

A BRIEF GUIDE TO HITECH MEANINGFUL USE AT CHRISTUS

WHAT IS MEANINGFUL USE?

Beginning in 2011, the Medicare and Medicaid EHR incentive programs will provide financial incentives to health care professionals and hospitals for adopting certified Electronic Health Records (EHRs); but only if the technology is being used in a “meaningful” way that supports the ultimate goals of improving quality, safety and efficiency of care.

These incentive programs are part of a federally funded stimulus plan designed to help eligible professionals and hospitals adopt and meaningfully use electronic health record technology. “Meaningful use” is defined in a very specific way for health care professionals and hospitals, and certain criteria must be met to receive payment.

Based on the payment formulas provided from CMS the hospitals incentive payments for all of CHRISTUS are estimated to be \$109 million. Achieving meaningful use also avoids reduction in reimbursement by approximately \$24 million. For Eligible Providers those payments are \$44,000 for Medicare and \$63,750 for Medicaid.

WHAT IS CHRISTUS DOING TO HELP ACHIEVE MEANINGFUL USE?

The CHRISTUS strategy is to implement advanced clinical, business, and strategic information systems that will allow us to achieve the maximum incentive payments, avoid reduction in reimbursement, pave the road to ACOs and improve quality, safety and efficiency of care.

A cross functional team consisting of IM, Finance, QPSI, Medical Leadership and others has been working to interpret all the rules and regulations and prepare CHRISTUS. Some of these activities include:

- IM disseminated information in the form of presentations to Medical Staffs at all regions;
- IM is coordinating the upgrade to MEDITECH and Cerner that will provide the ONC certified version of the EHR;
- IM has planned and supported implementations of advanced clinical applications in all regions that will position CHRISTUS to meet the criteria;
- Identified and implemented a method to accurately register all CHRISTUS hospitals in the EMR incentive program;
- The cross functional team has spent many hours identifying specific strategies to meet each Meaningful Use criteria to assure CHRISTUS achieves meaningful use in a timely manner and to receive the maximum incentive payments and avoid any reduction in payments that would begin 2015.
- This team continues to work on strategies to support dissemination of information about Meaningful Use to all levels within CHRISTUS.
- Through CHRISTUS TechSource, whose mission is to provide physicians with a single source for all their information technology needs including hardware, EMR software and connectivity, assist physicians in acquiring EMR technology and achieving meaningful use

WHO IS ELIGIBLE TO RECEIVE PAYMENTS?

Eligible professionals for the Medicare incentive program are those with the title of MD, DO, DDS, DMD, DPM, OD, or DC.

Eligible professionals for the Medicaid incentive program are those with the title of MD, DO, DDS, DMD, certified nurse-midwife, nurse practitioner, or physician assistant (if practicing in a physician assistant-led Federally Qualified Health Center or Rural Health Clinic).

Eligible hospitals for the Medicare incentive program are subsection (d) hospitals and critical access hospitals.

Eligible hospitals for the Medicaid incentive program are acute care (including critical access hospitals), and children's hospitals

CAN I PARTICIPATE IN BOTH MEDICAID AND MEDICARE INCENTIVE PROGRAMS?

Eligible professionals can choose to participate in either the Medicaid or the Medicare incentive program. They may not receive incentive program payments simultaneously from both programs.

Hospitals may be eligible to participate in both incentive programs.

WHAT IS CHRISTUS DOING TO ASSURE ELIGIBLE FACILITIES AND ELIGIBLE PROVIDERS ARE REGISTERING FOR MEANINGFUL USE?

In order to receive Medicare EHR incentive payments, eligible providers, eligible hospitals, and critical access hospitals **must have an enrollment record in PECOS - Provider Enrollment, Chain, and Ownership System.** Medicaid Eligible Providers do not have to be in PECOS. For the Eligible Hospitals, a cross functional team consisting of IM, Finance, QPSI, Medical Leadership and others determined that the most efficient way to register is to work with Murer Consulting to register each facility for both Medicaid and Medicare. CHRISTUS uses Murer Consulting to register all its Medicare applications. Eligible Providers can contact CHRISTUS TechSource for additional information.

FREQUENTLY ASKED QUESTION FOR BOTH THE MEDICAID AND MEDICARE INCENTIVE PROGRAMS

	MEDICAID	MEDICARE
WHO ADMINSTERS THE PROGRAM?	Voluntary for states to implement through state Medicaid program	Federal government will implement through CMS
WHAT IS THE GENERAL TIMELINE?	<p>Must begin incentive program by 2016.</p> <p>Program ends in 2021.</p>	<p>Must begin incentive program by 2014.</p> <p>Must begin by 2012 to receive maximum payment. Program ends in 2016</p>
IS THERE A REGISTRATION PROCESS?	<p>Yes. There is a separate registration process for Medicare and Medicaid.</p> <p>Providers and hospitals must register with their state to participate in the Medicaid incentive program.</p>	<p>Yes. There is a separate registration process for Medicare and Medicaid.</p> <p>Providers and hospitals must register on the CMS website</p>
HOW DO MULTI HOSPITAL SYSTEMS APPLY FOR THE INCENTIVE PAYMENTS?		<p>It depends as payments for eligible hospitals will be calculated and paid to the each provider of record determined by their CCN.</p> <p>Hospital systems that have chosen to obtain one CCN for all their facilities have chosen to represent themselves to CMS as a single hospital. These systems are able to apply once for the Incentive Program under the single CCN.</p>
WHAT ARE THE NEGATIVE CONSEQUENCES OF NOT PARTICIPATING IN MEANINGFUL USE INCENTIVE PROGRAMS?	No Medicaid payment reductions for eligible professionals and hospitals who do not demonstrate meaningful use	Medicare payment reductions begin in 2015 for eligible professionals and hospitals who do not demonstrate meaningful use
HOW DOES A PROVIDER OR HOSPITAL QUALIFY FOR THE INCENTIVE PROGRAM?	<p>May receive payment for adoption/implementation/upgrading of certified EHR in the first year of participation.</p> <p>Must demonstrate meaningful use in subsequent years</p>	To receive payment, must demonstrate meaningful use of an EMR
WHAT IS THE MAXIMUM	Maximum payment for each eligible	Max eligible professional

<p>INCENTIVE PAYMENT AVAILABLE?</p>	<p>professional is \$63,750 over 6 years.</p> <p>Maximum hospital payment for both Medicaid and Medicare combined is a calculation that starts at \$ 2million and goes up by \$200 per annual admission between 1,150 and 23,000 discharges (see column to the right).</p>	<p>payment is \$44,000 over 5 years. (\$48,400 if eligible for the HPSA bonus).</p> <p>Maximum hospital payment for both Medicaid and Medicare combined for each year is the product of:</p> <p>(1) An initial amount = Base \$2 million + discharge-related amount for the first through the 1,149th discharge, \$0 for the 1,150th through the 23,000th discharge, \$200 for any discharge greater than the 23,000th, \$0.</p> <p>(2) Medicare share</p> <p>(3) Medicaid share</p> <p>(4) Transition factor applicable to that payment year</p>
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<p>CAN I SKIP A YEAR?</p>	<p>Incentives can be paid for nonconsecutive participation (you can skip participation years) through 2021 for eligible professionals and 2015 for eligible hospitals</p>	<p>Incentive payments will only be paid for consecutive participation (you cannot skip participation years). Incentive amounts are linked to the participation year and decrease year by year</p>
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<p>ARE THERE ANY ORGANIZATIONS THAT CAN ASSIST WITH EMRs or Meaningful use?</p>	<p>As part of HITECH, ONC funded regional extension centers (REC) in every state. The regional extension centers' mission is to assist providers and critical access hospitals with the evaluation, selection, installation, training and operations of an EMR. The Louisiana REC is the Louisiana Health care Quality Forum, the Texas REC for most of our facilities is the Gulf Coast REC and for New Mexico it is the Lovelace Foundation.</p>
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<p>DOES CHRISTUS HAVE ANY DIRECT INVOLVEMENT WITH THE RECs? WHY SHOULD I USE THE REC AND NOT IM?</p>	<p>CHRISTUS is directly involved in the RECs through TechSource, a part of CHRISTUS IM that provides physician EMR to members of our hospital medical staffs. TechSource is a subcontractor to the RECs and can be used by any</p>
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CHRISTUS facility or affiliated provider to help evaluate, select, install, train, implement and operate an EMR.

WHAT SUPPORT IS THERE FOR OUR ACUTE CARE FACILITIES?

In order to qualify for the MU incentive payments, providers and hospitals must use ONC certified EMRs. The current MEDITECH upgrade underway across the system (Unity II) will give us our ONC certified acute care EMR. CHRISTUS IM is heading up this effort under the leadership of Randy Osteen, Luke Webster, M.D. and melody Jackson, R.N.

WHAT ELSE IS CHRISTUS DOING TO SUPPORT ACHIEVEMENT OF MU

A cross functional team is working on understanding all the requirements and will be able to provide direction, support and answer any questions.

A good place to start is with your RIME.
