

Resources

ONC

http://healthit.hhs.gov/portal/server.pt/co mmunity/healthit hhs gov home

http://dashboard.healthit.gov/

http://www.healthit.gov/providersprofessionals/regional-extension-centers-

- NACHC http://www.nachc.com/
- **EHR Standards and Certification** Criteria http://healthit.hhs.gov



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CMS

http://www.cms.gov/EHRIncentivePro grams/

Follow the latest information about EHR Incentive programs on Twitter at http://www.Twitter.com/CMSGov

HRSA http://www.hrsa.gov/publichealth/busi ness/healthit/index.html

This guide was prepared by Missouri Quality Improvement Network of the MPCA Center for Primary Care Quality





Quick Reference Guide to understanding Meaningful Use

What is Meaningful Use?

IN HITECH, CONGRESS SPECIFIED THREE TYPES OF REQUIREMENTS FOR MEANINGFUL USE

- **1.** Use of certified ERH technology in a meaningful manner (e.g., Electronic Prescribing).
- 2. Connecting certified EHR technology in a manner that provides for the electronic exchange of health information to improve the quality of care.
- **3.** That, in using certified EHR technology, the provider submits to the Secretary information on clinical quality measures and such other measures selected by the Secretary.

ADOPTED POLICY PRIORITIES FOR MEANINGFUL USE

Improve quality, safety, efficiency, and reduce health disparities

Engage patients and families

Improve care coordination

Improve population and public health

Ensure privacy and security protection for personal health information



Who is an eligible professional?

Medicaid	Physicians, Nurse Practitioners, Certified Nurse-Midwives, Dentist, Physician Assistants in a PA-led FQHC or RHC (MO PAs may not qualify)
Medicare	Doctors of Medicine or Osteopathy, Doctors of Dental Surgery or Dental Medicine, Doctors of Podiatric Medicine, Doctors of Optometry, Chiropractors

Eligible Professionals (EPs) for Medicaid	Minimum Medicaid patient Volume Threshold	
Physician (MD or DO)	30%	Or the Medicaid EP practices
Pediatrician	20%	predominately in an FQHC or
Dentist	30%	RHC with a 30 % * "needy
Certified nurse-midwife	30%	individual" patient volume
Nurse Practitioner	30%	threshold
Physician Assistant when practicing in an FQHC/RHC led by a physician assistant	30%	

*Section 1903(t)(3)(F) of the Act defines needy individuals as individuals meeting any of the following criteria: (1) They are receiving medical assistance from Medicaid or the Children's Health Insurance Program (CHIP); (2) they are furnished uncompensated care by the provider; or (3) they are furnished services at either no cost or reduced cost based on a sliding scale

eligible providers will receive incentive payments for demonstrating Meaningful Use

MEDICAID & MEDICARE INCENTIVE PAYMENT DISBURSEMENT

	2011	2012	2013	2014	2015	2016*	2017	2018	2019	2020	2021	Maximum Payments
Medicaid EHR Incentive Payments	\$21,250	\$8,500	\$8,500	\$8,500	\$8,500	\$8,500						\$63,750
		\$21,250	\$8,500	\$8,500	\$8,500	\$8,500	\$8,500					\$63,750
			\$21,250	\$8,500	\$8,500	\$8,500	\$8,500	\$8,500				\$63,750
				\$21,250	\$8,500	\$8,500	\$8,500	\$8,500	\$8,500			\$63,750
					\$21,250	\$8,500	\$8,500	\$8,500	\$8,500	\$8,500		\$63,750
						\$21,250	\$8,500	\$8,500	\$8,500	\$8,500	\$8,500	\$63,750
Medicare EHR Incentive Payments	\$18,000	\$12,000	\$8,000	\$4,000	\$2,000							\$44,000
		\$18,000	\$12,000	\$8,000	\$4,000	\$2,000						\$44,000
			\$15,000	\$12,000	\$8,000	\$4,000						\$39,000
				\$12,000	\$8,000	\$4,000						\$24,000

*Under Medicaid Program years do not have to be consecutive. If an EP does not receive an incentive payment in a given year, then that year would not be counted as a "payment year." However, in order to receive maximum incentive payment 2016 is the final year to register and then meet MU criteria the remaining 6 years.

How is MU funded? (ARRA)

Medicare and Medicaid incentive payments for Meaningful Use are provided through the American Recovery and Reinvestment Act (Recovery Act) of 2009 for eligible professionals (EPs) who

-adopt,

-implement,

- upgrade,

-or meaningfully use certified electronic health record (EHR) technology

in their first year of participation in the program and successfully demonstrate meaningful use in subsequent years.

MU Stages-What to expect

2014 2015+

Stage 1 N	ИU	Stage	2 MU	Stage 3 MU				
Data Capture- Electronic capture of health information in a structured format			ement at at of care etronic ge of	Data Use to Impact Outcomes- Improvement in quality, safety, and efficiency, clinical decision support, patient self management tools.				
		Payment Year						
First Payment Year Stage	2011	2012	2013	2014	2015+			
2011	1	1	1	2	2			
2012		1	1	2	2			