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### Need help?

#### Clinical Data Repository (CDR):

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- [Email OHP](#)

#### Electronic Health Records (EHR):

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- [ProviderOne help](#)
- CMS EHR Help desk:  
1-888-734-6433  
option #1

## Clinical Data Repository updates

### HIT in the community

- Representatives from HIT attended the [2019 State of Reform Health Policy Conference](#) in January.
- OneHealthPort is conducting clinical usability sessions with providers to refine use cases and gather additional feedback.
- HIT will present at these following events:
  - [Washington Rural Health Association's Northwest Rural Health Conference](#)
  - [Washington Council for Behavioral Health's conference.](#)

## Web portal is now open for viewing data

The CDR web portal is available for viewing by all licensed professionals. This includes physical and behavioral health providers and their delegates.

Some things to remember:

- All organizations viewing CDR data must be HIPAA Covered Entities and a signed HIE

- CMS account security: 1-866-484-8049 option #3
- [CMS listserv](#)

Participation Agreement with [OneHealthPort](#).

- Only staff with a need to view individual client level data may access the CDR. (As determined by their manager and configured by their internal IT access staff.) This is similar to how your organization grants EHR access.
- Organizations using the CDR will not incur training costs from OneHealthPort or HCA, and users can complete training in one hour or less. Reference materials are available on [OneHealthPort's website](#).

The User Acceptance Testing domain is open and ready for testing for those who have not completed CDR onboarding. OneHealthPort will work with vendors to help remaining providers complete their onboarding activities.

### **“Small provider” exception**

Organizations with less than four providers are exempt from submitting Continuity of Care Documents (CCDs) to the CDR until July 1, 2019. In addition, all providers may view CDR data, regardless of whether they currently submit CCDs.

If your organization would like to begin using the CDR, please [contact OneHealthPort](#). If you are using the CDR web portal and want to share feedback, please contact HIT at [healthit@hca.wa.gov](mailto:healthit@hca.wa.gov).

## **Electronic Health Records Incentive Program updates**

### **Attestation portal is closing for updates**

We are closing the attestation portal and extending our 2018 deadline due to recent CMS changes to the Final Rule. These limited changes won't be available until early Summer.

Once these changes have been updated in the EHR attestation application, we will send a notification letting you know that the portal is open and you can come in and attest.

Please visit the eCQI Resource Center for more details on specific measures that will be changing.

[EPs](#)

[EHs](#)

### **ONC presentation on 2015 certifications**

Please take a few minutes to view an [interactive presentation created by the Office of the National Coordinator](#) to help Patients, Clinicians and Hospitals and Developers gain a better Understanding of the 2015 Edition of Certification Criteria Categories.

### **2019 Medicaid Specification sheets available**

CMS has updated its Promoting Interoperability Programs webpages to include program year 2019 information and details. Please visit the following links and feel free to share them with providers in your state:

- [2019 Program Requirements: Medicaid](#)
- [2019 Medicaid Eligible Professional specification sheets](#)
- [2019 Medicaid Hospital specification sheets](#)

## **MU audit preparedness**

Providers who receive an incentive payment for the Medicare or Medicaid Electronic Health Record (EHR) Incentive Program potentially may be subject to an audit. It is the provider's responsibility to maintain documentation that fully supports the meaningful use and clinical quality measure data submitted during attestation. To ensure you are prepared for a potential audit, save any electronic or paper documentation that supports your attestation. An audit may include a review of any of the documentation needed to support the information that was entered in the attestation.

## **Statistics**

### **EH**

Paid for Year 1 = 87 (\$63,568,957)

Paid for Year 2 = 81 (\$36,102,305)

Paid for Year 3 = 77 (\$29,081,024)

Paid for Year 4 = 56(\$17,771,406.35)

### **EP**

Paid for Year 1 = 6,938 (\$146,795,030)

Paid for Year 2 = 3,425 (\$28,962,351)

Paid for Year 3 = 2,417 (\$20,490,673)

Paid for Year 4 = 1,693 (\$14,339,506)

Paid for Year 5 = 1,118 (\$9,480,336)

Paid for Year 6 = 467 (\$3,958,168)

**Grand total** = \$370,549,756.35

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The Washington State Health Care Authority (HCA) is committed to whole-person care, integrating physical health and behavioral health services for better results and healthier residents.

HCA purchases health care for more than two million Washington residents through Apple Health (Medicaid), the Public Employees Benefits Board (PEBB) Program, and, beginning in 2020, the School Employees Benefits Board (SEBB) Program. As the largest health care purchaser in the state, we lead the effort to transform health care, helping ensure Washington residents have access to better health and better care at a lower cost.

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