Medicaid Promoting Interoperability Program for Eligible Professionals Stage 3 Tip Sheet

Formerly known as the Medicaid EHR Incentive Program

Here is a summary of the Medicaid Promoting Interoperability (PI) Program requirements for Eligible Professionals (EPs) in Program Years 2020 and 2021:

- All EPs must attest using 2015 Edition Certified Electronic Health Record Technology (CEHRT).
- All EPs are required to attest to Stage 3 objectives and measures for a 90-day electronic health record (EHR) reporting period for 2020 and 2021.
- In 2020 and 2021, all EPs are required to report on six electronic Clinical Quality Measures (eCQMs) for a 90-day period which may be distinct from the EHR reporting period including at least one outcome or high priority eCQM, if applicable, as detailed in the Wisconsin High Priority Electronic Clinical Quality Measures, P-02315.
- Program Year 2020 applications will be accepted in the Wisconsin ForwardHealth Portal between October 1, 2020 and January 31, 2021.
- Program Year 2021 applications will have an accelerated application timeframe beginning April 1, 2021 through August 1, 2021.

Stage 3 Objectives and Measures	
Objectives	**Measures**
Objective 1: Protect Patient Health Information	Conduct or review a security risk analysis in accordance with the requirements under 45 CFR 164.308(a)(1), including addressing the security (including encryption) of data created or maintained by CEHRT in accordance with requirements under 45 CFR 164.312(a)(2)(iv) and 45 CFR 164.306(d)(3), implement security updates as necessary, and correct identified security deficiencies as part of the provider's risk management process.

Stage 3 Objectives and Measures

Objectives	Measures
Objective 2: Electronic Prescribing (eRx)	More than 60 percent of all permissible prescriptions written by the eligible professional (EP) are queried for a drug formulary and transmitted electronically using certified electronic health record technology (CEHRT). **Exclusion:** Any EP who: (1) Writes fewer than 100 permissible prescriptions during the PI reporting period; or (2) Does not have a pharmacy within their organization and there are no pharmacies that accept electronic prescriptions within 10 miles of the EP's practice location at the start of his or her PI reporting period.
Objective 3: Clinical Decision Support	Eligible Professionals (EPs) must satisfy both of the following measures in order to meet the objective: **Measure 1:** Implement five clinical decision support (CDS) interventions related to four or more clinical quality measures (CQMs) at a relevant point in patient care for the entire PI reporting period. Absent four CQMs related to the EPs scope of practice or patient population, the CDS interventions must be related to high-priority health conditions. **Measure 2:** The EP has enabled and implemented the functionality for drug-drug and drug-allergy interaction checks for the entire PI reporting period. Exclusion: Any EP who writes fewer than 100 medication orders during the PI reporting period.
Objective 4: Computerized Provider Order Entry	An eligible professional (EP), through a combination of meeting the thresholds and exclusions (or both), must satisfy all three measures for this objective: **Measure 1:** More than 60 percent of medication orders created by the EP during the PI reporting period are recorded using computerized provider order entry (CPOE). **Exclusion:** Any EP who writes fewer than 100 medication orders during the PI reporting period. **Measure 2:** More than 60 percent of laboratory orders created by the EP during the PI reporting period are recorded using computerized provider order entry. **Exclusion:** Any EP who writes fewer than 100 laboratory orders during the PI reporting period. Measure 3 – Any EP who writes fewer than 100 diagnostic imaging orders during the PI reporting period. **Measure 3:** More than 60 percent of diagnostic imaging orders created by the EP during the PI reporting period are recorded using computerized provider order entry. **Exclusion:** Any EP who writes fewer than 100 diagnostic imaging orders during the PI reporting period.

Stage 3 Objectives and Measures	
Objectives	**Measures**
Objective 5: Patient Electronic Access to Health Information	EPs must satisfy both measures in order to meet this objective: **Measure 1:** For more than 80 percent of all unique patients seen by the EP: (1) The patient (or the patient-authorized representative) is provided timely access to view online, download, and transmit his or her health information; and (2) The provider ensures the patient's health information is available for the patient (or patient-authorized representative) to access using any application of their choice that is configured to meet the technical specifications of the Application Programming Interface (API) in the provider's certified electronic health record technology (CEHRT). **Measure 2:** The EP must use clinically relevant information from CEHRT to identify patient-specific educational resources and provide electronic access to those materials to more than 35 percent of unique patients seen by the EP during the PI reporting period. **Exclusion:** A provider may exclude from Measure 1 and Measure 2 if one of the following applies: (i) An EP may exclude from the measure if they have no office visits during the PI reporting period. (ii) Any EP that conducts 50 percent or more of his or her patient encounters in a county that does not have 50 percent or more of its housing units with 4Mbps broadband availability according to the latest information available from the Federal Communications Commission (FCC) on the first day of the PI reporting period may exclude the measure.

Stage 3 Objectives and Measures	
Objectives	**Measures**
Objective 6: Coordination of Care through Patient Engagement	Providers must attest to all three measures and must meet the thresholds for at least two measures to meet the objective: **Measure 1:** For a PI reporting period more than 5 percent of all unique patients (or their authorized representatives) seen by the EP actively engage with the electronic health record (EHR) made accessible by the provider and either— (1) View, download or transmit to a third party their health information; or (2) Access their health information through the use of an Application Programming Interface (API) that can be used by applications chosen by the patient and configured to the API in the provider's CEHRT; or (3) A combination of (1) and (2) **Measure 2:** For a PI reporting period more than 5 percent of all unique patients seen by the EP during the PI reporting period, a secure message was sent using the electronic messaging function of CEHRT to the patient (or the patient-authorized representative), or in response to a secure message sent by the patient or their authorized representative. **Measure 3:** Patient generated health data or data from a non-clinical setting is incorporated into the CEHRT for more than 5 percent of all unique patients seen by the EP during the PI reporting period. **Exclusion:** A provider may exclude the measures if one of the following apply: (i) An EP may exclude from the measure if they have no office visits during the PI reporting period, or; (ii) Any EP that conducts 50 percent or more of his or her patient encounters in a county that does not have 50 percent or more of its housing units with 4Mbps broadband availability according to the latest information available from the FCC on the first day of the PI reporting period may exclude the measure.

Stage 3 Objectives and Measures	
Objectives	**Measures**
Objective 7: Health Information Exchange (HIE)	Providers must attest to all three measures and must meet the threshold for at least two measures to meet the objective: **Measure 1:** For more than 50 percent of transitions of care and referrals, the EP 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 **Exclusion:** A provider may exclude from the measure if any of the following apply: (1) Any EP who transfers a patient to another setting or refers a patient to another provider less than 100 times during the PI reporting period. (2) Any EP that conducts 50 percent or more of his or her patient encounters in a county that does not have 50 percent or more of its housing units with 4Mbps broadband availability according to the latest information available from the FCC on the first day of the PI reporting period may exclude the measures. **Measure 2:** For more than 40 percent of transitions or referrals received and patient encounters in which the provider has never before encountered the patient, the EP incorporates into the patient's EHR an electronic summary of care document. **Exclusion:** A provider may exclude from the measure if any of the following apply: (1) Any EP for whom the total of transitions or referrals received and patient encounters in which the provider has never before encountered the patient, is fewer than 100 during the PI reporting period is excluded from this measure. (2) Any EP that conducts 50 percent or more of his or her patient encounters in a county that does not have 50 percent or more of its housing units with 4Mbps broadband availability according to the latest information available from the FCC on the first day of the PI reporting period may exclude the measures. **Measure 3:** For more than 80 percent of transitions or referrals received and patient encounters in which the provider has never before encountered the patient, the EP performs a clinical information reconciliation. The provider must implement clinical information reconciliation for the following three clinical information sets: (1) Medication. Review of the patient's medication, including the name, dosage, frequency, and route of each medication. (2) Medication allergy. Review of the patient's known medication allergies. (3) Current Problem list. Review of the patient's current and active diagnoses. **Exclusion:** Any EP for whom the total of transitions or referrals received and patient encounters in which the provider has never before encountered the patient, is fewer than 100 during the PI reporting period is excluded from this measure.

Stage 3 Objectives and Measures

Objectives	Measures
Objective 8: Public Health and Clinical Data Registry Reporting	**Measure 1:** Immunization Registry Reporting: The EP is in active engagement with a Public Health Agency (PHA) to submit immunization data and receive immunization forecasts and histories from the public health immunization registry/ immunization information system (IIS). **Exclusion:** Any EP meeting one or more of the following criteria may be excluded from the immunization registry reporting measure if the EP— (1) Does not administer any immunizations to any of the populations for which data is collected by their jurisdiction's immunization registry or IIS during the PI reporting period; (2) Operates in a jurisdiction for which no immunization registry or IIS is capable of accepting the specific standards required to meet the CEHRT definition at the start of the PI reporting period; or (3) Operates in a jurisdiction where no immunization registry or IIS has declared readiness to receive immunization data as of 6 months prior to the start of the PI reporting period. **Measure 2:** Syndromic Surveillance Reporting: The EP is in active engagement with a PHA to submit syndromic surveillance data. **Exclusion:** Any EP meeting one or more of the following criteria may be excluded from the syndromic surveillance reporting measure if the EP— (1) Is not in a category of providers from which ambulatory syndromic surveillance data is collected by their jurisdiction's syndromic surveillance system; (2) Operates in a jurisdiction for which no PHA is capable of receiving electronic syndromic surveillance data from EPs in the specific standards required to meet the CEHRT definition at the start of the PI reporting period; or (3) Operates in a jurisdiction where no PHA has declared readiness to receive syndromic surveillance data from EPs as of six months prior to the start of the PI reporting period. **Measure 3:** Electronic Case Reporting: The EP is in active engagement with a PHA to submit case reporting of reportable conditions. **Exclusion:** Any EP meeting one or more of the following criteria may be excluded from the case reporting measure if the EP— (1) Does not treat or diagnose any reportable diseases for which data is collected by their jurisdiction's reportable disease system during the PI reporting period; (2) Operates in a jurisdiction for which no PHA is capable of receiving electronic case reporting data in the specific standards required to meet the CEHRT definition at the start of the PI reporting period; or (3) Operates in a jurisdiction where no PHA has declared readiness to receive electronic case reporting data as of six months prior to the start of the PI reporting period. *Objective continued next page*

Stage 3 Objectives and Measures

Objectives	Measures
Objective 8: Public Health and Clinical Data Registry Reporting	*Objective continued from previous page* **Measure 4:** Public Health Registry Reporting: The EP is in active engagement with a PHA to submit data to public health registries. **Exclusion:** Any EP meeting at least one of the following criteria may be excluded from the public health registry reporting measure if the EP— (1) Does not diagnose or directly treat any disease or condition associated with a public health registry in their jurisdiction during the PI reporting period; (2) Operates in a jurisdiction for which no PHA is capable of accepting electronic registry transactions in the specific standards required to meet the CEHRT definition at the start of the PI reporting period; or (3) Operates in a jurisdiction where no PHA for which the eligible hospital or critical access hospital (CAH) is eligible has declared readiness to receive electronic registry transactions as of six months prior to the start of the PI reporting period. **Measure 5:** Clinical Data Registry (CDR) Reporting: The EP is in active engagement to submit data to a CDR. **Exclusion:** Any EP meeting at least one of the following criteria may be excluded from the CDR reporting measure if the EP— (1) Does not diagnose or directly treat any disease or condition associated with a CDR in their jurisdiction during the PI reporting period; (2) Operates in a jurisdiction for which no CDR is capable of accepting electronic registry transactions in the specific standards required to meet the CEHRT definition at the start of the PI reporting period; or (3) Operates in a jurisdiction where no CDR for which the eligible hospital or CAH is eligible has declared readiness to receive electronic registry transactions as of six months prior to the start of the PI reporting period.

References:

- Centers for Medicare & Medicaid Services. "Medicaid Promoting Interoperability Program Eligible Professionals Objectives and Measures for 2020." Accessed July 16, 2020. https://www.cms.gov/files/document/medicaid-ep-2020-table-contents.pdf
- Centers for Medicare & Medicaid Services. *CY 2019 Medicare Hospital Inpatient Prospective Payment Systems (IPPS) Final Rule*. Last modified November 23, 2018. Accessed January 29, 2019. https://www.federalregister.gov/documents/2018/11/23/2018-24170/medicare-program-revisions-to-payment-policies-under-the-physician-fee-schedule-and-other-revisions.
- Centers for Medicare & Medicaid Services. "2020 Program Requirements Medicaid." Last modified April 10, 2020. https://www.cms.gov/regulations-guidance/promoting-interoperability/2020-program-requirements-medicaid
- Wisconsin Department of Health Services. "Wisconsin High-Priority Electronic Clinical Quality Measures," Last modified September 2019. https://www.dhs.wisconsin.gov/publications/p02315.pdf.
- Wisconsin Department of Health Services. "Information for Eligible Professionals Regarding Program Year 2020 of the Wisconsin Medicaid Promoting Interoperability Program," ForwardHealth Update, no 2020-23 (May 2020), https://www.forwardhealth.wi.gov/kw/pdf/2020-23.pdf
- Wisconsin Department of Health Services. "Information for Eligible Professionals Regarding Program Year 2021 of the Wisconsin Medicaid Promoting Interoperability Program," ForwardHealth Update, no 2020-33 (July 2020), https://www.forwardhealth.wi.gov/kw/pdf/2020-33.pdf.