To: KHA HIT Contacts

From: Sally Othmer, Senior Director of Data & Quality

Date: November 2, 2016

Re: Tom Walsh Webinar; OPPS Final Rule

Prevailing Practices for Defending Against WebPhishing and Ransomware Webinar – Nov. 30
Please join the Kansas Hospital Association for an educational webinar on Wednesday, Nov. 30, 2016, when Tom Walsh, founder of tw-Security, will discuss how hospitals can defend against webphishing and ransomware. KHA members pay only $50 and can register here https://registration.kha-net.org. A brochure is available at the KHA website.

CMS Finalizes Changes Under the Medicare EHR Incentive Program
In the prospective payment system final rule released yesterday, the Centers for Medicare & Medicaid Services sets the requirements for eligible hospitals and critical access hospitals to attest to Meaningful Use of electronic health records in the coming years.
The good: CMS finalizes a 90-day reporting period in 2016 and 2017, eliminates two objectives and measures beginning in 2017 and reduces the thresholds for some objectives and measures. For example, CMS revises the threshold for the View, Download or Transmit measure to at least one patient for Modified Stage 2 and Stage 3.
The not so good: CMS retains Stage 3 requirements to use new functionality, such as application programming interfaces, and new reporting requirements, such as clinical information reconciliation. CMS also retains the all-or-nothing approach that requires hospitals and CAHs to attest to all the objectives and measures, and starts Stage 3 in 2018 with a full-year reporting period.

MACRA and Meaningful Use
A major provision of MACRA is to streamline various quality reporting programs into one Quality Payment Program. The new program offers two paths for eligible clinicians: The Merit-based Incentive Payment System (MIPs) and Alternative Payment Models (APMs). Most physicians will report under MIPs. MIPs takes the place of the Physician Quality Reporting System, the Value Modifier Program and the EHR Incentive Program. Meaningful Use requirements, renamed Advancing Care Information (ACI), comprise 25% of the MIPS final score for eligible physicians. The final score earned by a clinician for a given performance year then determines MIPS payment adjustments in the second calendar year after the performance year. The first MIPS performance year begins January 2017.