



THE KHIE CONNECTION

Volume 2, Issue 6 April 13, 2015

Welcome to the Kentucky Health Information Exchange Newsletter!



Quick Stats:

As of April 13, 2015:

- ⇒ KHIE has 743 signed participation agreements, representing 2,817 locations
- ⇒ A total of 1,033 provider locations, are submitting live data and exchanging information (see [page 6](#) for more details)
- ⇒ 90% of acute care hospitals in KY, are live on KHIE
- ⇒ \$186, 401,143.62 has been paid to Medicaid hospitals and providers in KY, through the KY Medicaid EHR Incentive Program
- ⇒ KHIE averages over 250,000 queries per week

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Did You Know?

The [notice of proposed rule making \(NPRM\) for Stage 3 Meaningful Use](#) and the [2015 Edition Health IT Certification Criteria](#) was released on March 20, 2015. KHIE is collaborating with key partners via the KY Collaborative MU Workgroup and will submit our comments to CMS by the May 29, 2015 deadline. We are asking for input from our stakeholders as well. For more information on how you can get involved, please visit [page 5](#)!

A Message from the State Health IT Coordinator **Polly Mullins-Bentley**



Greetings from the Kentucky Health Information Exchange! In case you missed it, the notice of proposed rule making (NPRM) for Meaningful Use Stage 3 was released at the end of March, along with the 2015 Edition Health IT Certification Criteria. As the state health IT coordinator, it is my duty to convene key partners, (KY Regional Extension Center, Northeastern Kentucky Regional Health Information Organization, QSource, HealthBridge, and the KY Medicaid EHR Incentive Program) and stakeholders across the state to discuss and collectively

comment on the NPRM. To learn more about how we will be requesting your input, please visit [page 5](#)— and I encourage all to submit your comments by May 29, 2015.

I would also like to touch on some of the initiatives that are going on within the Cabinet. When I first came to the Cabinet for Health and Family Services, I quickly realized how interconnected the Cabinet is and I also learned that KHIE would not only work closely with other departments/divisions, but would be at the table at several statewide initiatives. This is something that I'm exceptionally thankful for— several states unfortunately, don't have this same luxury. It's been a blessing to be at the forefront of projects that look toward enhancing the patient experience across the continuum of care. Our direct interfaces with the Departments for Medicaid and Public Health exemplify that synergistic and symbiotic relationship.

Recently, KHIE has become actively engaged in the State Innovative Model (SIM) planning grant. This project, among others, aims to better KY's health rankings through various public health efforts, with the goal of enriching overall health outcomes while reducing unnecessary healthcare expenditures and improving population health. Please visit [page 3](#), to learn more about this initiative.

Leveraging programs across the state has truly allowed for a cooperative relationship between KHIE and the Cabinet. I look forward to expanding the HIE into several facets within the Cabinet while continuing to build a robust exchange for the patients of Kentucky, with the ultimate goal of advancing interoperability in this state and beyond. Thank you again for your hard work!

Sincerely,

Polly

Polly Mullins-Bentley, RN, RHIT, CPHQ
State Health I.T. Coordinator

State Innovation Model (SIM) Grant

On Dec. 16, 2014, the Kentucky Cabinet for Health and Family Services received a \$2 million State Innovation Model (SIM) design grant from the Center for Medicare and Medicaid Innovation (CMMI) of the Centers for Medicare and Medicaid Services. The SIM initiative was created for states committed to population health improvement through planning, designing, testing and supporting evaluation of new payment and service delivery models. The objective of Kentucky’s SIM model design grant is to engage a diverse group of stakeholders, including public and commercial payers, providers, advocacy groups, employers and consumers, to develop a state health system innovation plan. Please see the figures below regarding the components of a SIM Model Design and Kentucky’s Goals for Service Delivery Reform.

Components of a SIM Model Design



CMS requires a State Health System Innovation Plan – also referred to as the “Model Design” – as the final deliverable for a SIM Model Design grant.



Components of a successful Model Design

Kentucky’s Goals for Service Delivery Reform



Kentucky has established three primary goals related to health care delivery transformation.

<p>Increase Access</p> <p><i>Significantly increase access in rural and urban underserved areas, with a focus on primary care and preventive services</i></p>	<ul style="list-style-type: none"> • Maximize use of local resources to help individuals entering and navigating the health care system • Assess workforce needs strategically by leveraging existing state-level, multi-stakeholder efforts • Craft delivery options from a consumer service and convenience perspective
<p>Increase Integrated & Coordinated Care</p> <p><i>Increase population whose care is delivered through integrated and coordinated care models. Patient-centered care should be the rule, not the exception</i></p>	<ul style="list-style-type: none"> • Leverage effective models that are currently in place in KY • Identify regulatory measures and economic incentive structures • Explore how workforce measures can support these goals • Determine impact of consolidation in delivery system • Emphasize prevention and wellness
<p>Expand HIT Infrastructure</p> <p><i>Expand HIT infrastructure to enable more efficient and accessible care delivery</i></p>	<ul style="list-style-type: none"> • Optimize technologies that support effective communication • Develop appropriate databases to support availability and use of actionable data • Design and track metrics that reflect actual clinical outcomes • Offer cost and outcome transparency

Please visit <http://chfs.ky.gov/ohp/sim/> to learn more about the SIM initiative in Kentucky.

Kentucky Medicaid EHR Incentive Program

IMPORTANT DATES

Eligible Professionals:

- ⇒ **January 1, 2015** – Reporting year begins for Program Year 2015.
- ⇒ **March 20, 2015** – Last day to switch programs.
- ⇒ **April 1, 2015** – First day to attest for Meaningful Use to receive an Incentive payment for Calendar Year (CY) 2015.
- ⇒ **April 30, 2015** – Last day to attest to receive an Incentive Payment for Calendar Year (CY) 2014.
- ⇒ **July 1, 2015** – Last day to submit Hardship Exception applications for 2016 Medicare Payment Adjustment.
- ⇒ **November 30, 2015** – Last day to submit Hardship Exception applications for 2016 Medicare Payment Adjustment.
- ⇒ **December 31, 2015** – Last day of the Calendar Year (CY). Reporting year ends.
- ⇒ **2016** – Last year to initiate participation in Medicaid EHR Incentive Program.
- ⇒ **2021** – Last year to receive Medicaid EHR incentive payment.

Eligible Hospitals and CAHs:

- ⇒ **January 1, 2015** – First day to attest for Meaningful Use to receive an Incentive payment for Federal Fiscal Year (FFY) 2015.
- ⇒ **March 20, 2015** – Last day to switch programs.
- ⇒ **April 1, 2015** – Last day to submit Hardship Exception applications for 2016 Medicare Payment Adjustment.
- ⇒ **September 30, 2015** – Last day of the Federal Fiscal Year (FFY). Reporting year ends for Program Year 2015.
- ⇒ **October 1, 2015** – Reporting year begins for Program Year 2016.
- ⇒ **December 31, 2015** – Last day to attest to receive an Incentive Payment for Federal Fiscal Year (FFY) 2015.
- ⇒ **2016** – Last year to initiate participation in Medicaid EHR Incentive Program.
- ⇒ **2021** – Last year to receive Medicaid EHR incentive payment.

Contact Us:

The Kentucky Medicaid EHR Incentive Program team may be contacted in the event of questions or issues. Office hours are Monday through Friday 8:00 am to 5:00 pm. Email us at EHRIncentives@ky.gov, ask questions or describe issues through the Issues/Concerns section within the attestation website or call us at 502-564-0105 extension 2480.

Stage 3 Notice of Proposed Rulemaking

About the NPRM

The CMS NPRM specifies the Stage 3 requirements for eligible professionals, eligible hospitals, and critical access hospitals in the EHR Incentive Programs. ONC's proposed rule outlines the certification and standards to help providers meet the proposed Stage 3 requirements with EHR technology certified to the 2015 Edition.

If finalized, the rules would allow providers more flexibility for reporting by:

- Establishing a single, aligned reporting period for providers based on the calendar year
- Aligning quality data for reporting via a single submission method for multiple CMS programs
- Simplifying meaningful use reporting requirements to eight objectives that focus on advanced use of EHR technology and quality improvement

The Stage 3 proposed rule's scope is limited to the requirements and criteria for meaningful use in 2017 and beyond. CMS is pursuing additional changes to meaningful use beginning in 2015 through separate rulemaking.

KHIE will hold an *Update* call on Thursday, May 7, 2015 at 2:00pm EST and will use this forum to gather comments on the NPRM with our key partners. Please find the meeting logistics below. Please submit your comments to CMS as well by May 29, 2015.

How to Submit Comments

1. Electronically

You may submit electronic comments to <http://www.regulations.gov>. Follow the "Submit a comment" instructions.

- o By regular mail
- o By express or overnight mail

By hand or courier

Submissions must be received by **11:59 pm ET on May 29, 2015** in order to be considered.

[Join the meeting.](#)

Audio Information

Conference Call: 866-904-6912 Access code: 956235

First Time Users:

To save time before the meeting, [check your system](#) to make sure it is ready to use Microsoft Office Live Meeting.

Troubleshooting

Copy this address and paste it in your web browser:

<https://www.livemeeting.com/cc/cc-chfs/join>

Copy and paste the required information: Meeting ID: MRM59M

Entry Code: xz\Q2mp+Z

Location: <https://www.livemeeting.com/cc/cc-chfs>



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EHR Incentive Program
Eligible providers and hospitals may qualify for monetary incentives.
[Learn More](#)



Meaningful Use
Learn more about how KHIE can support your Meaningful Use efforts.
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Hot Topics

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HHS Announces Proposed Rules on Sta...

Monday, March 23, 2015
CMS and ONC release NPRMs on stage 3 requirements and 2015 edition certification criteria

2015 eHealth Summit

Save the date for the [2015 Kentucky eHealth Summit](#) Sept. 30.

Get Started

Make the KHIE connection. KHIE outreach coordinators can help you [get started](#).

Providers submitting live data to KHIE



[Select a county from the map to find out who is connected to the KHIE and submitting live data.](#)

Contact Us

Are you a health care provider, hospital or other organization ready to connect to KHIE? Do you have questions, comments or need more information about the program? [Fill out this form to contact KHIE.](#)



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