

# Collaborative Project between Maine Office of the State Coordinator HIT & Kennebec Valley Community College to Increase Usage of the Health Information Exchange and Meet Meaningful Use Requirements

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## Introduction and Background

The Maine Department of Health and Human Services, Office of the State Coordinator for Health Information Technology (OSC), MaineCare Health Information Technology Meaningful Use Program (OMS HIT) and Kennebec Valley Community College (KVCC) entered into a memorandum of understanding beginning August 01, 2013 and completing February 12, 2014. The purpose of this venture was to provide six HIT consultants who successfully completed the certification program offered at KVCC in an effort to assist providers to use the Medicaid agency's technical and on-line reporting systems to meet Meaningful Use requirements and refer eligible providers to the State's Health Information Exchange (HIE). The project plan was approved by the Office of the Nation Coordinator for HIT (ONC) and funding was provided with 100% Federal dollars under the Health Information Technology for Economic and Clinical Health Act of 2009 (HITECT ACT).

## Method

HIT consultants (known as the HIT Squad) were successful graduates of the KVCC EHR Consultant & EHR Engineer professional certificate program who successfully passed the CHTS exam in a workforce role and selection based on interest, availability and credentials. A team of six HIT Squad members formed under the administrative direction of KVCC and subject matter expert direction of OMS HIT MU. The team gathered for a two-day intensive training and met twice weekly (virtually) via conference calls to review current work, discuss issues and identify solutions and conduct analyses of lesson learned and general success of the project.

## Results

**Table 1: Final numbers by category submitted by consultants at end of project**

Category	Description	#	#	#	#	#	#	Total
MU 90 PD		7	18	70	19	228		<b>342</b>
MU 90 quered for PMT		4		46				<b>50</b>
MU 365 PD				18		163		<b>181</b>
MU 365 ques for PMT				148				<b>148</b>
AIU PD		7	12	38	24	259	13	<b>353</b>
AIU PD quered for PMT		1		18				<b>19</b>
<b>TOTAL AIU / MU PD</b>		<b>19</b>	<b>30</b>	<b>338</b>	<b>43</b>	<b>650</b>	<b>13</b>	<b>1093</b>
EP Accounts Closed	EP Retried	2	14	4				<b>20</b>
EP Accounts Closed	EP Deceased	1						<b>1</b>
EP Accounts Closed	EP Left Practice	41	8	19	2			<b>70</b>
EP Accounts Closed	EP LEFT Program	2						<b>2</b>
EP Accounts Closed	Plan MU 90 in 2014 (address in 2014)	68		123				<b>191</b>
EP Accounts Closed	EMHS Noncontact Requested	1						<b>1</b>
<b>TOTAL Accounts Closed</b>		<b>115</b>	<b>22</b>	<b>146</b>	<b>2</b>			<b>285</b>
Not in mEHRIP site	registration not received				15			<b>15</b>
EP Accounts REOPENED	MU 365 in 2013 (address in December)	34						<b>34</b>
Waiting on Contact	Contacts Aware of Next Steps	107	55	3	86	53		<b>304</b>
<b>TOTAL EPS</b>		<b>275</b>	<b>107</b>	<b>487</b>	<b>146</b>	<b>703</b>	<b>13</b>	<b>1731</b>

**Table 2: Total time spent in each tier and number of practice sites assisted**

	Tier 1 (up to 4 hours/provider)	Tier 2 (up to 8 hours/provider)	Tier 3- site visit -on site (up to 15 hours/provider)	Totals
Hours Spent in each tier	1011.90	547.08	9.00	1567.98
# of practice sites assisted	365	169	2	536
# Referrals to HIE outreach	1	0	0	1
# Referrals to REC	0	0	0	0

**Discussion**

The goal for this initiative was to assist up to 900 eligible professionals to meet attestation and reporting requirements under the Meaningful Use Program. As seen in Table 1, the actual number of providers assisted with AIU/MU totaled 1093, which translates to 121% of target. Additionally, detail in reporting revealed that a number of professionals requiring closure of accounting, reopening of accounts or waiting for contact prior to next steps totals another 638 professionals for a grand total of 1731 professionals who were assisted during the grant duration.

Assistance to practices fell into three categories as shown in Table 2. The majority of practices required Tier 1 which included telephone/email contact, assistance with Medicaid worksheet, education regarding the HIE, Stage I MU, EHR incentive program and resources available at the State of Maine/CMS website. About half the practices needed additional support by the HIT Squad team members, which bumped them into the Tier 2 category. In addition to providing all the support in Tier 1, practices required assistance with more complex issues such as assistance with use of the WIZARD application, setting up a test submission to the immunization registry with Maine CDC, and facilitation of attestation for MU by looking at the documentation from the EHR system the practice used for reporting. Finally, only two practices required on-site assistance (Tier 3) where a HIT Squad member provided at the elbow support, which involved Tier 2 services. Tier 3 level of assistance required prior approval by the MaineCare HIT Program Director, only after Tiers 1 & 2 was unsuccessful.

Originally, the thought was that up to 552 professionals (not practices) would need referral to the HIN for targeted education on the value of HIE and workflows where the HIE could support the practice, however, the actual number was one. The professionals/practices assisted during the grant period were comfortable with workflow process and HIE and did not require additional assistance from HIN. This was a surprising and unexpected result of the project.

**References:**

HITECH Act webpage found under Certification and EHR Incentives at HealthIT.Gov website: <http://www.healthit.gov/policy-researchers-implementers/hitech-act>

MaineCare Health Information Technology Meaningful Use Program found at Maine.gov website; MaineCare Services An Office of the Maine Department of Health and Human Services: <http://www.maine.gov/dhhs/oms/HIT/index.html>