Stage 3 and ACI's Relationship to Medicaid MU
Massachusetts Medicaid EHR Incentive Program

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Today's presenters:
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- Stage 3 Meaningful Use (MU)
  - What's different for PYs 2017 and 2018

- Advancing Care Information (ACI)
  - ACI and the Merit-Based Incentive Payment System (MIPS)
  - ACI and Alternative Payment Models (APMs)
  - Differences between MIPS and MU
  - 2017 ACI Measures
  - Reporting MIPS and ACI

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Changes to Objectives:

- CPOE: labs and imaging both increase from >30% to more than 60%

- eRx: increases from >50% to more than 60%

- HIE: increases from >10% to more than 50% transition of care referrals
  - \>40% of new encounters must have summary of care incorporated in EHR
  - Medication reconciliation for transitions or referrals increases from >50% to >80%

- Patient eAccess: timely access increases from >50% to more than 80%
  - PHI available using any application of patient choice – Application Programming Interface (API)
  - Patient education increases from >5% to more than 35%

- Coordination of Care Through Patient Engagement

  - More than 5% of patients view, download or transmit to a third party, or patient access through API, or combination of both

  - For more than 5% of patients, a secure message was sent to the patient, or in response to a secure message sent by the patient or their authorized representative

  - More than 5% patient-generated health data comes from a non-clinical source

    – e.g. data from social service, home health monitoring, medical device, or fitness monitor

- Public Health and Clinical Data Registry Reporting
  - EPs must attest to at least two of five measures:
    - **Immunization Registry Reporting** - active engagement with a public health agency to submit immunization data and receive immunization forecasts/histories
    - **Syndromic Surveillance Reporting** - active engagement with a public health agency to submit syndromic surveillance data from an urgent care setting
    - **Electronic Case Reporting (new for Stage 3)** - active engagement with a public health agency to submit case reporting of reportable conditions
    - **Public Health Registry Reporting (new for Stage 3)** - active engagement with a public health agency to submit data to public health registries (same as Stage 2 Specialty Registry measure)
    - **Clinical Data Registry Reporting (new for Stage 3)** - active engagement to submit data to a clinical data registry

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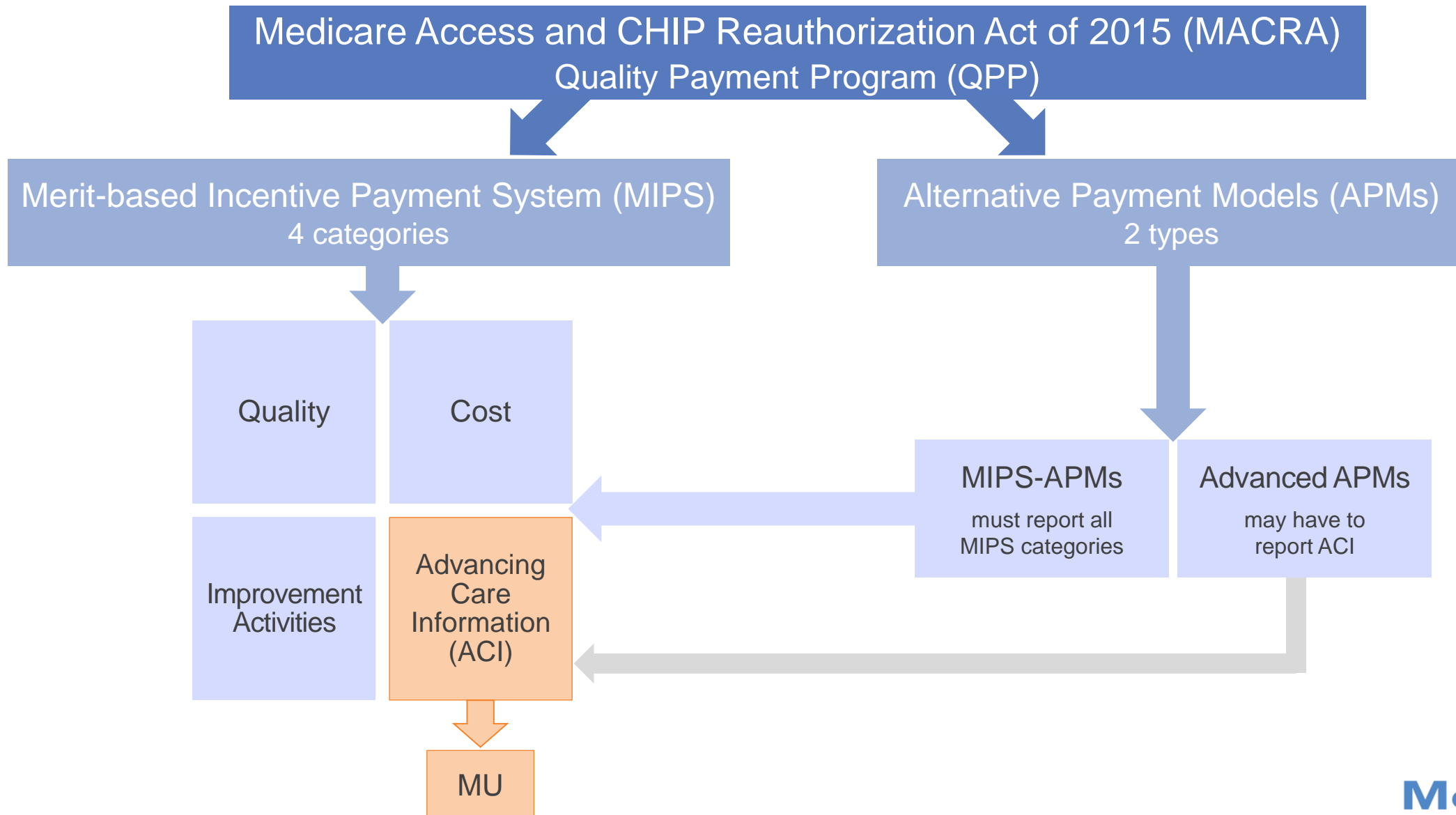
Advancing Care Information (ACI)

- One of four MIPS performance categories

  - Optional reporting for MIPS begins in 2017

- Promotes patient engagement and the electronic exchange of information using Certified EHR Technology (CEHRT)

- Replaces the Medicare EHR Incentive Payment Program

- Accounts for 25% of total MIPS scoring

Quality	Improvement Activities	Advancing Care Information	Cost
Replaces PQRS.	New Category.	Replaces the Medicare EHR Incentive Program also known as Meaningful Use.	Replaces the Value-Based Modifier.

Source: CMS https://qpp.cms.gov/mips/overview

- APMs incentivize to clinicians to provide high-quality and cost-effective care

- There are two subsets of APM models:
  - Advanced APMs
  - MIPS-APMs

- To be considered an Advanced APM by CMS, the model must meet three requirements:
  1. Uses Certified EHR Technology (CEHRT);
  2. Provides payment for services based on quality measures comparable to MIPS quality performance category
  3. Requires participants to bear a more than nominal amount of financial risk, or is a Medical Home Model

  - Advanced APMs that participate in the Medicare Shared Savings Program (MSSP) must report on the ACI measures

- All other APMs are considered MIPS-APMs

  - MIPS-APMs are required to report on all MIPS categories, including ACI measures

Differences Between ACI and MU

- Previously, providers who billed both Medicaid and Medicare had to choose a single incentive program to demonstrate Meaningful Use

Medicaid EHR Incentive Program	**OR**	Medicare EHR Incentive Program

- Now, providers who bill both Medicaid and Medicare have the opportunity to:

  - Earn incentives through the Medicaid EHR Incentive Program

    and
  - Earn positive payment adjustments by demonstrating performance on ACI measures

Medicaid EHR Incentive Payment Program
Meaningful Use

Merit-Based Incentive Payment System (MIPS)
Advancing Care Information (ACI)

Earn Medicaid incentive payments	**AND**	Avoid negative Medicare payment adjustment; potentially earn positive payment adjustments

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Differences Between ACI and MU

- MU includes CDS and CPOE while ACI does not

- ACI has no measure thresholds that must be met
  - With exception of Base Score (certain measures must be reported on)
  - Each numerator/denominator or Yes/No response converts to points

- ACI measures have no exclusions
  - Except for eRx measure
  - Eligible Clinician (EC) must meet Base Score requirements by reporting on required measures
  - EC may elect to report on additional Performance and Bonus measures

- The scoring is different between programs
  - MU is pass/fail
  - Except for the Base Score which is pass/fail, ACI uses decile scoring*

Decile scoring ranks the submitted performance levels by the number of individual providers submitting that performance level or range.

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2017 ACI Measures

MEASURE NAME	REQUIRED FOR BASE SCORE	PERFORMANCE SCORE WEIGHT	corresponding MU measure
Security Risk Analysis	**Yes**	**0**	*1. SRA*
e-Prescribing	**Yes**	**0**	*4. eRx*
Health Information Exchange	**Yes**	**Up to 20%**	*5. HIE*
Patient-Specific Education	No	Up to 10%	*6. Pt. Education*
Medication Reconciliation	No	Up to 10%	*7. Med Rec*
Provide Patient Access	**Yes**	**Up to 20%**	*8. Pt. eAccess*
View, Download, or Transmit (VDT)	No	Up to 10%	*8. Pt. eAccess*
Secure Messaging	No	Up to 10%	*9. Secure Messaging*
Immunization Registry Reporting	No	Up to 10%	*10. Public Health*
Specialized Registry Reporting	No	Up to 5%	*10. Public Health*
Syndromic Surveillance Reporting	No	Up to 5%	*10. Public Health*

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MU Attestation

- MAPIR
- January 1, 2018 through March 31, 2018

MIPS/ACI

- EHR
- Qualified Registry
- Qualified Clinical Data Registry (QCDR)
- CMS Attestation System (new CMS portal coming soon)
- January 1, 2018 through March 31, 2018

IMPORTANT: If you are attesting for both MU and MIPS, you must attest separately for each program.

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