MedInformatix Quarterly Newsletter

May 2017

Contents

THE QPP IS HERE

MedInformatix is committed to helping you understand the ongoing changes resulting from the Quality Payment Program. Here is a review of the basics:

Who is in the QPP?

- Physician
- Physician Assistant
- Nurse Practitioner
- Clinical Nurse Specialist
- Certified Registered Nurse Anesthetist

Exemptions:

- Medicare Part B payments < $30,000 and < 100 patients
- Eligible Providers in the first year of Medicare participation
- Clinicians participating in an approved Advanced APM, which for MedInformatix customers, will likely be the Comprehensive Primary Care + or Next Generation ACOs.

Who is in the QPP?

Pick Your Pace:

- **OPTION 1**: Submit some data to the Quality Payment Program and avoid a negative payment adjustment.
- **OPTION 2:** Report for 90 days. While the proposed reporting period is a full year (Jan. 1- Dec. 31), providers can report for a 90-day period in 2017 and still receive a small positive payment adjustment.
- **OPTION 3:** Providers can participate in the program through the entire year.
- **OPTION 4:** Skip reporting altogether and participate in an advanced alternative payment model (APM), for which very few providers will qualify. Those that do will be eligible for the full payment bonus of up to 5%.
- If you DO NOTHING: automatic 4% penalty

How will my score be determined?

Providers will receive an annual composite score of 0-100 points based on three weighted performance categories.

Please refer to our MACRA: What You Need To Know About MIPS in 2017 and 2018 webinar for more details (Recording | Slides).

What are the categories and what do they consist of?

1. **Quality Measures- Category Weight: 60%**

   Most participants: Report up to 6 quality measures, including an outcome measure, for a minimum of 90 days.

   Groups using the web interface: Report 15 quality measures for a full year.

   Groups in APMs qualifying for special scoring under MIPS, such as Shared Savings Track 1 APM or the CPC+APM: Report quality measures through your APM. You do not need to do anything additional for MIPS quality.

   IMPORTANT: This category reports using all patients, not just Medicare.

Please refer to our QPP: Quality Measures and MedInformatix webinar for more details (Recording | Slides) and visit the CMS QM Selection Tool.

2. Advancing Care Information- Category Weight: 25%

Fulfill the required measures for a minimum of 90 days:

- Security Risk Analysis
- e-Prescribing
- Provide Patient Access
- Send Summary of Care
- Request/Accept Summary of Care

Choose to submit up to 9 measures for a minimum of 90 days for additional credit.
For bonus credit, you can:

- Report Public Health and Clinical Data Registry Reporting measures
- Use certified EHR technology to complete certain improvement activities in the improvement activities performance category

OR
You may not need to submit advancing care information if these measures do not apply to you.
In 2017, there are two measure set options for reporting. MedInformatix users will use:

- **Option 2**: 2017 Advancing Care Information Transition Objectives and Measures

You can report the 2017 Advancing Care Information Transition Objectives and Measures:

- If you have technology certified to the 2014 Edition (v7.6); or
- If you have a combination of technologies from 2014 (v7.6) and 2015 Editions (v7.7).

Please refer to our QPP: Advancing Care Information and MedInformatix v7.6 webinar for more details (Recording | Slides) and the CMS ACI Selection Tool.

3. Clinical Practice Improvement Activity- Category Weight: 15%

Most participants: Attest that you completed up to 4 improvement activities for a minimum of 90 days.

Groups with fewer than 15 participants or if you are in a rural or health professional shortage area: Attest that you completed up to 2 activities for a minimum of 90 days.

Participants in certified patient-centered medical homes (PCMH), comparable specialty practices, or an APM designated as a Medical Home Model: You will automatically earn full credit.

Participants in certain APMs under the APM scoring standard, such as Shared Savings Program Track 1: You will automatically receive points based on the requirements of participating in the APM. For all current APMs under the APM scoring standard, this assigned score will be full credit. For all future APMs under the APM scoring standard, the assigned score will be at least half credit.

Note: Some of these activities can ONLY be reported via the EHR.

Please refer to our QPP: Selecting Appropriate Improvement Activities webinar for more details (Recording | Slides) and the CMS IA Selection Tool.

Can MedInformatix help me determine my score?

For help understanding the impact of varying scores in each of these categories on your final performance, please refer to our QPP: Summing It All Up webinar (Recording | Slides).

What's next for the QPP?

For an update on the state of Health IT in the future, register for our Mid-Year Update on the QPP webinar.

AT MEDINFORMATIX

Current Version

MedInformatix Complete EHR v7.6.7.20 – the eighth maintenance release to Q4/Winter 2016 version For specific bug fixes, please visit MICentral.

ONC Update:

Clinicians can now use an interactive tool on the CMS QPP website to determine if they should participate in the MIPS track of the QPP in 2017. To determine your status, enter your national provider identifier (NPI) into the entry field on the tool, which will yield information on whether or not you should participate in MIPS this year and where to find additional resources.

Note to our Radiology Customers: This tool DOES NOT indicate whether or not your status is Patient Facing or Non-Patient Facing. CMS plans to make that information available via a new URL this summer. They WILL NOT include this information in their MIPS participation letters.

Please see MICentral for more detailed updates regarding the announcements from CMS.

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MISummit 2017

Save the Date- The MedInformatix Summit 2017 will be September 19th through 22nd in San Diego, CA! New this year- Introducing redesigned, interactive sessions.

Stay tuned for registration information.

QPP Webinar Series:

We have recently concluded our QPP webinar series, which began February 16th and ended April 6th. This five-part series covered what you need to know about MIPS in 2017 and 2018, focusing on various components including ACIs, QMs, AIs, etc. To access the full recordings and other materials from these webinars, please visit the MICentral Webinars page.

Upcoming Webinars:

Mid-Year Update on the QPP

MI discusses how any changes to healthcare information technology at the midpoint of 2017 might affect you.

10am PDT | Thursday, May 18 — Register now

Secrets of Payer Payment Automation

See how an automated payer payment workflow can provide optimal results and help you get clear insight into your cash flow. In this webinar you'll learn how you can:
- Reduce AR days by speeding up workflow
- Reduce manual reconciliation and automatically increase the matching of your remits and payments
- Streamline payment posting by eliminating paper and automating reconciliation to provide a clear depiction of cash flow
- Decrease audit risk and manual errors
- Distribute remits across shared systems to increase productivity and accuracy

10am PDT | Wednesday, May 24 — Register now

Introducing ELIXIR- your one-stop solution for Registry Reporting

MedInformatix ELIXIR is the gateway to effective MIPS and APM reporting. The MedInformatix ELIXIR interface links your MedInformatix EHR to any of **more than 20 registries**. When your practice connects with a registry through ELIXIR, it streamlines the reporting process and allows practitioners to go beyond quality measures.

Registration opens April 17, 2017. Please contact clientrelations@medinformatix.com for questions and cost information.

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WHAT'S NEW AT ZIRMED

ZirMed recently launched an update to their Medicare FISS Emulator that improves the overall speed of claims and eligibility processing. Best of all, you can use ZirMed's award-winning RCM solutions from within MedInformatix's Software solutions. Now you can:

- Have easy access to edit, correct, adjust, or cancel Medicare Part A (Institutional) billing transactions, or inquire about beneficiary eligibility and the status of claims.
- Enjoy direct access to the Medicare FISS system from your MedInformatix application without having to log into the ZirMed portal.
- Create and save bookmarks to access the sessions you need the most.
- Enjoy the flexibility of having simultaneous sessions open.
- Take advantage of full-size, easy-to-view screens.
- Leverage screen capture and print capability to capture FISS DDE screen prints to print at a later time.
- Improve overall staff efficiency by providing direct access to the Medicare FISS system with saved user logins.
- Have the ability to maintain just one contract instead of both a claims management contract and a contract for Medicare FISS access.

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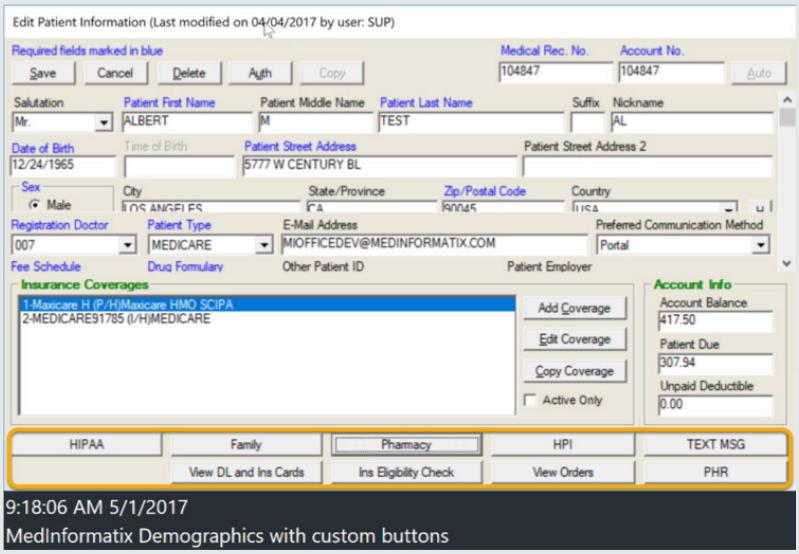
MEDINFORMATIX TIPS

Effectively Using Custom Demographics Buttons

Did you know that for established patient accounts, you can display up to 10 custom buttons at the bottom of the Demographics screen? Here are some ideas about how to use them:

1. View driver's license and insurance cards using the Document Collection
2. Quickly access the Family History
3. Update the patient's Preferred Pharmacy

If you are not using these buttons today and would like to, please contact your support department.



9:18:06 AM 5/1/2017
MedInformatix Demographics with custom buttons

Sharing Information Without Revealing PHI.

Unintentional sharing of PHI with an unauthorized party is still considered a breach of HIPAA law. However, sometimes you need to share information with someone that might include PHI. How can you safely do that? Use a screenshot tool like SnagIt (commercial software) or Greenshot (free, open-source software) to redact or blur the PHI before you include it in an e-mail or other correspondence. Here's an example of using a blurred text tool to remove PHI from a screenshot, where you just want to convey a list of account numbers, for instance:

	Patient Name	Note	Status	Sex	DOB	Account	MR No.	Time Stamp
1			Y			090055	90055	01/05/17 14:04
2			Y			067881	67881	01/06/17 10:47
3			Y			083763	83763	01/06/17 10:47
4			Y			105447	105447	01/09/17 13:56
5			Y			080718	80718	01/09/17 15:50
6			Y			081263	81263	01/10/17 09:23
7			Y			075980	75980	01/10/17 09:24
8			Y			089633	89633	01/10/17 13:46

Controlling VIP Access at the Patient Account Level

Do you use VIP account settings to restrict access to VIP patients? Typically, this is done by setting the Patient Classification to VIP in Demographics, and then all users with VIP account access are able to open the chart. Less known is the account-level action property #VIP, that allows a person with the appropriate rights to set access to a single patient account *for specified users.*

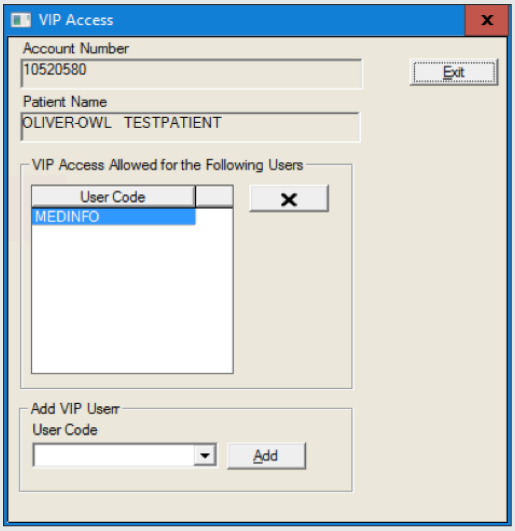


Figure 1 - The action property #VIP opens the VIP Access screen.

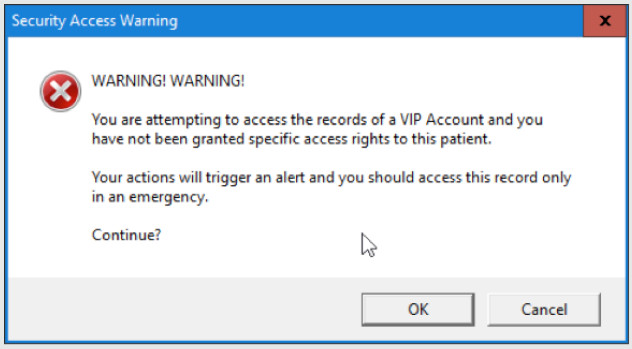


Figure 2 - A user with general VIP rights who hasn't been granted access to a specific account receives this warning.

UPCOMING EVENTS

SIIM 2017
6/1- 6/3
David L. Lawrence Convention Center
Pittsburgh, PA

AHRA Booth #102
7/10 - 7/12 (exhibit days)
Anaheim Convention Center
Anaheim, CA

MISUMMIT2017
9/19 - 9/22
San Diego, CA

FUN BOX: EMPLOYEE SPOTLIGHT OF THE QUARTER

Name: Richard Chen | Role at MI: Web Developer

Typical workday for Richard:
- Richard starts his day around 8am with a Red Bull.

- Then he checks messages and works on various tasks and projects until lunch, which consists of "the finest gourmet cuisine, as prepared by personal chef, served by butler".

- After lunch, he continues working on projects and does research on new technologies.

Favorite aspect of his job: Richard's two favorite aspects are all the great people he works with and the view overlooking the runways of LAX.

Favorite color: Black

Favorite movie: Ocean's Eleven

Favorite book: The Killing Joke by Alan Moore

Favorite hobby: Working on projects with friends and "skipping stones across the creek and thinking about life as the sun sets"

Favorite place to vacation: Amsterdam

Fun fact: Richard can hold his breath "for like a really long time".

Questions? Comments?
Contact us.

Connect with us on LinkedIn.

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