



**CHCANYS** DEFINING NEW DIRECTIONS  
Community Health Care Association of New York State

**NYS-HCCN Office Hours:**  
***Meaningful Use for Dental***  
***Providers in 2017-2018***

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# CMS Updates

90-day reporting period in Calendar Year 2018 for both core objectives and clinical quality measures (CQMs)

Option to attest to Modified Stage 2 objectives in 2018 using 2014, 2015, or a combination of both 2014 and 2015 Certified EHR Editions (Stage 3 will be mandatory for Calendar Year 2019)

Requirement to attest to six (6) CQMs for Calendar Year 2017 as opposed to the previously required nine (9)

For eCW users, eligible providers can use either the 2014 (eCW V10) or the 2015 (Next eCW version/patch) Certified EHR Edition



Registration Checklist

NPI

- Ensure that your providers all have a valid NPI

FFS

- All providers must be enrolled in Fee for Service (FFS), not OPRA

ETIN

- All providers must have an active ETIN linkage (either group or individual)

CMS  
Registration

- All providers will need to complete their CMS registration before attesting in MEIPASS

ePACES

- Ensure that all providers have an active ePACES account

I&A

- If you are attesting as a group, ensure that you have an active Identity and Access account to attest on your provider's behalf

*\*Please note that in order to attest for Payment Year 2016, payment must have been received for Payment Year 2015*



**How do I attest?!**



# Protect Patient Health Information

Provider must conduct or review a security risk analysis and address the security of ePHI (including encryption), and implement security updates as necessary and correct identified security deficiencies

No exclusions



# Clinical Decision Support (CDS)

**Measure 1:** Implement five clinical decision support interventions related to four or more CQMs at a relevant point in patient care for the entire EHR reporting period

**Measure 2:** The EP has enabled and implemented the functionality for drug-drug and drug-allergy interaction checks for the entire EHR reporting period

No exclusions, however dental clinical decision support rules are not required for this objective



# Computerized Provider Order Entry (CPOE)

**Measure 1:** Over 60% of medication orders created by the EP during the EHR reporting period are recorded using CPOE

**Measure 2:** Over 30% of laboratory orders created by the EP during the EHR reporting period are recorded using CPOE

**Measure 3:** Over 30% of diagnostic imaging orders created by the EP during the EHR reporting period are recorded using CPOE

**Measure 1:** Dental providers may be exempt from Measure 1 if they write less than 100 prescriptions during the reporting period

**Measure 2:** Dental providers may be likely to claim an exclusion for Measure 2

**Measure 3:** Dental providers may be likely to claim an exclusion for Measure 3

# Electronic Prescribing (eRX)

Over 50% of permissible prescriptions written by the EP are queried for a drug formulary **and** transmitted electronically using CEHRT

Dental providers may be exempt if less than 100 prescriptions were written during the reporting period





# Health Information Exchange

An EP transitioning or referring their patient to another setting of care must use their CEHRT to create a summary of care record and electronically transmit the summary to the receiving provider for at least 10% of patients seen during the reporting period

Dental providers may be exempt if they transition or refer less than 100 patients to another setting of care during the reporting period



# Patient Specific Education

Clinically relevant patient specific education resources identified by the CEHRT are provided to at least 10% of patients

Dental providers may be exempt if they had no patient encounters during the reporting period



# Medication Reconciliation

An EP performs medication reconciliation for at least 50% of patients transferred into their care

Dental providers may be exempt if they were not the recipient of any transitions of care during the reporting period



# Patient Electronic Access (VDT)

**Measure 1:** An EP must provide at least 50% of their patients with timely access to view online, download, and transmit to a third party their health information within four business days

**Measure 2:** At least 5% of patients must view online, download, or transmit their health information to a third party\*

Dental providers may be exempt if they neither order or create any of the information listed for inclusion as part of the measures

*\*This threshold reflects requirements for 2017/2018 requirements. The threshold for 2016 for Measure 2 is only 1 patient.*

# Patient Electronic Access (VDT) cont'd

Information that needs to be included in the information posted on the portal:

- o Patient name
- o Provider's name and office contact information
- o Current and past problem list
- o Procedures
- o Laboratory test results
- o Current medication list and medication history
- o Current medication allergy list and medication allergy history
- o Vital signs (height, weight, blood pressure, BMI, growth charts)
- o Smoking status
- o Demographic information (preferred language, sex, race, ethnicity, date of birth)
- o Care plan field(s), including goals and instructions
- o Any known care team members including the primary care provider (PCP) of record



# Secure Messaging

A secure message was sent using the electronic messaging function of CEHRT to at least 5% of patients, or in response to a secure message sent by the patient\*

Dental providers may be exempt if they had no patient encounters during the reporting period

*\*This threshold reflects requirements for 2017/2018 requirements. The threshold for 2016 is only 1 patient.*



# Public Health Reporting

A provider must be in active engagement with 2 of the 3 following registries:

- Immunization Registry Reporting
- Syndromic Surveillance Reporting
- Specialized Registry Reporting

Dental providers may exclude from registries that are outside of their scope of practice. They may also exclude from a registry if they operate in a jurisdiction for which no registry is capable of accepting data, or if the registry has not declared readiness to accept data

# CPCI and Dental Providers

- CPCI can be used as a specialized registry (Objective 10 Measure 3)
  - If you are interested in receiving a letter of engagement for using CPCI as a specialized registry, reach out to Amy Freiman ([Afreiman@chcanys.org](mailto:Afreiman@chcanys.org))
- In order to pull dental reports from CPCI, charge codes in your center's billing system must be entered correctly
- Reports available in CPCI for dental providers:
  - Dental CQMs
  - UDS Dental CQMs





# Available Dental Reports in CPCI



Scorecard ⓘ

Centers

2017

Centers

- ★ Favorites
  - MU Dental CQMs**
  - Child Dental Decay or Cavities
  - Primary Caries Prevention Intervention
- 📅 Visit Planning
  - MU Asthma CQMs
  - MU Diabetes CQMs
  - MU General Practice CQMs
  - MU Heart CQMs
  - MU HIV CQMs
  - MU Immunization CQMs
  - MU Objectives
- 📊 Dashboards
  - UDS 2017 CQMs
  - UDS Dental CQMs**
  - UDS Legacy CQMs



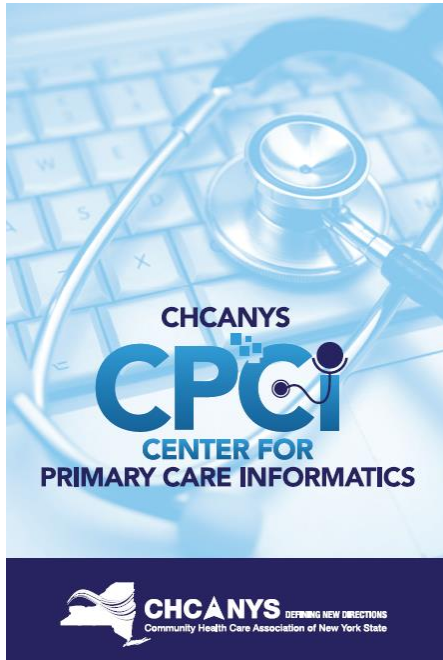
Scorecard ⓘ

Centers

2017

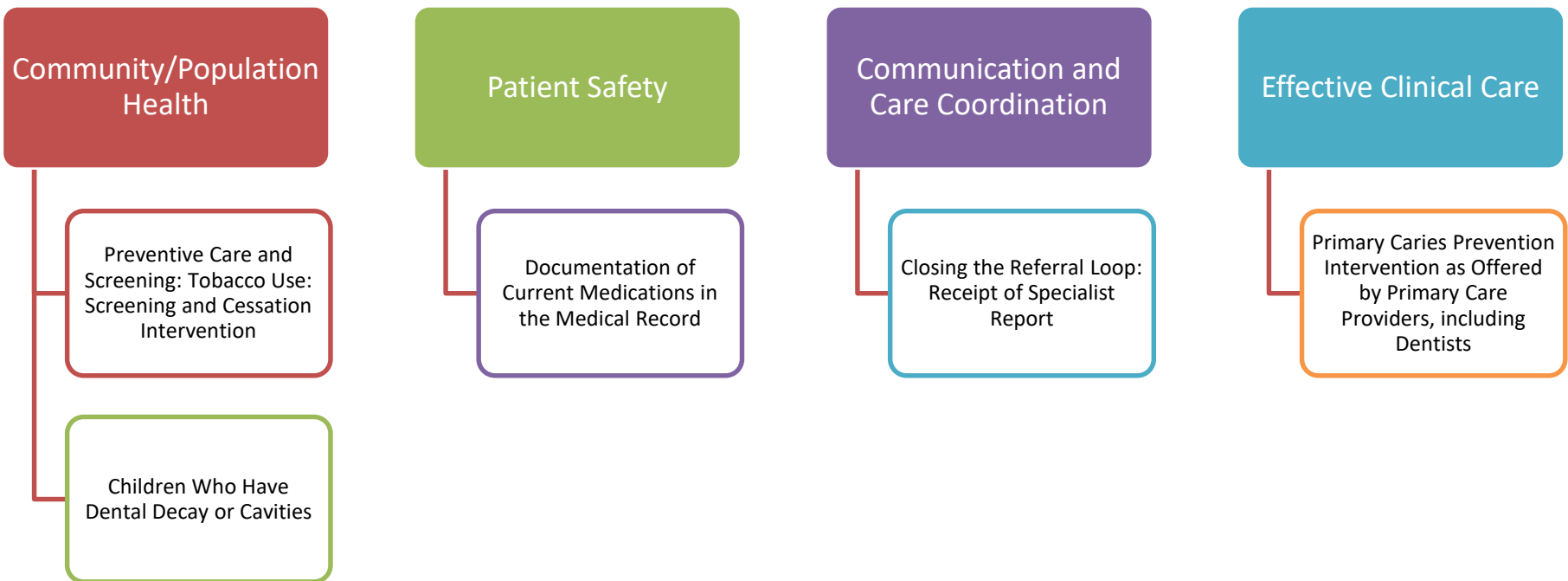
Centers

- ★ Favorites
  - UDS
  - PCMH
  - Meaningful Use
  - HEDIS
  - Referrals
  - GPRA
  - OSHPD
  - Dental CQM**
  - Dental Scorecard
  - Prenatal
  - MillionHearts
  - P4C
  - Payer Integration
  - Custom Scorecards
- 📅 Visit Planning
- 📊 Dashboards
- 📄 Reports
- 📈 Measures
- 📋 Registries
- ⚙️ Admin

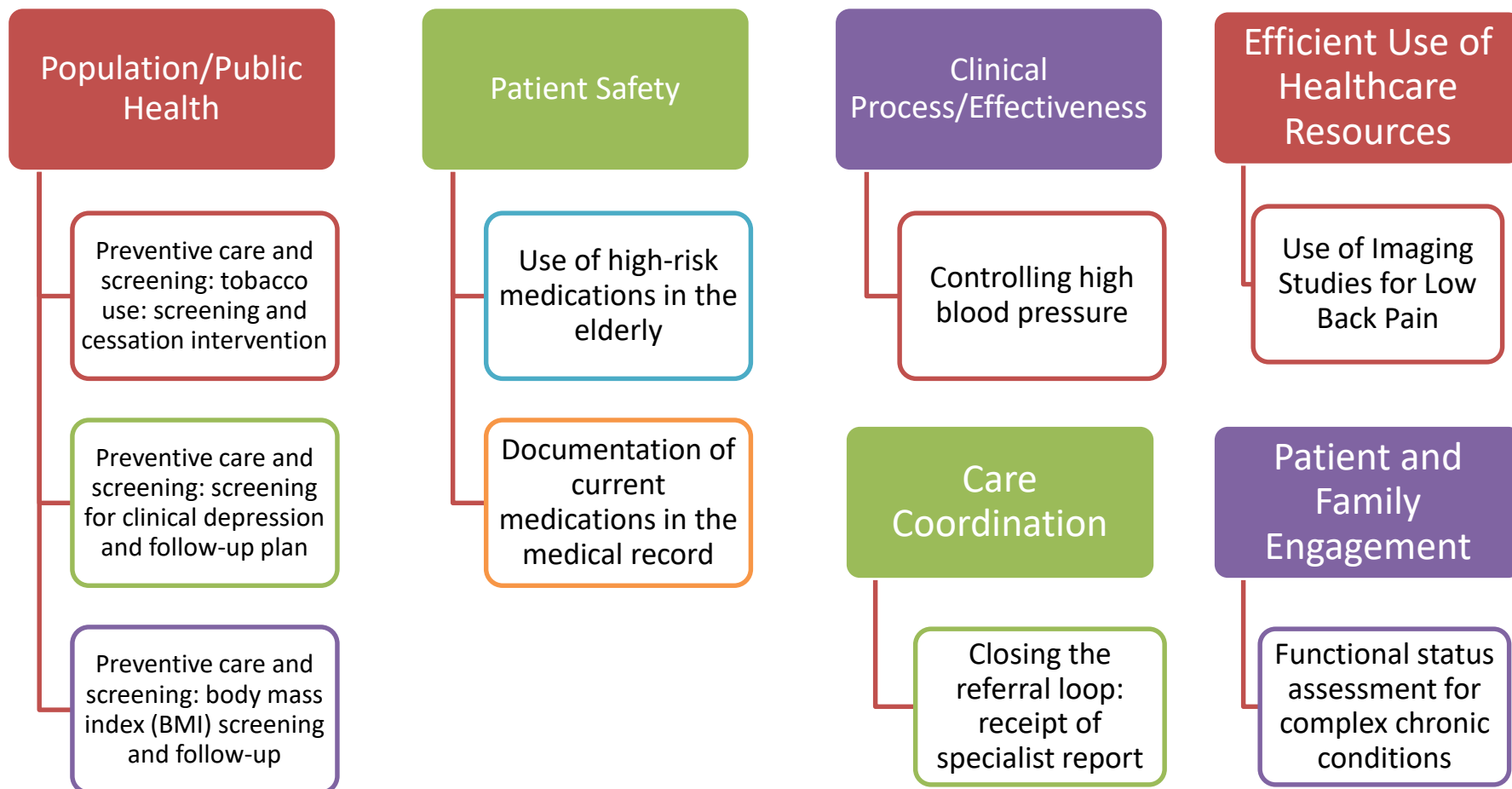


- Child dental sealants (various age ranges)
- Child dental decay or cavities
- Prenatal oral health
- Dental visit (Annual, child, well child, etc)
- DM Oral health
- Topical fluoride
- Primary Caries Prevention Intervention

# Recommended Dental CQMs



# Recommended Adult CQMs



# Upcoming Deadline



**2016 Meaningful  
Use Deadline**



For additional information on services  
through HCCN, please contact:  
**[HCCN@chcanys.org](mailto:HCCN@chcanys.org)**