Meaningful Use Initiative
For UCSF Predoctoral Program

UCSF Clinic Administration: September 2015
What is Meaningful Use (MU)?

- The Medicaid EHR Incentive Program provides incentive payments for eligible healthcare providers to adopt and use electronic health record (EHR) technology in ways that can positively affect patient care.

- Objectives are established by the Centers for Medicare and Medicaid Services (CMS) using a certified EHR; program is run by individual States.

- Objectives are tailored to demonstrate meaningful use of the EHR.
A Window of Opportunity

- Meaningful Use federal program enrollment for eligible providers (EPs) is open only through 2016!!!

- Potential to collect incentive payments on behalf of EPs to help bridge the revenue gap

- Approximately 100 EPs in predoc clinical care

- Initial year 1 incentive payment for 70-100 EPs would be $1,487,500 – $2,125,000
What could UCSF do with potential $2–3.5 million?

1. Help assure short term financial sustainability for our commitment to serve the Dental population

2. Invest in technology of tomorrow

3. Facilitate other Strategic Plan goals
In addition, California's congressional delegation in a letter to Brown in August 2015 said that Denti-Cal's low reimbursement rates are having a negative effect "on the number of dentists in California still willing and able to participate in the program."

The group added, "We urge you to prioritize improvements to the Denti-Cal program in this year's budget" (Sacramento Business Journal, 5/20).
Key Statistics for Predoctoral Clinic

Between July 2014–March 2015

- Total patient visits: 36,302
- % of patient visits by Dentical payor type: 39%
- % Revenue from the Dentical payor type: 16%
- Large revenue gap between expected and actual
So Why Continue to Accept Dental?

- Care and access for the underserved
- Good will and community partnership
- Commitment to public health
- Continuous stream of patients for ongoing student experiences
- Delivering on our mission and promise as a public institution
What’s already going for us?

- For predoc, the focus is Medicaid/Dentical population – must meet at least 30% Dentical unique patients threshold (UCSF has 40%)

- AxiUm is already a certified/qualified EHR system

- Most of our clinical faculty will qualify as eligible providers
13 + 5 + 9 = MU

- 13 Core Measures*
- 5 Menu Measures*
- 9 Clinical Quality Measures (CQMs)

For stage 1, this is the MU formula that must add up for each eligible provider in order to receive incentive payment on behalf of the provider.

* This is subject to change => pending 2015 decision from the federal government!!!
Proposed Timeline

- Adopt, implement, or upgrade in **2016**
  - Year 1 Payment: $21,250.00
- Demonstrate **90 days** of Stage 1 of meaningful use in **year 2 (2017)**.
  - Year 2 Payment: $8,500.00
- Demonstrate **a full year** of Stage 1 of meaningful use in **year 3 (2018)**.
  - Year 3 Payment: $8,500.00

- Demonstrate **a full year** of Stage 2 of meaningful use in **year 4 (2019)**.
  - Year 4 Payment: $8,500.00
- Demonstrate **a full year** of Stage 2 of meaningful use in **year 5 (2020)**.
  - Year 5 Payment: $8,500.00
- Demonstrate **a full year** Stage 3 of meaningful use in **year 6 (2021)**.
  - Year 6 Payment: $8,500.00
Onboarding and Management

- Sign up of eligible general and specialist faculty by April (?) 2016 – Parnassus and BDC
- Process facilitated by a project manager
- Cost: 1 FTE (annual salary $90,000)
- Talented, detail-oriented, IT experience and excellent interpersonal skills
- Office space for private sign up experience
FAQs

- FGP faculty who teach in predoc can participate without impact on their practice
- Being an MU EP does NOT mean the clinician is a Dentiical provider
- No tax liability for the EP
- At sign up, each EP must designate UCSF MU predoc group as the recipient of funds on their behalf
Key Short-term Goals for Predoc

- Faculty Council presentation in October 2015
- By November 1, 2015, identify facilitators/MU committee members needed for this launch
- Gain participation and support from at least 70 clinical faculty members by January 1, 2016
- Gain support from student leaders by January 1, 2016
- Adopt, implement and enroll faculty by X DATE, 2016 (date not yet finalized by CMS)
Next Steps for 2015

- Confirming/keeping track of changes with CMS re: MU and with CA specific guidelines
- Identifying a project manager
- Finalizing info on signing up providers
- Establishing sign-up workflow
School Leadership is vital to the success of this project.

- Meaningful use is attractive because:
  1. It aims to improve patient care outcomes
  2. It is a short term solution to help bridge the revenue gap while the state government works on second order solutions for dental reimbursement rates

- Please join the effort by endorsing it and encouraging your faculty to participate!
Thank you!

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