

### Medicare & Medicaid EHR Incentive Programs

HIT Policy Committee February 10, 2015





### Rulemaking Intent Announcement

- On Jan. 29, CMS announced its intent to engage in rulemaking this spring
- CMS is considering the following changes:
  - Shortening 2015 reporting period to 90 days
  - Realigning hospital reporting to calendar year
  - Modifying other aspects of programs to match goals, reduce complexity, lessen reporting burden
- See Dr. Conway's blog on <a href="http://blog.cms.gov/">http://blog.cms.gov/</a>



### 2015 EP Payment Adjustments

Payment Adjustment Amount	EPs	PERCENT			
<b>\$1 - \$250</b>	87,000	34%			
\$250 - \$1,000	55,000	21%			
\$1,000 - \$2,000	36,000	14%			
\$2,000+	78,000	31%			

N=256,000 EPs currently subject to 2015 payment adjustments



### **Registration and Payment Data**

## (ZFR) INCENTIVE PROGRAM

#### **Active Registrations thru December 2014**

	December-14	Program-to-Date
Medicare Eligible Professionals	2,130	339,991
Doctors of Medicine or Osteopathy	1,802	298,998
Dentists	(1)	433
Optometrists	123	15,868
Podiatrists	37	10,004
Chiropractors	169	14,688
Medicaid Eligible Professionals	2,589	169,259
Physicians	1,400	108,966
Certified Nurse-Midwives	46	3,485
Dentists	368	18,791
Nurse Practitioners	669	34,909
Optometrists	44	329
Physicians Assistants	62	2,779
Hospitals	12	4,801
Medicare Only	(6)	236
Medicaid Only	0	159
Medicare/Medicaid	18	4,406
Total	4,731	514,051



#### **Program Payments thru December 2014**

	nount Paid Program Year	mount Paid 2 Program Year	mount Paid 3 Program Year	nount Paid Program Year	ount Paid rogram Year	mount Paid am - To - Date
Medicare Eligible Professionals	\$ 979,666,454	\$ 2,879,387,560	\$ 2,573,918,372	\$ 433,802,880	\$ _	\$ 6,866,775,266
Doctors of Medicine or Osteopathy	\$ 869,606,164	\$ 2,605,745,259	\$ 2,315,662,323	\$ 392,784,000	\$ -	\$ 6,183,797,745
Dentists	\$ 757,738	\$ 2,256,298	\$ 2,041,322	\$ 341,040	\$ -	\$ 5,396,399
Optometrists	\$ 39,019,045	\$ 116,918,376	\$ 105,145,995	\$ 11,912,880	\$ -	\$ 272,996,295
Podiatrists	\$ 51,783,860	\$ 97,193,161	\$ 75,442,582	\$ 12,916,400	\$ -	\$ 237,336,003
Chiropractors	\$ 18,499,648	\$ 57,274,466	\$ 75,626,150	\$ 15,848,560	\$ -	\$ 167,248,824
Medicaid Eligible Professionals	\$ 1,048,057,617	\$ 1,197,571,527	\$ 1,055,936,363	\$ 146,270,517	\$ -	\$ 3,447,836,024
Certified Nurse-Midwives	\$ 23,545,000	\$ 24,076,250	\$ 22,074,500	\$ 2,826,250	\$ -	\$ 72,522,000
Dentists	\$ 55,930,000	\$ 109,861,084	\$ 107,599,500	\$ 29,533,250	\$ -	\$ 302,923,834
Nurse Practitioners	\$ 172,139,173	\$ 198,417,170	\$ 214,209,592	\$ 33,490,003	\$ -	\$ 618,255,938
Optometrists	\$ -	\$ 8,500	\$ 1,195,667	\$ 497,250	\$ -	\$ 1,701,417
Physicians	\$ 782,928,444	\$ 852,275,774	\$ 698,179,354	\$ 77,968,764	\$ -	\$ 2,411,352,335
Physicians Assistants	\$ 13,515,000	\$ 12,932,750	\$ 12,677,750	\$ 1,955,000	\$ -	\$ 41,080,500
Eligible Hospitals & CAHs	\$ 3,176,726,188	\$ 5,580,538,314	\$ 6,226,386,660	\$ 2,427,104,158	\$ 1,594,619	\$ 17,412,349,938
Medicare Only	\$ 113,391,424	\$ 230,951,586	\$ 229,158,360	\$ 94,727,361	\$ -	\$ 668,228,732
Medicaid Only	\$ 129,581,442	\$ 108,030,594	\$ 116,237,044	\$ 20,470,367	\$ 1,594,619	\$ 375,914,066
Medicare/Medicaid	\$ 2,933,753,322	\$ 5,241,556,133	\$ 5,880,991,255	\$ 2,311,906,429	\$ -	\$ 16,368,207,139
Medicare Advantage Organizations For Eligible Professionals	\$ 180,106,590	\$ 134,773,289	\$ 91,873,828	\$ -	\$ -	\$ 406,753,707
Total	\$ 5,384,556,849	\$ 9,792,270,690	\$ 9,948,115,223	\$ 3,007,177,555	\$ 1,594,619	\$ 28,133,714,935



#### **2014 Attestation Data**



### 2014 Attestations thru February 1, 2015

- EPs successfully attested for 2014 127,815
  - New participants (Program Year 1) 25,312
  - Attested to Stage 1 91,033
  - Attested to Stage 2 36,782
  - Scheduled to attest to Stage 2 (Program Year 3 and beyond) – 71,519



### 2014 Attestations thru February 1, 2015

- Hospitals successfully attested for 2014 4,090
  - New participants (Program Year 1) 304
  - Attested to Stage 1 2,275
  - Attested to Stage 2 1,815
  - Scheduled to attest to Stage 2 (Program Year 3 and beyond) – 2,389

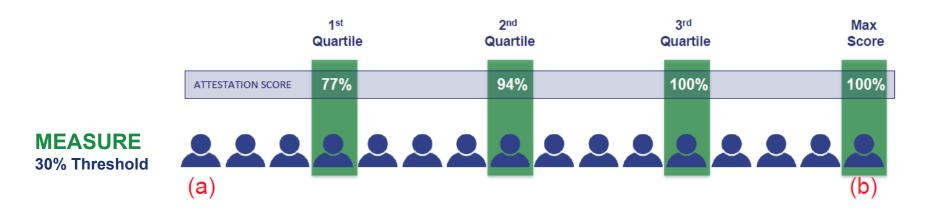


### 2014 Hospital Attestation Data through December 31, 2014



#### **How to Read Performance Scores**

Imagine all the providers that attested for a measure standing in line from lowest to highest score ...



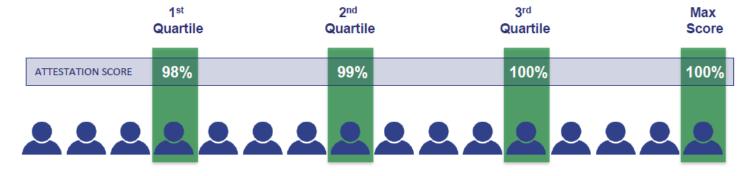
- The attester at position (a) has the lowest score; the one at position (b) has the highest.
- We then look at four points to give an idea of score ranges: the attester at the "top" of the first 25% (1st Quartile), the one at 50% (2nd Quartile or "median"), the one at 75% (3rd Quartile) and the attester with the best possible score ("Max Score").
- Each measure has a passing score, or "threshold". In the example above, it is 30%.
- Looking at the first sample point 1<sup>st</sup> Quartile we see the attester has scored 77% well over the threshold to "pass" the measure.

  All scores beyond that 2<sup>nd</sup> Quartile, 3<sup>rd</sup> Quartile and Max Score also pass again by large margins.

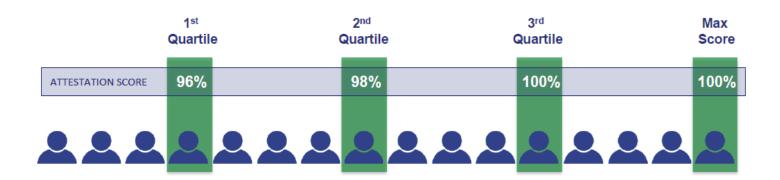
## Stage 2 EH Core Performance

#### **Hospital Stage 2 Core Measures**

RECORD
DEMOGRAPHICS
80% Threshold

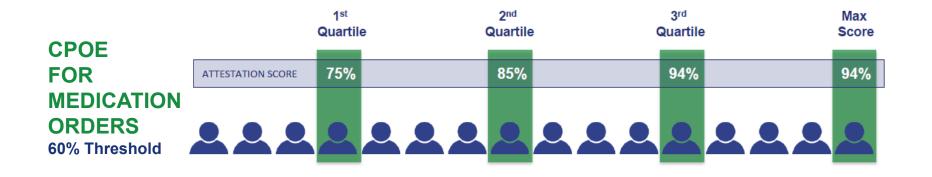


RECORD VITAL SIGNS 80% Threshold

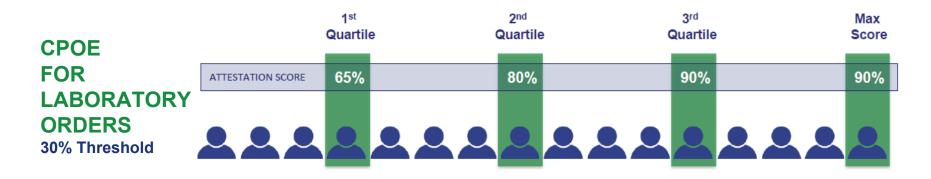




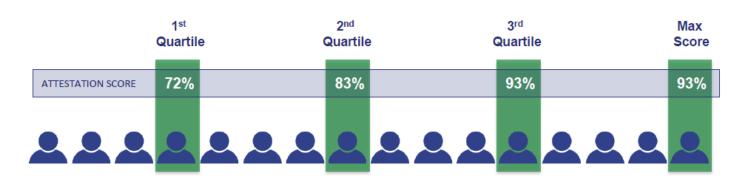






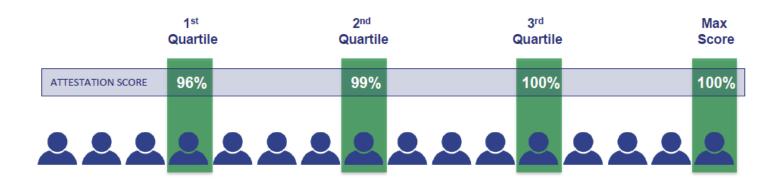


CPOE FOR RADIOLOGY ORDERS 30% Threshold

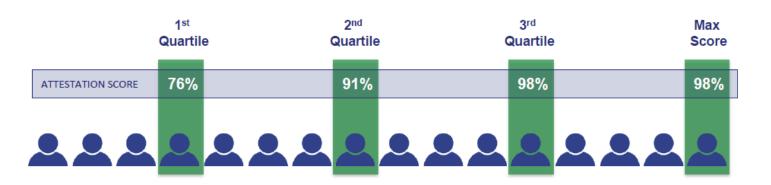




CLINICAL LAB-TEST RESULTS 55% Threshold

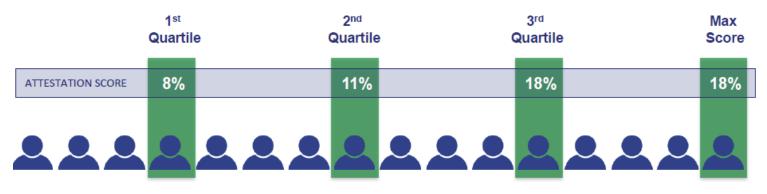


PATIENT ELECTRONIC ACCESS (MEASURE 1) 50% Threshold

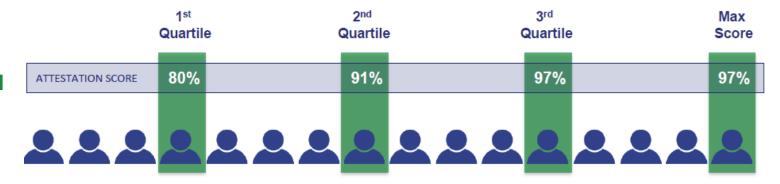




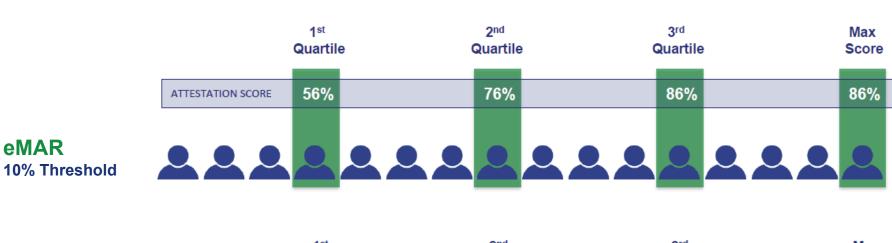
PATIENT
ELECTRONIC
ACCESS
(MEASURE 2)
5% Threshold



MEDICATION RECON-CILIATION 50% Threshold





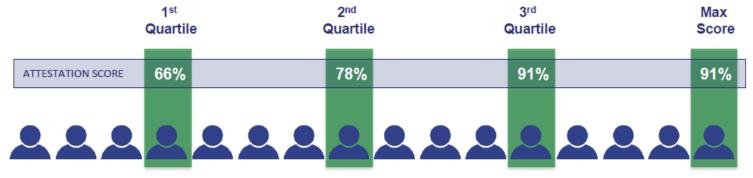


PATIENT-SPECIFIC EDUCATION RESOURSES 10% Threshold









SUMMARY OF CARE (MEASURE 2) 10% Threshold

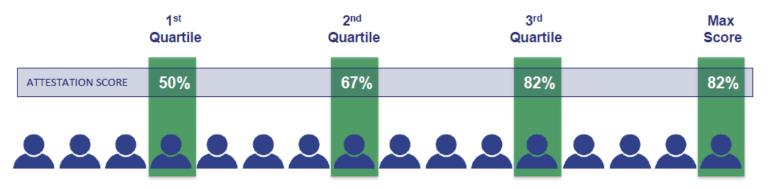


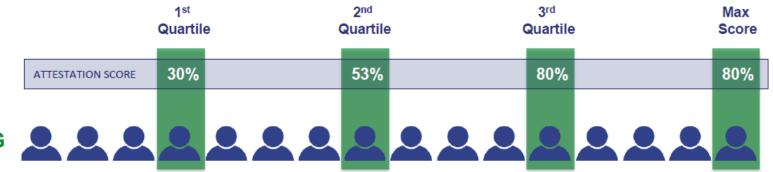






FAMILY
HEALTH
HISTORY
20% Threshold

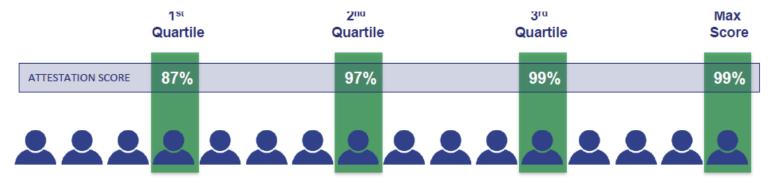




ePRESCRIBING 10% Threshold









### For questions, please contact:

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