Oregon Medicaid EHR Incentive Program (Promoting Interoperability Program)

2018 Reminders & CQMR Webinar Frequently Asked Questions

Topics	Questions	Answers
CQMR	Are you going to send the CQMR webinar training dates?	You can register for a CQMR training webinars here. Webinar times are: •Thursday, January 17, 9:30-12:00 •Thursday, February 26, 1:00-3:30 •Tuesday, April 9, 9:30-12:00
	What do you do if you don't know whether your Organization is registered with OneHealthPort or don't know who your Administrator is?	• Contact the OneHealthPort help desk for assistance by calling 1.800.973.4797 (toll free) or submitting a contact form. • Additional OneHealthPort FAQs.
	When logging in to OneHealthPort, you must pick a participating site. What is the participating site or the link in OneHealthPort for CQMR?	The participating OneHealthPort site is Oregon Clinical Quality Metrics Registry.
	Will the CQMR show on the bottom of the OneHealthPort screen where the Qualis Health and Washington Health Alliance show?	Yes, you will see the CQMR in that same area. The participating site in OneHealthPort is Oregon Clinical Quality Metrics Registry.
	On the OneHealthPort Single Sign-on, is it clear where we go? I do not see anything about the CQMR. Is this because we haven't done the legal documents yet?	At the time of the webinar, the CQMR was not yet live on OneHealthPort, but it is now available. The participating site in OneHealthPort is Oregon Clinical Quality Metrics Registry.
	When will legal documents be available for the public? We are already registered with OneHealthPort and identified users of the tool.	Legal agreements are expected to be available soon. We will send an announcement when they are available.
	We had a previous legal agreement for OneHealthPort. Does that suffice, or will there be a new one?	You will not need a new legal agreement with OneHealthPort. You will, however, need to complete legal agreements that are specific to use of the CQMR. Those will be available on the CQMR onboarding page.

	Are these legal agreements negotiable? Do we need to hire attorneys for their reviews?	OHA engaged in a stakeholder review process while drafting the agreements, with the hope of minimizing areas of negotiation. As with any legal agreements, however, it is up to each organization to decide on the appropriate review process.
	What is the "appropriate role(s)" for OneHealthPort for MU attestation?	To submit data in the CQMR, you will need the Quality Reports and Data Entry role. You can find additional material about roles on the CQMR onboarding page and in the training materials.
	Where can we find the Excel template to attest to eCQMs in the CQMR?	The template is available on the Program Year 2018 webpage. **Note**: The Excel template is offered as an option to support attestation. You are welcome to upload QRDA III files instead of using the Excel template.
	Is the upload just for CQMs or will we also upload objectives?	The Excel template is only for uploading eCQMs to the CQMR. You will upload your objectives into MAPIR.
	Can you show us how to find where to enter the data to OneHealthPort - I have a user ID but can't find where to go in the system or if I have the correct access.	The participating site in OneHealthPort is Oregon Clinical Quality Metrics Registry. Training materials on using the CQMR are available here.
	Can we load multiple QRDA III file for one provider?	No. We would expect to see one QRDA III file for each eligible professional. If you need to combine files for an EP who has worked at multiple practice locations during the year, for example, please use the Excel template for that EP.
	For eCQM reporting, our QRDA file has all the quality measures built out (more than the required 6). Is it ok to submit all of them or do we have to have only 6 measures in the QRDA file?	Yes. You may submit more than the required 6 eCQMs in your QRDA III file.
	Will you be checking score cards in MAPIR if you submit eCQMs via QRDA?	Not for eCQMs. The Medicaid EHR Incentive Program staff will only check your EHR report (score card) for eCQMs if you submit your eCQMs to the CQMR using the Excel template. Score cards will still be required to support MU Objectives.

	It will be helpful to have a one-pager that states what goes in MAPIR and CQMR. Is there a list of items that need to go to MAPIR only?	In CQMR: eCQMs only, either in a QRDA III file or in the Excel template. In MAPIR: Everything else related to your attestation (patient volume, MU objectives, supporting documentation). Please see our list of required documentation here.
	Is it a problem if we upload eCQMs in CQMR for more providers than we end up submitting attestations for in MAPIR?	No. We will review on the back end to compare MAPIR attestations and CQMR uploads to ensure that each piece of the attestation was completed.
	How will you know when both are submitted? Do we need to send an email?	We will coordinate on the back end to compare the attestations in MAPIR and the eCQM submissions in the CQMR. You do not need to send an email. Shortly before the April 30, 2019 deadline, OHA staff will reach out to anyone who has only completed one portion of his/her 2018 attestation (CQMR or MAPIR). In order to attest to Program Year 2018 and be considered for payment, the MAPIR and CQMR portion of the attestation have to be submitted by April 30, 2019.
	Can more than one person do the reporting?	Yes. One person could do the components in MAPIR and another person could do the eCQM components in the CQMR. It does not have to be the same person doing both pieces.
	If we start the MAPIR attestation Monday, what is the time frame within which the CQMR attestation would have to be completed? I understood that once you start the attestation process, you have to complete it within a certain time frame (14 days?) or you have to start over.	Both the MAPIR and CQMR portion have to be submitted by April 30, 2019. After 14 days of inactivity in MAPIR, providers will receive an auto-generated email reminding them of their incomplete attestation; however, there is no time limit to complete the attestation except for the April 30, 2019 deadline.
Public Health Registries	We are registered with ALERT as an immunization registry and ESSENCE, Syndromic Surveillance. Would that meet Objective 10 for 2018?	Only if you were attesting to Meaningful Use Stage 3 and practicing in an urgent care setting. In Oregon, ESSENCE is not ready to receive syndromic data from EPs

		attesting to Modified Stage 2 practicing in non-urgent care setting. For more information click here.
	Is it too late to register with a specialized registry to meet objective 10 for 2018 since syndromic surveillance is not applicable for EPs?	Yes. To attest to a specialized registry for your 2018 attestation, you would need to show some level of active engagement with the specialized registry in 2018 (registration, testing and validation, sending production data).
	I need some assistance in finding a registry to register with. Who should I contact?	CMS recommends that providers check with their states to see what's available, as well as any specialty societies he/she may be a member of. To see Oregon's available registries, click here.
	What is the PDMP?	The Oregon Prescription Drug Monitoring Program (PDMP). It's a tool to help health care providers and pharmacists provide patients better care in managing their prescriptions. It contains information provided by Oregon-licensed retail pharmacies. For more information, click here.
	Do you know if the PDMP has a way of reporting on historical use? We have proof of registration by our providers but not a copy of a query during our reporting period.	When the provider logs into the PDMP there is a menu and they would click on provider history and can do a screen shot and save it and upload into MAPIR
	Do we need a screenshot of the query for each and every provider we attest for?	Yes. For each provider who is attesting to PDMP you will need a screenshot which will include the provider's name and NPI, please redact patient PHI.
	To submit to the PDMP, would we set the date range for the attestation period and submit this report?	You would go to the Provider History screen in PDMP find your EHR reporting dates or the 90 days prior and do a screenshot. We only need one screenshot per provider.
Post-Payment Audit	Do you have links or resources you can provide that list suggested supporting documentation to prepare for a possible audit? (Not the attestation.)	Providers who receive a Medicaid EHR incentive payment may potentially be subject to an audit. Eligible professionals, eligible hospitals, and critical access hospitals should retain ALL relevant supporting documentation used to complete the attestation responses for each program year. All documentation to support attestation data should be retained for seven years post-attestation.