



TouchWorks® EHR Regulatory Rally Series

November 2024

Bringing next-level healthcare within reach

TouchWorks Regulatory Team

First, a word

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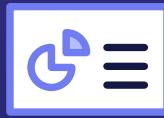
Housekeeping



Recorded session, listening-only mode, lines are muted by default



Ask questions via Q&A panel or 'Raise your hand' option to ask questions live



Switch to full screen to maximize your view and optimize your virtual experience



Watch for a follow-up email containing the webinar recording or visit our webinar page

Improving Client Communication



Client Survey



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TouchWorks Webinar Feedback



What content would you like to see covered on our webinars?

How can we make future webinars more useful to you?

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Thank you for taking the time to provide your feedback.
It is important to us as we strive to provide you **Insanely Great** service.

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Webinar ‘Key Points’ Document

TouchWorks EHR Q1 2024 Webinar Key Takeaways:

- Reminder: Support will end for TouchWorks EHR Versions 19.4/20.1/21.1 on 3/24/25

Planned 2024 releases** TouchWorks EHR

2024.1 - April 5

- Core: Better care for patients
- Cloud: Simplified cloud migration
- Mobile: Enhanced mobile capabilities
- Reporting: Streamlined reporting
- Pharmacy: Improved prescription management

2024.2 - July 23

- Core: Enhanced patient data integration
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2024.3 October 29

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- Mobile: Enhanced mobile capabilities
- Reporting: Streamlined reporting
- Pharmacy: Improved prescription management

**TouchWorks release 23.0 was released in 2023.

Our mission is more than rhetoric. It's the core of our strategy.

We provide healthcare organizations and professionals with reliable, innovative technology solutions that enhance patient care outcomes and operational efficiency. This commitment shapes our daily operations, driving us to deliver solutions that elevate patient care and operational effectiveness.

- In this webinar, Executive Vice President Ben Schrude provided a strategic overview, highlighting our commitment to client success, operations and setting new benchmarks in regulatory compliance.

Call to action

Subscribe today!

Beginning in 2024, the performance period for the **Health Category** will be 12 months. This means that the 12 months start at a minimum of 180 calendar business days within the calendar year.

The report released in patch 6.

Client must have patch 6 or higher by their fiscal year reporting period. Reporting period for fiscal year 2024 is April 1, 2024 through June 30, 2024.

Available on the TouchWorks Webinar Website

The screenshot shows a web browser with the URL go.alterahhealth.com/2024touchworksclientseries in the address bar. The main content is a purple-themed page for a 'TouchWorks EHR Q1 Update Webinar'. The page includes a 'Watch the Recording' button, a 'Download the Deck' button, a 'View the Summary' button, and a thumbnail for a 'Summary Video'.

Agenda

Nov 14, 2024

01

*Wrapping up 2024 Reporting
End of Reporting Year Checklist
eCQM & Promoting Interoperability Reminders & Tips*

02

*Looking Forward to 2025
Key Insights for CEHRT/ HTI-1/HTI-2 & More*

03

*A Sneak Peek
MVP Estimator Dashboards*

04

Live Q&A and Survey

2024 MIPS End of Reporting Year Checklist



- 1. Determine/ Finalize how you will submit your MIPS data (Group, Individual or Both)**
- 2. Review your VCRS Regulatory Reports for current performance**
 - **Promoting Interoperability**
 - Verify you have met all required category & measure performance requirements
 - **Quality Reporting**
 - Traditional MIPS – Identify your top 6 scoring measures (understand your scores)
 - **VCRS QRDA 3 exports ready for 2024 data submission (standards updated with VCRS v24.2 release in June 2024)**
 - **Improvement Activities**
 - Obtain 100% score - verify you have picked your activities and meet all requirements.
- 3. Complete your Data Validation activities by 12/31/24**
 - Verify all performance and data validation by how you will submit the data to CMS (by Group, by Individual, by Both)
 - Need Information? Download the 2024 MIPS Data Validation Criteria zip file from the [QPP Resource Library](#)
- 4. Obtain your CMS EHR Certification Number from [CHPL website](#)**
 - TouchWorks v22.1.6 (includes v22.1.7) or v2024.1 or BOTH if you upgraded during 2024
- 5. Evaluate need to apply for a QPP Exception: Deadline to file is by 8 pm EST on 12/31/2024**
 - Learn more on how to qualify and file: [QPP Exception Applications](#)

2024 Automatic Extreme and Uncontrollable Circumstances

<https://qpp-cm-prod-content.s3.amazonaws.com/uploads/2840/2024-MIPS-Automatic-EUC-Policy.pdf>

CMS is applying this policy to clinicians in the following designated area(s) listed on the FEMA website under PA-A and PA-B:

The designated counties in Texas for Hurricane Beryl

- Texas: DR-4798-TX

The designated counties in Florida for Hurricane Debby

- Florida: DR-4806-FL

The designated parishes in Louisiana for Hurricane Francine (Parishes updated 10/15/2024)

- Louisiana: DR-4817-LA

The designated counties in Florida, Georgia, North Carolina, South Carolina and Tennessee for Hurricane or Tropical Storm Helene (Counties updated 10/15/2024)

- Florida: DR-4828-FL
- Georgia: DR-4830-GA
- North Carolina: DR-4827-NC
- South Carolina: DR-4829-SC
- Tennessee: DR-4832-TN

2024 eCQM Historical Benchmarks & Quality Measure Scoring

- CMS removed/ did not establish benchmarks for many highly performed on measures, including:
 - CMS 2: Preventive Care and Screening: Screening for Depression and Follow-up Plan
 - CMS 90: Functional Status Assessments for Heart Failure
 - CMS 129: Prostate Cancer: Avoidance of Overuse of Bone Scan....
 - CMS 135: Heart Failure: ACE Inhibitor or ARB or ARNI Therapy
 - CMS 155: Weight Assessment and Counseling for Nutrition/Physical Activity in Children
 - CMS 156: Use of High-Risk Medications in Older Adults
 - CMS 165: Controlling High Blood Pressure
 - CMS 249: Dementia: Cognitive Assessment
 - CMS 645: Bone Density Evaluation for Patients with Prostate Cancer...
 - CMS 347: Statin Therapy for the Prevention and Treatment of Cardiovascular Disease
 - CMS 951: Kidney Health Evaluation (subject to 5-point scoring floor)
- Reminder – measures with no benchmark earns zero points (unless...)
- CMS receives enough measure data to establish a benchmark after data submission, then a benchmark may be established and a score awarded.

Quality Category Measure Scoring

Traditional MIPS: Top 6 measures earn achievement points based on its Measure Class
MVP Quality Scoring: Top 4 measures earn achievement points based on its Measure Class

Measure Class	Description	Point Scoring 2024
Class 1	<ul style="list-style-type: none">Has a BenchmarkMeets case minimum (20 or more patients in the denominator)Meets Data Completeness threshold of 75%	Each measure earns between 1 and 10 points Capped measures earn max 7 points
Class 2	<ul style="list-style-type: none">Does NOT have a BenchmarkAnd/or does NOT meet case minimumMeets Data Completeness threshold of 75%	Each measure earns 0 points Small Practices continue to earn 3 points
Class 3	<ul style="list-style-type: none">Does not meet Data Completeness threshold of 75%	Each measure earns 0 points Small Practices continue to earn 3 points
Class 4.a	a) Has a benchmark, meets case minimum & meets data completeness threshold of 75%	1st PP = between 7 and 10 points 2nd PP = between 5 and 10 points
Class 4.b	b) Does not have a benchmark, but meets case minimum & meets data completeness threshold of 75%	1 st PP = Earns 7 points 2 nd PP = Earns 5 points

Need help with your quality reporting? Contact your Client Success Executive for more information.

Promoting Interoperability Requirements Summary for 2024

COLLECT DATA USING ONC HEALTH IT CERTIFIED VERSION

Deadline to be on applicable certified technology by the FIRST day of your 180-day reporting period

New last “first” day to start is 07/05 of each year

CMS EHR CERTIFICATION NUMBER

Clients obtain from the CHPL Website

<https://chpl.healthit.gov/>

TouchWorks v22.1.6 or higher

ACTIONS TO LIMIT OR RESTRICT INTEROPERABILITY OF CEHRT

Attest “yes”

HIGH PRIORITY PRACTICES SAFER GUIDE

Attest “yes” to having completed requirements within calendar year or by 12/31/24

SECURITY RISK ANALYSIS

Attest “yes” to having completed requirements within calendar year or by 12/31/24

PERFORMANCE & REGISTRY MEASURES

Numerator/denominator measures require at least 1 count for each

Attestation measures must have a valid response or exclusion

Electronic Case Reporting (eCR) – TouchWorks Update



The 2015 Cures Update Edition mandated the integration of automatic functionalities to facilitate the electronic sharing of health data related to specific diagnoses (trigger codes) with public health authorities.

Example: "Diagnosis = COVID"

- TouchWorks EHR must automatically send this predefined diagnosis information to the state's public health agency.
- States use the data for tracking diseases, taking necessary actions, and more.

5 Phases to achieve CDC Certification

- Phases 1 and 2; achieved ONC Certification, **done!**
- Phase 3, CDC Certification Testing, **done!**
- **We are here!** Phase 4, BETA Testing w/Clients
- Phase 5, "General Availability" (GA) and "Rollout".

Call Outs

- TouchWorks can only announce "GA" once passing CDC certification, certification achieved.
- Each state likely different, requirements for onboarding with state's public health agencies are **NOT** universal!

Attestation Reminders for MIPS Promoting Interoperability performers,

- Option 1: Active Engagement, Pre-Production and Validation
- 2023's registration will cover 2024.

PI 180-day Minimum Reporting Period Impact

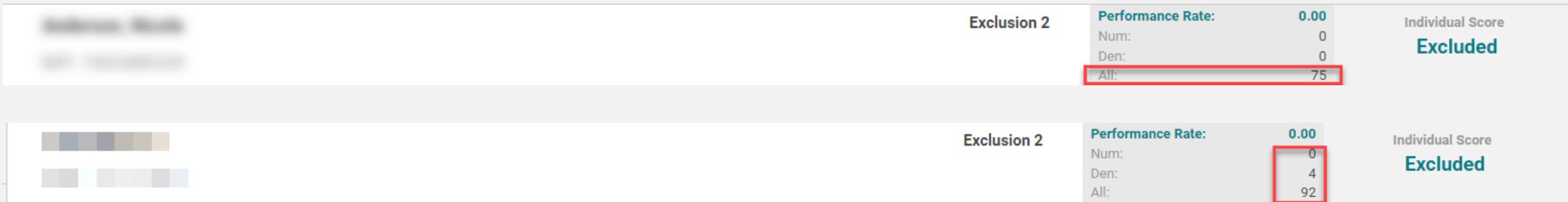
New **180-day reporting period may change group and/or individual clinician measure exclusion eligibility!**

- **Support Electronic Referral Loops by Sending Health Information**
- **Support Electronic Referral Loops by Receiving & Reconciling Information**
- **Electronic Prescribing (e-Prescribing)**
 - Increase to 180-day from 90-days may place some clinicians OVER the 100-count exclusions.
 - CHECK your clinician's performance now and ensure you have met the minimum "at least one patient in the den/num" requirement if the clinician has gone over the 100-count measure exclusion.

PI 180-day Minimum Reporting Period Impact

New **180-day** reporting period may change group and/or individual clinician measure exclusion eligibility!

- Support Electronic Referral Loops by Receiving & Reconciling Information



Exclusion 2	Performance Rate:	0.00	Individual Score
Num:	0		
Den:	0		
All:	75		Excluded

Exclusion 2	Performance Rate:	0.00	Individual Score
Num:	0		
Den:	4		
All:	92		Excluded

- All** = Patients with “TOC” appointments during the reporting period
- Denominator** = Patients with “TOC” appointments with a CCDA document saved to the chart & linked to the TOC appointment during the reporting period (common workflow example: Inbox & Inbound Document Set tasks where the attached document is saved to the chart and linked to a future appointment)
- Numerator** = Clinical reconciliation of all THREE within the reporting period– medications, med allergies and problems

Promoting Interoperability Measure in Focus: e-Prescribing

- Clinicians should be performing at a **high** rate or earning all available 10 points.
- Use VCRS reporting dashboard drill-downs to understand your data
 - Look for:
 1. Clinicians utilizing “Record” to document patient-reported meds. Record w/out ordering should be used.
 2. New clinicians that should be prescribing but you see all zeros (provider setup issues)
 3. Clinicians that continue to print
 4. Locally defined medications configured incorrectly in the OID (DUR & OTC should not count for this measure)

Need Help, with Issues and data validation questions when testing?

[E-Prescribing TouchWorks Reference Guide](#)

Open a TouchWorks Support Case with our Support Team to investigate!

Need Assistance, with improving your measure performance or VCRS dashboard training?

TouchWorks Services offers Consulting Subscriptions to assist clients. Contact your Client Success Executive for more information.

TouchWorks 2024.3, Early Bird Notice!

Performing for Promoting Interoperability?

- Must have upgraded to TouchWorks Version 2024.3 or higher with FHIR R4 installed, by the first day of your 180-day performance period or no later than July 4, 2025

Reporting on eCQMs but not Promoting Interoperability?

- Must have upgraded to TouchWorks Version 2024.3 or higher with FHIR R4 installed, by the last day of the performance period; no later than Dec 31, 2025

ACO or Medicare Shared Savings Program Participants

- Verify your CHERT requirement deadlines with ACO Administrators.

“

- **Decision Support Intervention (DSI)**

- Replaces Clinical decision support criteria as part of HTI-1final rule.
- New functionality implemented in TouchWorks to meet requirements.

- **Updated FHIR Publication Criteria**

- Must publish patient-facing FHIR endpoints in a standardized format (to ensure consistency across systems)
- Implement an oversight program to actively monitor client's endpoint
- ONC expects, "...FHIR R4 endpoints are always active."

FHIR R4 endpoints are crucial to allow patients access to their own health information, the expectation is for your endpoints to always be active...

Client's responsibility ...

- Actively Monitor ALL your FHIR R4 Endpoints. We all are equally responsible; Information Blocking.
- **Understanding, upgrading to new version of TouchWorks, FHIR R4 installation is also required.**
- See something, say something!
- Updating your organization's information in the License Management Portal, **more info coming soon!**

Beyond 2024, “rolling into” 2025.3, more HTI-1

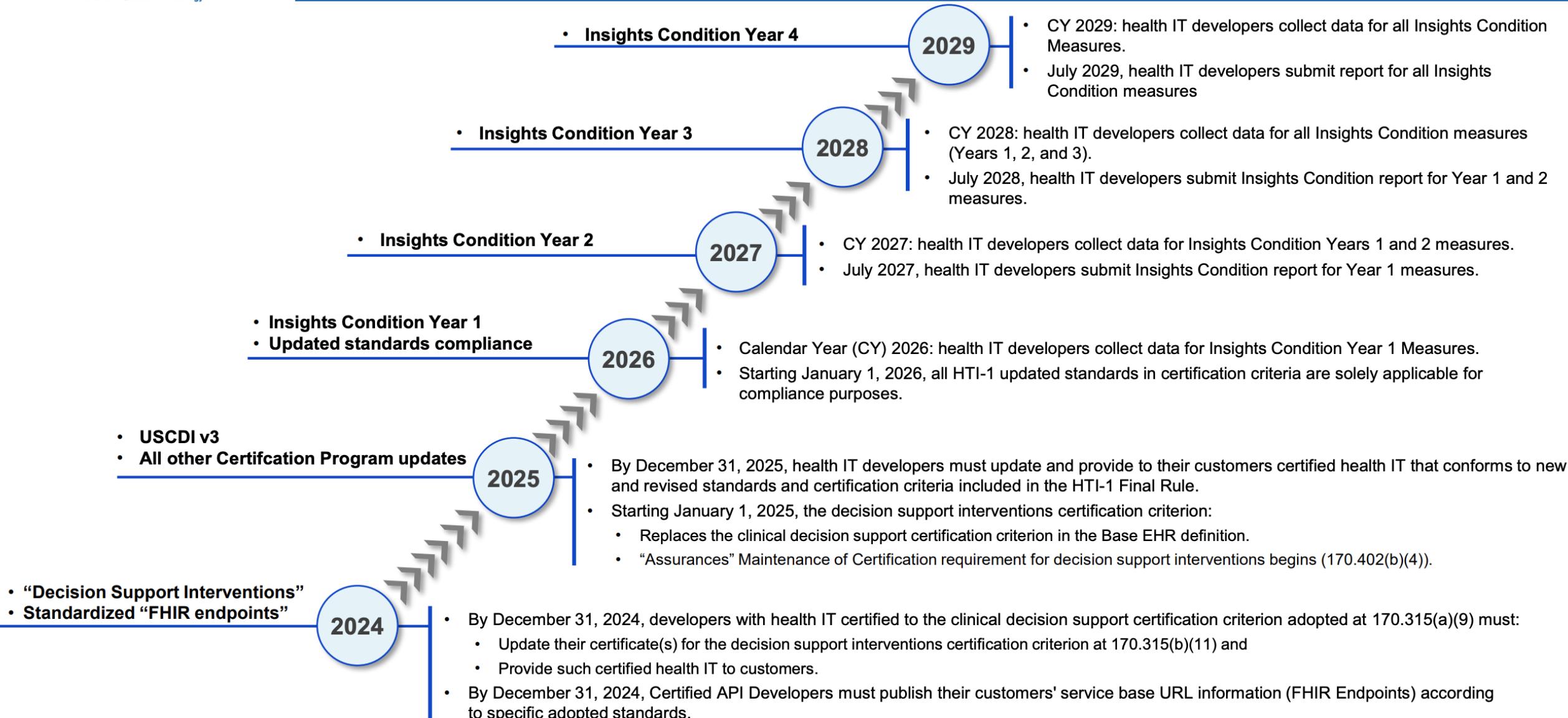
- **USCDI Version 3 Updates** – requires many functional changes throughout TouchWorks, heavy lifting!
- **Social Determinants of Health (SDOH)** – requires new feature functionalities / workflows to meet regulatory requirements
- **eCR Updates** – updates to trigger codes, adding more diagnosis for reporting
- **Call Out! Insight Measures** – vendor required reporting to the ONC on how you use TouchWorks. Data collection starts January 1, 2026.
 - Patient Accessing their EHI
 - FHIR Usages
 - Immunization Administrations

“

Insight Measures

Vendors must make every effort to upgrade clients to the certified version, which includes the Insights functionality, by December 31, 2025.... and every year thereafter.

ONC is aware, vendors can't force clients to upgrade but we are expected to actively encourage clients to upgrade prior to December 1, 2026.



And then, more ... HTI-2 Propose Rule

- USCDI version 4
- SMART App Launch 2.2
- User-Access Brands and Endpoints
- Updated standards for encryption and decryption of EHI
- Various revision to several existing criteria
- Minimum standards Code set updates
- FHIR Bulk data enhancements
- New criteria for real-time prescription benefits
- Dynamic Client Registration Protocol
- New criteria for modular API capabilities
- New Payer, Electronic Prior Auth and Public Health API criteria
- New Imaging requirements
- Additions and Revisions to Insight Measures

“

Edition-less Criteria,
based on a TRUE
STORY...

Released on July 10,
2024, +1200 pages of
requirements nearly
impacting TouchWorks'
entire application base.

Final Ruling expected
December 2024 ...

Exciting News! VCRS Dashboards – MIPS Value Paths (MVPs)

VCRS 24.4 expected release, Dec. 2024

Phase 1: MIPS MVP Dashboards Release

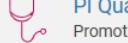
- Value in Primary Care
- Focusing on Women's Health
- Advancing Care for Heart Disease
- Optimal Care for Kidney Health
- Prevention and Treatment of Infectious Disorders
- Quality Care in Mental Health

- Clients with an existing “MIPS Estimator Licenses” will get access to MVP dashboards at no additional cost, enabling self submission
- Submit a Support case to request dashboard activation
- MIPS and MVP consultation and training are included with a TW Consulting Subscription service packages. Contact your Altera Client Success Executive for additional information

MVP Estimator Dashboards

Allscripts  Home My Content Settings Tools Logout Julie Wilson AAPTW2009999 Regulatory Dashboard

Regulatory Dashboard

 MIPS Estimator Merit-based Incentive Payment System	
 MVP Estimator MIPS Value Pathways Estimator	
 PI Quality Promoting Interoperability Quality	
 PCF Quality Primary Care First	
 Additional Quality Programs Additional Quality Programs	

Select regulatory program to access reporting dashboard

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MVP Estimator Dashboards

Allscripts Home My Content Settings Tools Logout Julie Wilson AAPTW2009999 Regulatory Dashboard

MVP 00001
Group submission TAX ID: **3468

All Clinicians (9) All Locations (33) All Taxonomies Value in Primary Care Actions

Patient Facing: Yes APM: No CMS CPIA Study: No HPSA: No PCMH: No Rural: No

◀ Return to Regulatory Dashboard Main Regulatory Dashboard > MVP Composite Estimator 2024

MVP Composite Estimator

Group Composite (0.0)
Cost (0)
Improvement Activities (0)
Promoting Interoperability (0)
Quality (0) 2024

Improvement Activities

Promoting Interoperability

Quality

Projected Scores

Composite Score
0 out of 100

Category Score
0 out of 100

Cost 0 out of 30

Improvement Activities
Report Required
Report data not available for this year.
Please run report component for set year to view score.

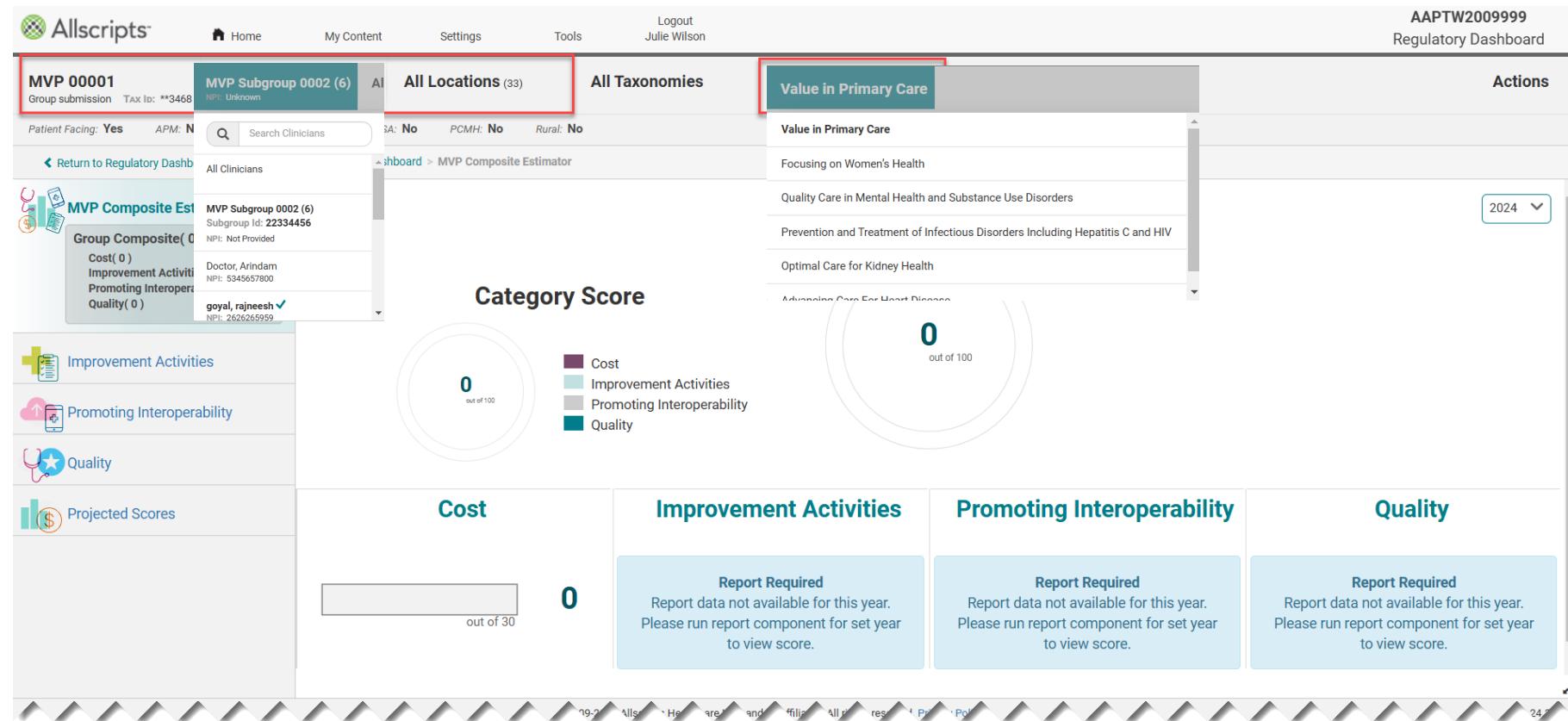
Promoting Interoperability
Report Required
Report data not available for this year.
Please run report component for set year to view score.

Quality
Report Required
Report data not available for this year.
Please run report component for set year to view score.

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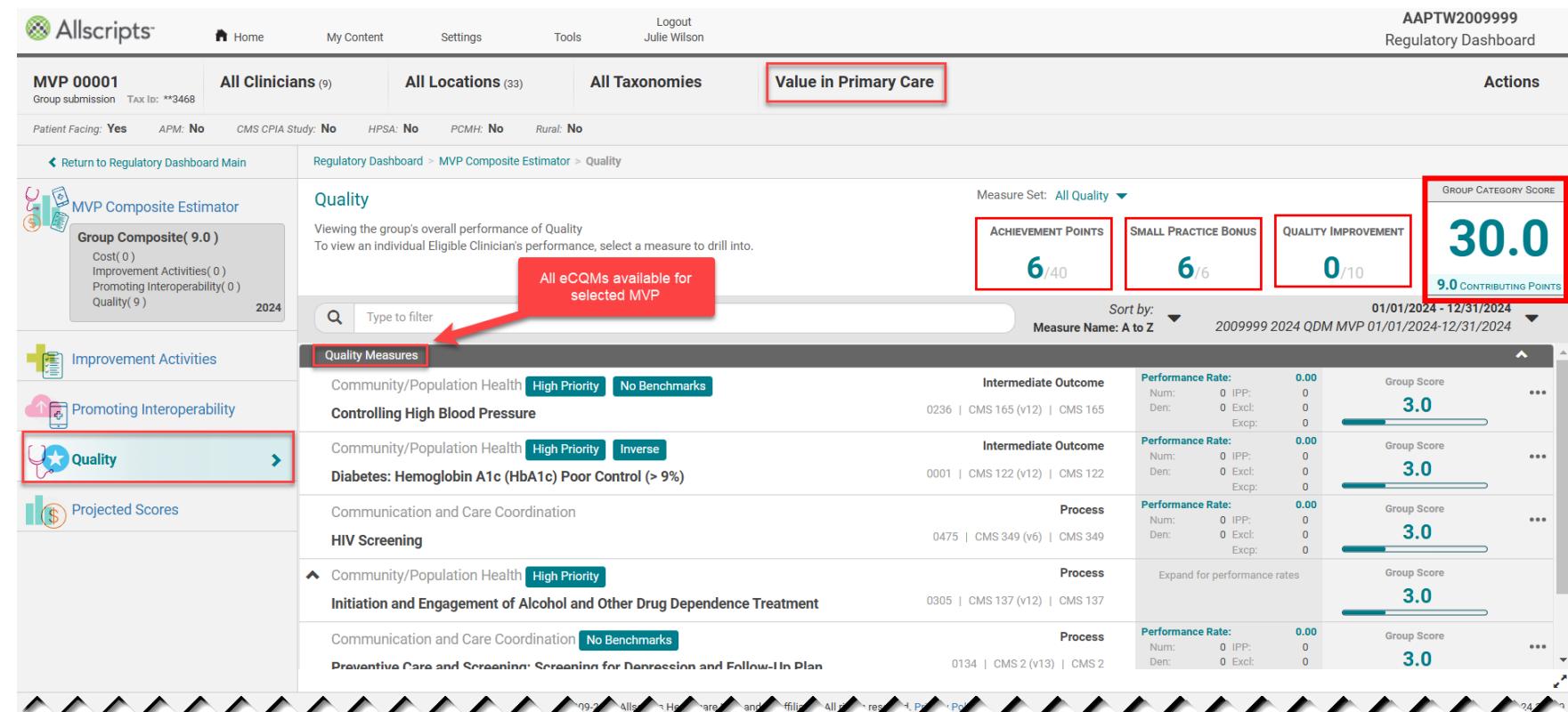
MVP Estimator Dashboards

- Supports Reporting for:
 - Individuals
 - Groups
 - Sub-groups
- MVP default ability available



MVP Estimator Dashboards – Quality Reporting

- Supports Scoring Calculations for:
 - Top 4 measure achievement points based on CMS benchmarks
 - Small Practice Bonus
 - Quality Improvement bonus
 - Category Score & Contributing Points Calculation



MVP Estimator Dashboards – Promoting Interoperability

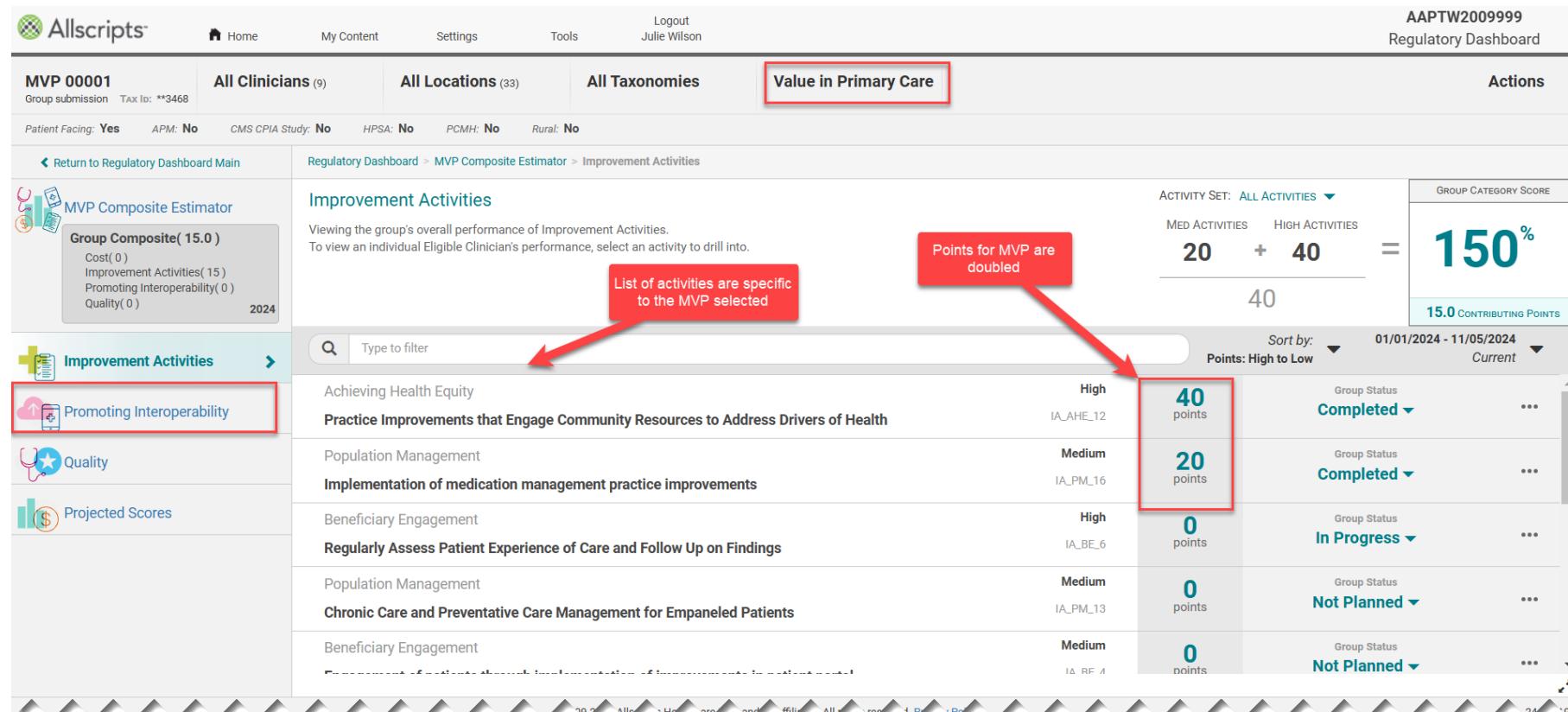
- All MVPs report on all the same measures and requirements as Traditional MIPS
- Scored the same as Traditional MIPS

The screenshot shows the Allscripts MVP Composite Estimator dashboard for the 'Promoting Interoperability' category. The top navigation bar includes 'Home', 'My Content', 'Settings', 'Tools', 'Logout Julie Wilson', and 'AAPTW2009999 Regulatory Dashboard'. The main content area is titled 'Promoting Interoperability' and displays a summary of the group's overall performance. A table lists various measures with their performance rates and group scores. The 'Promoting Interoperability' measure is highlighted with a red box. The overall group score is 0.0 / 100 contributing points. The table includes columns for Measure Identifier, Performance Rate, Group Score, and Exclusion status (Excluded). The table is sorted by Measure Identifier (A to Z) and has a current date range of 01/01/2024 - 11/05/2024.

Measure Identifier	Performance Rate	Group Score	Exclusion
PI_EP_1	0.00 Num: 0 Den: 0	Excluded	
PI_EP_2	0.00 Weighting: 0 or 10	Conducted 10	
PI_HIE_1	0.00 Num: 0 Den: 0	Excluded	
PI_HIE_4	0.00 Num: 0 Den: 0 All: 0	Excluded	
PI_HIE_5	0.00 Num: 0 Den: 0	Not Participated Excluded	

MVP Estimator Dashboards – Improvement Activities

- Supports Reporting for:
 - Individuals
 - Groups
 - Sub-groups
- Scoring reflects MVP rules (points doubled)



Registration for MVP is now open with the Quality Payment Program. You must register if you plan on submitting for MVP

The Merit-based Incentive Payment System (MIPS) Value Pathways (MVPs) registration window is open for the 2024 performance year. Individuals, groups, subgroups, and [Alternative Payment Model \(APM\) Entities](#) that wish to report an MVP can register **until December 2, 2024, at 8 p.m. ET**.

NEW FOR 2024: To register, you'll sign in to the [QPP website](#) with your HCQIS Access and Roles Profile (HARP) account. This is different from the 2023 process of completing an Excel form and emailing the QPP Service Center.

Exceed Regulatory Standards

Confidential

Your Mission, Our Contribution ... WE ARE IN THIS TOGETHER!



Navigating the complex & evolving regulatory requirements!

1

Partnered collaborations, over communication!

2

4

3

Stay in the know, understand how 'Regulatory' impacts you. Attend the TouchWorks **Regulatory Rally Series**.

States are enacting new laws too ... if you see something, say something!

Your Mission, Our Contributions We are in this Together!

Getting Assistance ...

TouchWorks Services offers different types of assistance consulting subscriptions; assists with MIPS, MVP, measure performance optimization or SAFER Guide consultation, etc... contact your Altera Client Success Executive.

Discussion Takeaways

- 1. End of Year Checklist**
- 2. MVP Estimator Dashboards with first 6 MVPs**
- 3. Don't Sweat It! Your Mission, Our Contribution We are in this together!**
- 4. Designed for you, the TW Regulatory Rally Series, stay in the know!**



QUESTIONS?

Improving Client Communication



Client Survey



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- Reporting: Streamlined reporting
- Integrations: Improved integration with external systems
- Security: Enhanced security measures

2024.2 - July 23

- Core: Enhanced patient care
- Cloud: Improved cloud performance
- Mobile: Advanced mobile design
- Reporting: New reporting features
- Integrations: Improved integration with EHR systems
- Security: Advanced security features

2024.3 October 29

- Core: Next-generation EHR
- Cloud: Revolutionary cloud technology
- Mobile: Revolutionary mobile design
- Reporting: Revolutionary reporting
- Integrations: Revolutionary integration
- Security: Revolutionary security features

**New EHR release if required

Call to action

Subscribe today!

Beginning in 2024, the performance period for the EHR in Category 2 will be 12 months. This means that you will have 12 months to demonstrate why you should be paid at a higher rate.

One report released in patch 6.

Client must have patch 6 or higher by their fiscal year reporting period. Reporting period begins July 1, 2024 for fiscal year patch 6 (2024-2025, January-July 6, 2025).

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We provide healthcare organizations and professionals with reliable, innovative technology solutions that enhance patient care outcomes and operational efficiency. This commitment shapes our daily operations, driving us to deliver solutions that elevate patient care and operational effectiveness.

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2024 Webinars

TouchWorks EHR Q1 Update Webinar

Watch the Recording

Download the Deck

View the Summary

We invite you to join us for the Q1 Update webinar on Feb 21 at 12 pm ET. The TouchWorks EHR leadership team will share crucial 2024 business strategic updates and release plans. During the webinar, our team will present the new strategic framework aimed at providing ongoing support to our clients through reliable and innovative technology. They will also cover important regulatory information and new professional subscription offerings.

Reference Information, Acronym Soup

ASTP – Assistant Secretary for Technology Policy ONC – Office of the National Coordinator

CHERT	Certified Health Electronic Record Technology
CHPL	Certified Health Product List
HTI	Health Data, Technology, and Interoperability
HTI-1	HTI Version 1, [Final Rule, Jan 2024]
HTI-2	HIT Version 2, [Proposed Rule, July 2024]
eCR	Electronic Case Reporting
DSI	Decision Support Intervention
FHIR	Fast Healthcare Interoperability Resources
USCDI	United States Core Data for Interoperability
SDOH	Social Determinants of Health

CMS - Centers for Medicare & Medicaid Services

QPP	Quality Payment Program
MIPS	Merit-based Incentive Payment System
eCR	Electronic Case Reporting
SAFER Guides	Safety Assurance Factors for EHR Resilience Guides
eCQI	Electronic Clinical Quality Improvement
eCQMs	Electronic Clinical Quality Measures
MVPs	MIPS Value Pathways

Other Notables

ACO	Accountable Care Organization
SDOH	Social Determinants of Health
VCRS	Veradigm Compliance Reporting Solution
AAP	Allscripts Analytical Platform

Reference Links

Acronym	Description	Website
ONC	Office of the National Coordinator	https://www.healthit.gov/
CHPL	Certified Health Product List	https://chpl.healthit.gov/#/search
HTI-1	HTI Version 1, [Final Rule, Jan 2024]	https://www.healthit.gov/topic/laws-regulation-and-policy/health-data-technology-and-interoperability-certification-program
HIT-2	HIT Version 2, [Proposed Rule, July 2024]	https://www.healthit.gov/topic/laws-regulation-and-policy/health-data-technology-and-interoperability-patient-engagement
FHIR	Fast Healthcare Interoperability Resources	https://www.hl7.org/fhir/
USCDI	United States Core Data for Interoperability	https://www.healthit.gov/isp/united-states-core-data-interoperability-uscdi

Reference Links

Acronym	Description	Website
QPP	Quality Payment Program	https://qpp.cms.gov/
MIPS	Merit-based Incentive Payment System	https://qpp.cms.gov/mips/mvps/learn-about-mips
eCR	Electronic Case Reporting	https://www.cdc.gov/ecr/php/index.html
SAFER Guides	Safety Assurance Factors for EHR Resilience Guides	https://www.healthit.gov/topic/safety/safer-guides
eCQMs	Electronic Clinical Quality Measures	https://www.cms.gov/medicare/regulations-guidance/promoting-interoperability-programs/electronic-clinical-quality-measures-basics
MVPs	MIPS Value Pathways	https://qpp.cms.gov/mips/mvps/learn-about-mvp-reporting-option



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