HQIC Office Hours

January 12, 2023

Logistics – Zoom Meeting

To ask questions, click on the **Chat** icon. At the end of the presentation, you will also be able to unmute to ask a question verbally.

You may adjust your audio by clicking the caret next to the **Mute** icon.

Resources from today's session will be shared after the call.

Health Quality Innovation Network

Today's Presenter

Jason Felts, MS
Health Information Technology Manager for the
Oklahoma Foundation for Medical Quality (OFMQ)

Promoting Interoperability – Registration, Attestation and Reporting Deadlines

Agenda

1   **Program Registration**

2   **Attestation Requirements**

**3**   **Payment Adjustments & Hardship Information**

4   **Updates for 2023**

Program Registration

- Eligible hospitals and CAHs participating in Promoting Interoperability must attest through the **QualityNet Secure Portal**
  - https://qualitynet.cms.gov/
  - If you do not have a QualityNet account you will first need to register through **HARP**
    - https://harp.cms.gov/login/login
  - QualityNet PI User Guide:
    - https://www.cms.gov/files/document/qnet-user-guide-2022.pdf

QualityNet Secure Portal

- Once logged in, go to **Administration** on the left-hand navigation bar, and select **Promoting Interoperability Registration**
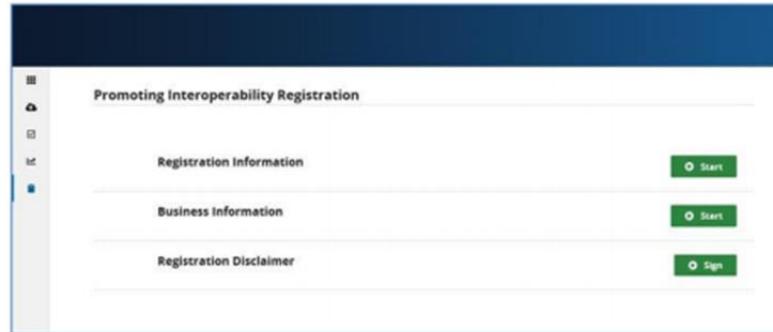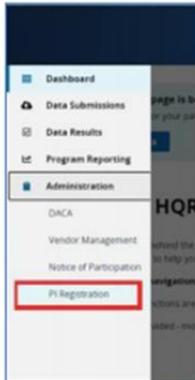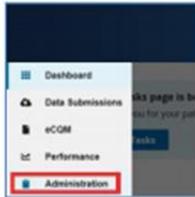
2022 Requirements

Utilize 2015 CEHRT *or* 2015 Cures Update Criteria *or* Combination of both

- Determine your current EHR version. May need to verify with vendor

Submit data for certain measures from each of the 4 objectives

- Some exclusions available
- Minimum continuous 90-days

Minimum Threshold

- 60 points up from 50 points

Attestation Statement

- Security Risk Analysis
- Complete annual **Safety Assurance Factors for EHR Resilience (SAFER) assessment**

ONC Certified HealthIT Product List: https://chpl.healthit.gov/#/search

Promoting Interoperability Objectives

e-Prescribing

Health Information Exchange

Provider to Patient Exchange

Public Health and Clinical Data Exchange

2022 Promoting Interoperability Measure Changes

e-Prescribing- **no change**

Bonus: Query of Prescription Drug Monitoring Program- **from 5 points to 10 points**

Support Electronic Referral Loops by Sending Health Information- **Yes/No addition**

Support Electronic Referral Loops by Receiving and Incorporating Health Information- **Yes/No addition**

Provide Patients Access to their Health Information- **no change but technical requirements will be modified for data availability**

Public Health Measures- **from 2 to 4 reporting exchanges**

PDMP

Must Attest Yes to:

- For at least one Schedule II opioid electronically prescribed using certified electronic health record technology (CEHRT) during the electronic health record (EHR) reporting period, the eligible hospital or CAH uses data from CEHRT to conduct a query of a PDMP for prescription drug history, except where prohibited and in accordance with applicable law.

Health Information Exchange

Measure 1: Support Electronic Referral Loops by Sending Health Information

- For at least 1 transition of care or referral, the eligible hospital or CAH 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: Support Electronic Referral Loops by Receiving and Incorporating Health Information

- For at least 1 electronic summary of care record received for patient encounters during the EHR reporting period (where the hospital is the receiving party or has never before encountered the patient) the hospital conducts clinical information reconciliation for medications, medication allergies, and current problem list.

Health Information Exchange Bi-Directional

Must Attest Yes to:

- I participate in an HIE in order to enable secure, bi-directional exchange to occur for every patient encounter, transition or referral, and record stored or maintained in the EHR during the performance period in accordance with applicable law and policy.
- The HIE that I participate in is capable of exchanging information across a broad network of unaffiliated exchange partners including those using disparate EHRs and does not engage in exclusionary behavior when determining exchange partners.
- I use the functions of CEHRT to support bi-directional exchange with an HIE.

Public Health Measures

4 Required Measures + 2 Bonus Measures:

- Required:
  - Syndromic Surveillance Reporting
  - Immunization Registry Reporting
  - Electronic Case Reporting
  - Electronic Reportable Laboratory Result Reporting
- Bonus:
  - Public Health Registry Reporting
  - Clinical Data Registry Reporting

Scoring Methodology - 2022

Objectives	Measures	Maximum Points
e-Rx	e-Rx	10 points
	Bonus: Query of PDMP	10 bonus points
Health Information Exchange	Support Electronic Referral Loops by Sending Health Information	20 points
	Support Electronic Referral Loops by Receiving and Incorporating Health Information	20 points
Provider to Patient Exchange	Provide Patients Access to their Health Info	40 points
Public Health and Clinical Data Exchange	Choose 4 Registries Bonus Points- Reporting to other Registries	10 points 5 bonus points

Quality Reporting

eCQMs

- 3 Self-Selected Quarters

Medicare Promoting Interoperability Program eCQM Reporting Requirements for All Hospitals		
# of eCQMs	Attestation	9
	Electronic Reporting	Safe Use of Opioids eCQM, plus 3 self-selected eCQMs (4 eCQMs total)
Reporting Period	Electronic Reporting Period	Three self-selected calendar quarters of data
CY 2022 Submission Deadline		February 28, 2023

Quality Reporting

IQR/OQR- CAHs are encouraged, but not required, to participate in the Hospital IQR Program.

Resources:
https://qualitynet.cms.gov/files/61e81eb47e5c7f001e641fd4?filename=IQR_FY2024_CMS_Measures.pdf
https://qualitynet.cms.gov/files/62420c12116c150016365ed2?filename=OQR_PrgrmMsrs_CY22-23_PymtDtrm.pdf

Attestation - Hospitals

- Medicare eligible hospitals and CAHs must attest to Promoting Interoperability through the Hospital Quality Reporting page using their **HARP** credentials
  - Medicare transitioned away from the Quality Net secure portal in December of 2020 ~ https://qualitynet.cms.gov/news/5fda29055b2cb7002501c5a5

- PI reporting site - https://hqr.cms.gov/hqrng/login

- HARP login page - https://harp.cms.gov/login/login

Data Submission

Once logged into HQR, you'll click on the "data submission" icon in the left menu

eCQM submission

- "Web-based measures" if you are manually entering data
- "eCQM" tab if you are uploading via a QRDA 1 file

To enter PI data you will click on "Data Form" then select "PI" Data Form

Security Risk Analysis

Eligible hospitals and CAHs must conduct or review a security risk analysis of CEHRT including addressing encryption/security of data and implement updates as necessary at least once each calendar year and attest to conducting the analysis or review.

An analysis must be done upon installation or upgrade to a new system and a review must be conducted covering each EHR reporting period. Any security updates and deficiencies that are identified should be included in the eligible hospital or CAHs risk management process and implemented or corrected as dictated by that process.

SAFER Assessment

Eligible hospitals and CAHs will be required to submit one "yes/no" attestation statement for completing an annual self-assessment using **all 9** SAFER Guides

SAFER Assessment

The SAFER Guides consist of nine guides organized into three broad groups.

These guides enable healthcare organizations to address EHR safety in a variety of areas.

Most organizations will want to start with the Foundational Guides and proceed from there to address their areas of greatest interest or concern.

SAFER Guides

- SAFER Guides by Group

Foundational Guides	•High Priority Practices* •Organizational Responsibilities*
Infrastructure Guides	•Contingency Planning* •System Configuration* •System Interfaces*
Clinical Process Guides	•Patient Identification* •Computerized Provider Order Entry with Decision Support* •Test Results Reporting and Follow-Up* •Clinician Communication*

https://www.healthit.gov/topic/safety/safer-guides

Payment Adjustments & Hardships

Payment Adjustments

- Medicare eligible hospitals that do not meet PI requirements will receive a reduction (75%) to the applicable percentage increase to the IPPS payment rate
- CAHs will have Medicare reimbursement reduced from 101% down to 100%

Hardship applications

- Close September 1 of the following year
- Categories include Extreme & uncontrollable circumstances, EHR technology and certification, internet connectivity

2023 Requirements

Utilize 2015 Cures Edition of Certified EHR Technology (CEHRT)

- We will update this with our final Epic upgrade for 2023

Submit data for certain measures from each of the 4 objectives

- Some exclusions available
- Minimum continuous 90-days

Minimum Threshold

- 75 points up from 60 points

Attestation Statement

- Security Risk Analysis
- Complete annual **Safety Assurance Factors for EHR Resilience (SAFER) assessment**

2023 Promoting Interoperability Measures

Provider provides patient exchange (Patient Portal) decreased from 40 points to 25.

Query of PDMP is now 10 points and it is required

HIE measures decreased from 20 points each to 15. Also have the Bi-Directional Exchange measure and NEW TEFCA option

Public health and clinical data exchange increased from 10 points to 25.

5 bonus points is available for additional data exchange for : Clinical Data Registry, Public Health and/or Syndromic Surveillance

Quality Highlights

Inpatient will report 4 quarters of eCQM data instead of 3 quarters for 4 measures

- One of the eCQMs you submit for 2023 MUST be the Safe Use of Opioids eCQM

Quality Highlights

- Inpatient measures: Mandatory reporting of the NEW **Hospital Commitment to Health Equity structural measure-** yes/no questions that are organized into 5 "domains."
  - Equity is a Strategic Priority
  - Data Collection
  - Data Analysis
  - Quality Improvement
  - Leadership Engagement

February Office Hours

Target Your Approach to Antimicrobial Stewardship

February 9
Time: 12:00 PM EST

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