



Powered by The Valley Health System and Kindred Hospitals



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Newsletter

Volume 110

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#VegasStrong

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Security, Security, Security

Ah, the end of summer. Time to get the kids ready to go back to school. Time to reassess.

Isn't it also time to re-energize ourselves and our practices? Re-inspire? Remind? Redouble efforts?

And, perhaps, to *reframe* challenges as opportunities.

Albert Einstein, a theoretical physicist widely acknowledged as one of the greatest minds of the twentieth century and most influential physicists of all time, said: "Whoever is careless with the truth in small matters cannot be trusted with important matters."

Can't we incorporate that thought into our everyday activities? Small details count. Remembering always to protect PHI (Protected Health Information) and PII (Personal Identifiable Information) will help us protect our practices and build trust with our patients.

- *Always* encrypt patient data
- *Always* lower your voice when discussing patients
- *Always* shred documents
- *Always* err on the side of "Better safe than sorry"
- *Always* log out of a computer when done
- *Always* educate and reinforce good behavior, and
- *Never* share passwords

We understand that this is easier said than done but perhaps, if we all try just a bit harder, we can actually "make it happen". Please respond to the email to which this newsletter was attached with "Make it happen" in the subject line.

NOTE:
Next Practice Meeting:
Southern Nevada
Wednesday, Nov. 6, 2024

Northern Nevada:
Thursday, Nov. 7, 2024

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Quality Spotlight: Promoting Interoperability

The Merit-Based Incentive Payment System (MIPS) was designed by The Centers for Medicare and Medicaid Services (CMS) under the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) to provide an incentive to eligible clinicians. It ties together quality and cost-efficient care, drives improvement in care processes and health outcomes, increases the use of healthcare information and reduces the cost of care.

Promoting Interoperability (PI) is a very **crucial** portion of MIPS that emphasizes patient engagement and the electronic exchange of health information utilizing certified electronic health record technology (CEHRT). The last day to begin collecting PI data for the continuous 180-day performance period was **July 5, 2024**. Given that start date, we would like to remind (and provide guidance to) our participating practices about the requirements under this category.

Currently, there are four performance categories required under MIPS. As shown in the picture below, practices that join our ACO, receive the added benefit of Silver State ACO reporting most of the categories – Promoting Interoperability is the only category that Silver State ACO is unable to attest to on behalf of our practices and this category is ultimately the **practices responsibility**:

 Quality The ACO reports on behalf of participating practices	 Cost Participating practices in an ACO are not subject to the Cost category	 Improvement Activities Participating practices in an ACO receive full credit for the IA category	 Promoting Interoperability Participating practices in an ACO are REQUIRED to submit PI data to CMS
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Practice Responsibility

Every measure required under the PI category is met and tracked using the practices own electronic medical record. For 2024, an eligible clinician must meet the following to submit PI:

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- Usage of a 2015 Edition CURES Update CEHRT
- Collect measure data for a minimum performance period of 180 consecutive days
- Complete a Security Risk Analysis
- Complete the High Priority Practices from the SAFER Guide

There are four objectives under the Promoting Interoperability performance category, each with their own measures that need to be met. Failure to successfully complete the measure on at least one patient for all measures (identified on your PI dashboard with patient being displayed in the numerator) or reporting a “No” for any attestations, will result in a score of “0” for the PI category altogether regardless of how well the other measures performed.

This is extremely critical to note as what your practices does or doesn't do affects every single participating practice within Silver State ACO.

The picture below notes the four objectives and measures required to be reported for PI:

Objective	Measure	Points
e-Prescribing	e-Prescribing	1-10
	Query of PDMP	10
Health Information Exchange	Option 1 Support Electronic Referral Loops by Sending Health Information	1-15
	Option 1 Support Electronic Referral Loops by Receiving and Reconciling Health Information	1-15
	Option 2 HIE Bi-Directional Exchange	30
	Option 3 Enabling Exchange under TEFCA	30
Provider to Patient Exchange	Provide Patients Electronic Access to their Health Information	1-25
Public Health and Clinical Data Exchange	Report to BOTH of the following registries via EMR: <ul style="list-style-type: none"> • Immunization Registry • Electronic Case Reporting 	25

There is an option to earn 5 bonus points if your practice reports to additional registries via your EMR – Registries that qualify for the additional bonus are:

- Public Health Registry
- Clinical Data Registry
- Syndromic Surveillance

PI specifications and other supporting documents can be found in the Resource Library on the Quality Payment Program website. And as always, please reach out to your designated Quality Coordinator if you have any further questions or need assistance with meeting any measures.

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PREFERRED PROVIDERS – REMINDER

Preferred Providers are *not* Participants or “members” of an ACO. They are facilities and providers who the ACO has identified as experts in their fields and whose goals and services align with the ACO’s mission.



Please check the Silver State ACO Preferred Provider Network listing. The most up-to-date version is always available on our website www.silverstateaco.com, including an easily printed version.

As Medicare fee-for-service patients, the ACO’s beneficiaries can go to any provider they want for healthcare services. However, we know that if the provider with whom a patient has a long-standing, respectful, and trusting relationship makes a recommendation, the patient is likely to follow it. Please help us maintain a continuum of care by referring to a preferred provider.

Practice Meeting

The last Practice Meetings for 2024 will be held on November 6th in Southern Nevada and November 7th in Northern Nevada, respectively. Please be sure to attend. The meetings are a great opportunity to learn how to improve scores, meet CMS requirements, and become acquainted with other Participants. We can all learn from one another. See more details below.

SOUTHERN NEVADA

Wednesday, November 6, 2024

All Southern Nevada Practice meetings will be held at Summerlin Hospital and begin at 11:30 am. Lunch is served.

NORTHERN NEVADA

Thursday, November 7, 2024

Northern Nevada Practice Meetings will be held at Northern Nevada Sparks Medical Building, Suite 201. Meet & Greet begins at 5 pm; Meeting begins at 5:30.

SILVER STATE ACO Compliance Line

702-751-0834

Available for secure reporting of any suspected compliance issues, without fear of retribution.

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