Applications

Providers attesting for Meaningful Use should continue to hold applications until changes to the state online application system (MAPIR) have been implemented. This applies to providers attesting to both 2015 and 2016 Program Years. System changes to incorporate the Modified Stage 2 Rule for Meaningful Use are anticipated to be complete by July 2016. Providers attesting to adopting, implementing, or upgrading (AIU) to certified electronic health record (EHR) technology for the 2016 Program Year can continue submitting applications.

Updated Resources:

View new resources on our website, including links to our FAQs, the guidelines from the Centers for Medicare and Medicaid Services (CMS), and registry information. For more information, visit our resource page at http://www.ahca.myflorida.com/Medicaid/EHR/resources/index.shtml.

Medicare Payment Adjustments

CMS is extending the application deadline for the Medicare Electronic Health Record (EHR) Incentive Program hardship exception to July 1, 2016. CMS is extending the deadline so providers have sufficient time to submit their applications to avoid the Medicare 2017 payment adjustments.

CMS posted new, streamlined hardship exception application forms that reduce the amount of information that eligible professionals, eligible hospitals, and critical access hospitals must submit to apply for an exception. The new applications and instructions for providers seeking a hardship exception are available here.
The completion of a comprehensive Security Risk Assessment (SRA) is not just a requirement for Meaningful Use, but is also a fundamental component of the Health Insurance Portability and Accountability Act of 1996 (HIPAA) Security Rule. HIPAA requires that policies and procedures be implemented to prevent, detect, contain, and correct security violations. Data breaches and resulting penalties continue to be headline news. These requirements are applicable to practices regardless of size and patient capacity.

In an article released by the U.S. Department of Health and Human Services (HHS), $750,000 HIPAA Settlement Underscores the Need for Organization-wide Risk Analysis, Office for Civil Rights (OCR) Director Jocelyn Samuels said, “All too often we see covered entities with a limited risk analysis that focuses on a specific system such as the electronic medical record or that fails to provide appropriate oversight and accountability for all parts of the enterprise. An effective risk analysis is one that is comprehensive in scope and is conducted across the organization to sufficiently address the risks and vulnerabilities to patient data.”

Read More . . .

Providers are encouraged to familiarize themselves with the HIPAA requirements and take the necessary actions to help ensure compliance. HHS offers guidance on how your organization can conduct a HIPAA Risk Analysis at http://www.healthit.gov/providers-professionals/security-risk-assessment.
New HIE Opportunity for Long-Term & Post-Acute Care Providers!

For long-term and post-acute care (LTPAC) providers that have been considering participation in the Florida Health Information Exchange (Florida HIE) there is a new opportunity to assist with this connection. Grant funding is currently available from the Centers for Medicaid and Medicare Services (CMS) that can assist LTPAC providers in participating in Florida HIE’s Patient Look-Up (PLU) service.

Health care organizations with an operational HIE may connect directly to the statewide service. The CMS funding will reimburse integration costs for LTPAC providers with this technical capability up to $73,353.

Basic Eligibility Requirements for a direct PLU connection:

- Be a LTPAC entity that provides services to Medicaid patients
- Be able to meet the technical requirements for onboarding to Florida HIE’s PLU service
- Be able to complete the integration process within six months of the onboarding kickoff meeting

LTPAC providers that do not have the technical infrastructure or resources to connect directly may also choose to connect through a Florida HIE partner. CMS funding is also available to help with these connections. Costs for integrating through the Florida HIE partner are reimbursable up to $36,677.

Basic Eligibility Requirements for a PLU partner connection:

- Be a LTPAC entity that provides services to Medicaid patients
- Be able to meet the Florida HIE partner’s technical requirements
- Be able to complete the integration process within one year of the onboarding kickoff meeting

Florida HIE partner organizations:

- Strategic Health Intelligence
- Tampa Bay HIE
- Community Health IT*

*Will connect to the PLU network in 2016

To learn more about PLU, join the PLU Webinar on 4/20 @ 10 a.m. Register here.

EHR Incentive Program

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