MU
- MIIS Provider Score Card Mini Guide

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Contact Us

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