Practice Reporting Committee

Minutes

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| Date: Tuesday 9/27/16 |  | | Start/End Time: 8:00 – 9:30 am | | |
| **Location**: RIQI 50 Holden Street, Providence RI (Washington) |  | | Call in number: 508-856-8222 Code: 2525 (Host: 2116)  **Go to Meeting:** [**https://global.gotomeeting.com/join/590765461**](https://global.gotomeeting.com/join/590765461) | | |
| Meeting Information: | |  | **CSI Management and Speakers** | | |
| Meeting Purpose/Objective:  Best practice sharing amongst for Practice Reporting and Performance Improvement  Attachment:  NetCenergy HIPAA Compliance PowerPoint  2016 Learning Collaborative Flyer  NCQA 2017 draft reporting requirements “PCMH Recognition Re-design: Annual Reporting Requirements to Sustain Recognition” | |  | Patty Kelly-Flis Co-Chair  Andrea Galgay Co-Chair  Marie Sarrasin, RIQI  Donald Nokes, NetCenergy  Tom King, NetCenergy  Jonathon Mudge, BVCHC  Kimberly St. Jean, CCMA  Jillian Sanchez, BCBSRI  Caitlyn Towey, Brown PCTI  Lanette Burke, RIDOH  Lauren Morton, BCBSRI  Melissa Deluca, MARI  James Cipriano, Southcoast  Ashley Fishback, RIQI  Cynthia Souther, Thundermist  Marna Heck-Jones, Lifespan | Susanne Campbell, CTC  Candice Brown, CTC  Lynda Greene, WRHS  Pam Costello, Integra  Jessica Nadeau, UM  Andrea Leon, FCC/IMC  Solmaz Behtash, RI-IMPs  Lois Teitz, CCAP  Raquel de Cardenas, UIM  C. Carpenter, CNE Primary Care  Neerja Sud, IMP  Sue Dettling, RIQI  Suzanne Herzberg, Brown  Michele Wolfsberg, Tufts Health Plan  Tim Messitt, Ocean State Medical  Louisa P. Jones, Lifespan |  |
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| # | Owner / Time | Comments |
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| 1 | Patty Kelly-Flis  Andrea Galgay  PR co-chairs  5 minutes | **Welcome**   * Introductions * Review agenda |
| 2. | Donald Nokes  Tom King  NetCenergy   1. minutes | **HIPAA Security Risk Assessment**     * HIPAA is 20 years old   + HealthIT.gov offers self-guided assessments * Assessments must cover 3 safeguards   + Administrative     - Accurate Documentation – if you did not document process and procedures, it was never done   + Physical     - Leaving data on computer screen and walking away   + Technical     - Operating System updates * In June 2016, Rhode Island passed the most strict regulation for Breach Notifications in the nation * An organization must be a covered entity if they transmit Personal Health Information (PHI) * Security Risk Analysis relates to Office procedures and how your data is accessed   + Not solely dependent on EHR vendor   + New RI law requires that all organizations that transmit PHI must complete a Risk Assessment * Willful Neglect occurs when an audit is completed, the organization is aware of their gaps but still do nothing to correct the issues identified * The most commonly neglected Corrective Action Plan (CAP) Requirement that results in paid fines is “Conduct Risk Analysis / Establish Risk Management Process” * SCAP = Security Content Automation Protocol * Documentation (i.e. remediation reports) should be in the same format used by the auditors for an easier audit experience   + Site Inspections     - The auditor will first experience your onsite security       * Ensure there is a sign-in sheet for non-patients for creating a track log of site visitors         + To locate potential cause of breach   + Identified Deficiencies     - After an assessment has been completed, the gap report is prioritized and broken down into 4 Quarters       * All deficiencies do not have to be completed, but progress for quarterly improvement is expected by auditors         + Begin with highest priorities first * NIST = National Institute of Standards & Technology * D-R Plan = Disaster Recovery Plan * NetCenergy – General Cost and Time of Experience   + Cost – range $2500 for single site, more for multi-site practices with different EHRs   + Time – generally a couple weeks to complete from start to finish     - Dependent on complexity and techniques being used * Lynn Friedman will be hosting a webinar on Friday, October 19th from 7:30AM – 9AM |
| 3 | Andrea Galgay  Susanne Campbell  10 minutes | **NCQA Draft Annual Report Requirements for 2017**   * What is coming down the pike?   + Special recognition regarding BH and Psycho Social determinants |
| 4 | Patty Kelly-Flis  Andrea Galgay  10 minutes | |  |  | | --- | --- | | Susanne | OHIC Quality Measures and Cost Management Strategies Cost Containment: due to OHIC 10/15   * Baseline Quality Measures and Attestation   + Email sent out by Marie last night to PRC Distribution List – please respond to Marie   + If completed, get in Cost Management Survey to OHIC as soon as possible – Oct 15th is a Saturday – so possible   to submit on Monday, Oct 17th   * Q3 Measures will be submitted to both OHIC and RIQI/RIPCPC as normal   + The CTC newsletter will contain OHIC website links for submission of measures * Practice Payment Information   + For CTC Practices – the CTC payment supersedes Payers Payment   + Practices Leaving CTC     - will receive payment directly from Payers, or     - will have payment funneled through ACO – must talk to ACO Leadership * Advanced Practices as of end of June 2016 do not have to report to CTC anymore – their data will be gone from   Portal   * + Only MAPCP Practices will be receiving payment through end of the year * Practices will only be held to 80% of Year 1 OHIC Requirement – according to where you are right now   + Example: Year 3 Practice will answer where they are now under Year 1 | |
| 5 | Susanne Campbell  5 minutes | **2016 CTC Learning Collaborative**   * **206 people have registered to date**   [**https://www.eventbrite.com/e/2016-ctc-ri-annual-learning-collaborative-advancing-primary-care-practicing-with-value-tickets-26471924238**](https://www.eventbrite.com/e/2016-ctc-ri-annual-learning-collaborative-advancing-primary-care-practicing-with-value-tickets-26471924238) |
| 6 | Andrea  Patty  5 minutes | **Next meeting: 10/25/16 at RIQI 8AM to 9:30AM**   * There will be a PCMH-Kids meeting from 7:30AM – 8AM |
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**ACTION ITEM LOG**

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| **Added** | **Ref. #** | **Assignee** | **Action /Status** | **Due** | **Closed** |
| 9/27 | 1 | Andrea Galgay | Contact Cory King to regarding ability to save survey prior to full completion |  |  |
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