The CDR is now open for provider testing!

In collaboration with the state health information exchange, OneHealthPort (OHP), HCA has continued preparations for the CDR rollout later this year. This past month we have reached some key milestones:

- As of October 14, the CDR test domain is open for providers to begin submitting their clinical summaries in a standard electronic format called a Continuity of Care Document (CCD). These care summaries will be submitted after each outpatient encounter or inpatient admission.
- OneHealthPort has completed work on technical changes to allow some different options for providers to submit their care summaries and to match the clinical data to the correct patient in the CDR.

Providers who will be required to submit CCD files for their Apple Health Managed Care enrollees by February 1, 2017 should contact OneHealthPort as soon as possible to begin technical readiness work.

If you have any questions about whether your organization is required to submit data to the CDR, please refer to the criteria diagram on the HCA web site or e-mail us at healthit@hca.wa.gov.

Other activities that have continued during October include:

- A data classification white paper is posted on the OHP and HCA web sites as guidance for EHR vendors and providers as they prepare their data (i.e. assigning standard confidentiality codes) before sending to the CDR.
- Continued webinars and meetings with various stakeholder groups to provide updates
- Refined communications regarding privacy considerations
- Continued planning for CDR reports
- Continued planning for early CDR training
- Conducted a statewide roadshow (OHP sessions & Indian Health Care Services sessions) to discuss the CDR and the Meaningful Use incentive payment program.

OneHealthPort is offering monthly webinars for EHR vendor and provider organizations. Their readiness efforts are continuing in parallel with those of the state. HCA is also participating in those webinars to address any policy and requirement questions. The links below contain more information.

EHR vendor webinar sign-up link:
https://onehealthport.formstack.com/forms/cdr_technical_webcast_registration

Provider Staff webinar sign-up link:
You may also visit the OneHealthPort CDR Readiness page for information on readiness activities, contracting, and clinical data exchange using CCD files.

OIG and EHR Incentive Payment Findings in Multiple States

You may have been made aware of the recent audit of many states' Electronic Health Record (EHR) Incentive Payment Program by the Office of the Inspector General (OIG). Please find our response here.

Upcoming Webinar!

Title: Privacy Safeguards and the Statewide Clinical Data Repository (CDR)

DATE: Tuesday November 8 10:00-11:30

Description: The Clinical Data Repository (CDR) is launching soon, which will enable the electronic exchange of clinical information between providers. Please join us as we introduce our shared understanding regarding HIPAA and applicable state law applicable to the collection and use of this data.

Please register here.

Indian Health Services Roadshow

From September 20th through November 17th of 2016, members of both our EHR Incentive Payment Program and the Clinical Data Repository Service are making themselves available in many areas across the state.

We hope to meet many of you in our travels as we provide project updates and host regional Indian Health Care Provider conversations.

For Indian Health Care Providers, we are arranging regional meetings that are hosted in one facility, with invitations for neighboring Tribes to participate as well. There will be general program updates for the participants followed by opportunities for individual tribal conversations with documents depicting how far each registered EHR provider has progressed through the EHR Incentive Payment Program and noting the monies still available to be attested to receive. Meeting invitations were sent to regional Indian Health Care Leaders around the state beginning in April to arrange locations and participants for this Fall outreach. Here are our Indian Health meetings scheduled so far:

- Wednesday November 2 hosted by the Nisqually Tribe (included are their neighbors who would like to participate from the Puyallup and Muckleshoot Tribes)
- Thursday November 3 hosted by the Tulalip Tribe (included are their neighbors who would like to participate from Stillaguamish and Sauk-Suiattle)
- Wednesday November 9 hosted by the Seattle Indian Health Board
- Thursday November 17 hosted by Skokomish (included are their neighbors who would like to participate from Squaxin Island)
If you have any questions please contact us at healthit@hca.wa.gov and put "Indian Health Services Roadshow" in the subject line.

Reminder: HCA website has changed
HCA has built a new website so any previously bookmarked links may not work anymore. The new web address is as follows: http://hca.wa.gov/

The new HealthIT homepage is located at: http://hca.wa.gov/about-hca/health-information-technology

If you are looking for webinars, tip sheets, or guides you will find them on the Resources page: http://hca.wa.gov/about-hca/health-information-technology/resources

We also have a toll free number (1-855-682-0800) that you can use to leave requests, questions, and concerns.

Stage 3 - HCA has decided to post-pone the implementation of Stage 3 until sometime in 2017 – we will keep you updated.

CMS Issues Final Rules on Stage 3 Meaningful Use, EHR Incentive Program Updates for 2015-17

The Centers for Medicare & Medicaid Services (CMS) has issued the attached final rule with comment period, modifying the reporting period for the Medicare and Medicaid Electronic Health Records (EHR) Incentive programs in 2015 and defining stage 3 of meaningful use. In the final rule, CMS finalized provisions for two separate proposed rules issued in March. In addition, the Office of the National Coordinator for Health Information Technology released a companion rule that finalizes 2015 certification criteria, standards and implementation specifications for EHR technology.

The finalized modifications to EHR Incentive programs for 2015 through 2017 include moving from fiscal year to calendar year reporting for all providers beginning in 2015 and offering a 90-day reporting period in 2015 for all providers, as well as for new participants in 2016 and 2017, and for any provider moving to Stage 3 in 2017. CMS also reduces the number of objectives for eligible hospitals and critical access hospitals (CAHs) from 20 to nine — including one public health reporting objective — and maintains electronic clinical quality measure (eCQM) reporting as previously finalized.

Stage 3 of meaningful use is optional in 2017 and required for all providers in 2018. Beginning in 2018, a full calendar year of reporting is required for all providers. Other provisions finalized for Stage 3 include eight objectives for eligible professionals, eligible hospitals and CAHs, 60 percent of which require interoperability (up from 33 percent in Stage 2); options for public health reporting; alignment of eCQM reporting with other federal programs; and the use of application program interfaces.

The final rule includes a 60-day comment period where CMS seeks feedback on the future of EHR Incentive programs beyond Stage 3 of meaningful use. Specifically,
CMS notes that the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) requires the establishment of the Merit-Based Incentive Payment System and consolidates certain aspects of a number of quality measurement and federal incentive programs into a single, more efficient framework. CMS will use feedback gathered from the final rule’s comment period to inform its rulemaking to implement MACRA, expected in spring of 2016. HCA is currently reviewing the final rules and will provide members with a more detailed summary in the coming weeks. Comments on the final rule will be due 60 days following the rule’s publication in the Federal Register, scheduled for Oct. 16.

ONC Certification Criteria

MU Stage 3 Final Rule

Total EHR Incentive Monies Paid Out to Date

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GRAND TOTAL PAID

SINCE 6/1/2011: = $319,217,639.00

Please do not reply directly to this message. If you have feedback or questions, please visit the HealthIT website for more information or email us at HealthIT@hca.wa.gov.