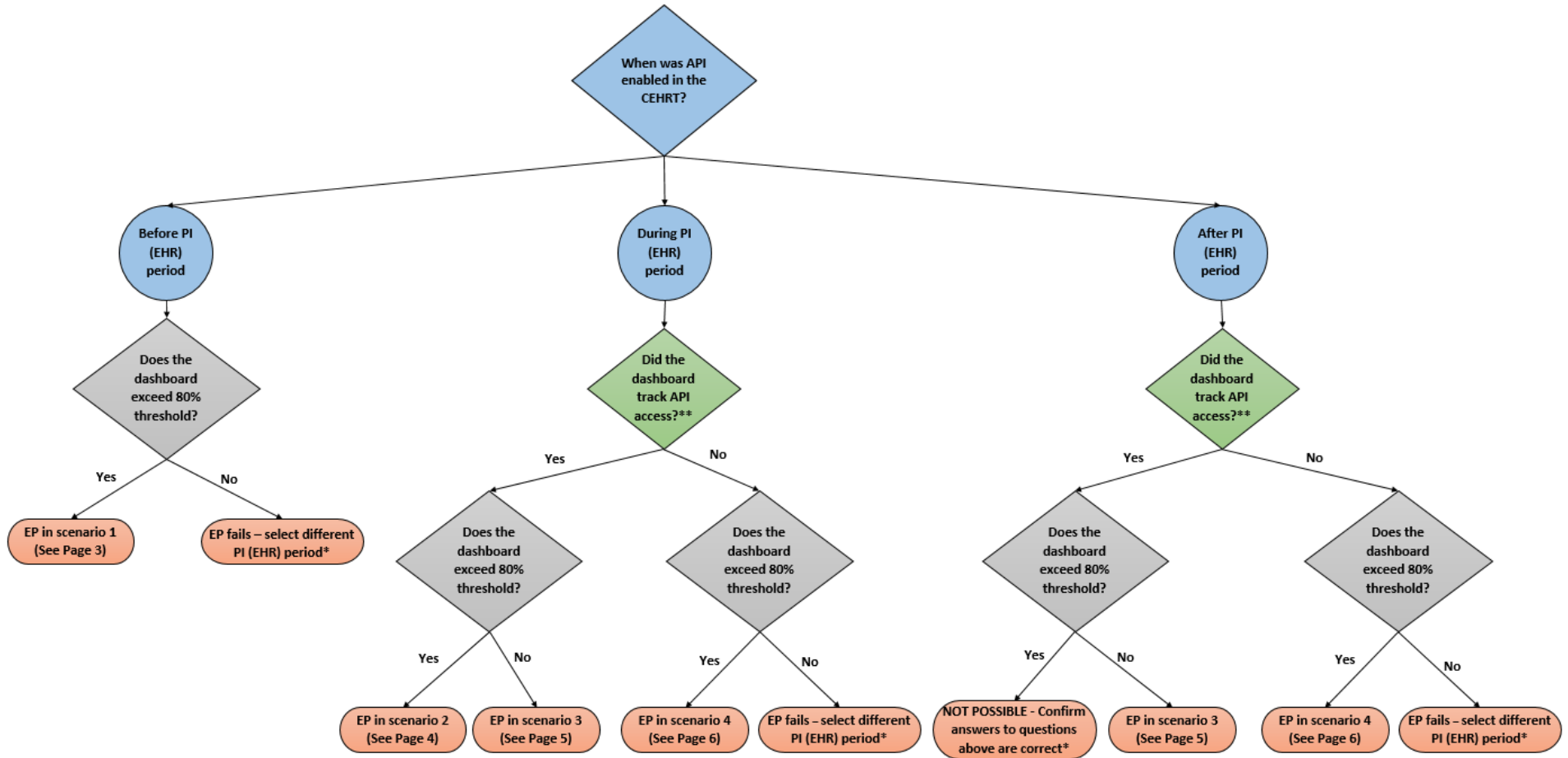


## PATIENT ELECTRONIC ACCESS – PROGRAM YEAR 2019 API DOCUMENTATION REQUIREMENTS

API = application programming interface  
 MU = meaningful use



\*An EP may still meet the threshold if the EP used the opt-out patient method. See page 7 for more information.

\*\*To determine the answer to this question, conduct the test on page 2. If EP is still unsure whether their CEHRT dashboard is tracking API access, confirm with the CEHRT vendor.

## TEST TO DETERMINE IF THE CEHRT DASHBOARD TRACKED API

If API was enabled during or after the PI (EHR) reporting period, the EP needs to determine whether the CEHRT tracked API access.

To determine whether the CEHRT's dashboard tracked API access, conduct the following test:

**Step 1)** Obtain the API enable date. If necessary, contact the CEHRT vendor to obtain this date.

**Step 2)** Review the Patient Electronic Access measure 1 in the CEHRT dashboard for any 90-day period that is **entirely** prior to the API enable date.

### Test Results for measure 1:

- ❖ If the test results in a numerator equal to 0, the CEHRT tracked both API and VDT, and the EP falls into either Scenario 2 or Scenario 3.
- ❖ If the test results in a numerator other than 0, the CEHRT tracked only VDT, and the EP falls into Scenario 4.

### Example:

There are 5 patients who were provided timely access to view, download, transmit data in the test period.

- ❖ **Measure Numerator:** Number of unique patients who were provided timely access to view, download, transmit data AND their data was accessible through API.
- ❖ **Test results of 0** in the numerator means the CEHRT was programmed to capture the view, download, transmit (VDT) function for these 5 patients AND was programmed to capture API accessibility. Since the API was not enabled in this test period, the CEHRT accurately calculated a numerator of 0.
- ❖ **Test results of 5 (greater than 0)** in the numerator means the CEHRT was programmed to capture the view, download, transmit (VDT) function AND was NOT programmed to capture API accessibility. Since the API was not enabled in this test period, the CEHRT is inaccurately reporting a numerator of 5.

**Note: All 2015 CEHRTS are programmed to capture VDT as part of the certification process. The issue at hand is that API access is not always enabled.**

## PROGRAM YEAR 2019 - SCENARIO 1

API was enabled prior to the start of the PI (EHR) reporting period and the EP exceeds 80%.

### Documentation required:

- ❖ A CEHRT-generated dashboard for the selected PI (EHR) reporting period that shows the following:
  - **Provider's Name**
  - **Numerator**
  - **Denominator**
  - **Measure Percentage**
  
- ❖ Documentation supporting API was enabled must show the following:
  - **API enabled date**
  - **Provider/Practice/Location Name**
  - Documentation can be submitted in different formats
    - CEHRT screenshot with enabled date and provider name
    - Vendor letter confirming the date the API was enabled
  
- ❖ Copy of instructions provided to patients on how to authenticate their access through an API.
  
- ❖ Copy of information given to patients on available applications that leverage the API.

**ePIP Numerator = CEHRT Dashboard numerator + Entries in "Opt-Out Patient Audit Log"\***

\* Opt-Out Patients documentation required only if applicable (*see page 7 for more information*).

## PROGRAM YEAR 2019 - SCENARIO 2

API was enabled during the PI (EHR) reporting period, the CEHRT dashboard tracked API access, and the EP exceeds 80%.

### Documentation required:

- ❖ A CEHRT-generated dashboard for the selected PI (EHR) reporting period that shows the following:
  - **Provider's Name**
  - **Numerator**
  - **Denominator**
  - **Measure Percentage**
  
- ❖ Documentation supporting API was enabled must show the following:
  - **API enabled date**
  - **Provider/Practice/Location Name**
  - Documentation can be submitted in different formats
    - CEHRT screenshot with enabled date and provider name
    - Vendor letter confirming the date the API was enabled
  
- ❖ Copy of instructions provided to patients on how to authenticate their access through an API.
  
- ❖ Copy of information given to patients on available applications that leverage the API.

**ePIP Numerator = CEHRT Dashboard numerator + Entries in "Opt-Out Patient Audit Log"\***

\* Opt-Out Patients documentation required only if applicable (*see page 7 for more information*).

## PROGRAM YEAR 2019 – SCENARIO 3

**API was enabled during or after the PI (EHR) reporting period, the CEHRT dashboard has a value less than 80%, and the CEHRT dashboard tracked API access.**

**Documentation required:**

- ❖ A CEHRT-generated dashboard for the selected PI (EHR) reporting period that shows the following:
  - **Provider’s Name**
  - **Numerator**
  - **Denominator**
  - **Measure Percentage**
  
- ❖ Documentation supporting API was enabled must show the following:
  - **API enabled date**
  - **Provider/Practice/Location Name**
  - Documentation can be submitted in different formats
    - CEHRT screenshot with enabled date and provider name
    - Vendor letter confirming the date the API was enabled
  
- ❖ Copy of instructions provided to patients on how to authenticate their access through an API.
- ❖ Copy of information given to patients on available applications that leverage the API.
- ❖ Letter confirming that the EP added patient visits to the numerator to exceed the 80%.
  
- ❖ Generate “VDT and API Audit Log” *(see example below)*
  - Determine gap period *(dates between the start of the PI (EHR) reporting period and the API access enable date)*.
  - Include patient visits that occurred during the gap period.
  - Do not include patient visits that occurred after the PI (EHR) reporting period.
  - Do not include patient visits that were included in the numerator of the CEHRT dashboard for objective 5, measure 1.
  - Additional documentation to validate the accuracy of the audit log may be requested if selected for post-payment audit. For example, a copy of the email sent to Patient ID 116.

Patient ID	Patient DOB	Provider	Service Date	Date VDT Access Provided	Date API Documentation Provided
111	9/9/2000	Dr. Oz	10/1/2019	10/1/2019	11/3/2019
112	3/21/1996	Dr. Oz	10/2/2019	10/2/2019	11/3/2019
113	5/2/1985	Dr. Oz	10/3/2019	10/3/2019	11/3/2019
114	6/4/1990	Dr. Oz	10/4/2019	10/4/2019	11/3/2019
115	7/2/1995	Dr. Oz	10/10/2019	10/10/2019	11/3/2019
116	10/11/1975	Dr. Oz	10/10/2019	10/10/2019	11/3/2019
117	5/9/1965	Dr. Oz	10/10/2019	10/10/2019	11/3/2019
118	11/20/1973	Dr. Oz	10/10/2019	10/10/2019	11/3/2019
119	8/9/1983	Dr. Oz	10/10/2019	10/10/2019	11/3/2019
120	12/2/1979	Dr. Oz	10/10/2019	10/10/2019	11/3/2019

**ePIP Numerator = CEHRT Dashboard numerator + Entries in “VDT and API Audit Log” + Entries in “Opt-out Patient Audit Log”\***

\* Opt-Out Patients documentation required only if applicable *(see page 7 for more information)*.

## PROGRAM YEAR 2019 - SCENARIO 4

**API was enabled during or after the PI (EHR) reporting period and the CEHRT dashboard incorrectly shows a percentage above 80% threshold because CEHRT dashboard is only tracking VDT and did not track API.**

**Documentation required:**

- ❖ A CEHRT-generated dashboard for the selected PI (EHR) reporting period that shows the following:
  - **Provider’s Name**
  - **Numerator**
  - **Denominator**
  - **Measure Percentage**
  
- ❖ Documentation supporting API was enabled must show the following:
  - **API enabled date**
  - **Provider/Practice/Location Name**
  - Documentation can be submitted in different formats
    - CEHRT screenshot with enabled date and provider name
    - Vendor letter confirming the date the API was enabled
  
- ❖ Copy of instructions provided to patients on how to authenticate their access through an API.
  
- ❖ Copy of information given to patients on available applications that leverage the API.
  
- ❖ “API Audit Log” (example below) for the entire PI (EHR) reporting period.
  - Include in the API Audit log patient visits that occurred during the PI (EHR) reporting period.
  - Only include patient visits that were included in the numerator of the CEHRT dashboard for objective 5, measure
  - Additional documentation to validate the accuracy of the audit log may be requested if selected for post-payment audit. For example, a copy of the email sent to Patient ID 116.

Patient ID	Patient DOB	Provider	Service Date	VDT Access Provided	Date API Documentation Provided
111	9/9/2000	Dr. Oz	10/1/2019	Yes	11/3/2019
112	3/21/1996	Dr. Oz	10/2/2019	Yes	11/3/2019
113	5/2/1985	Dr. Oz	10/3/2019	Yes	11/3/2019
114	6/4/1990	Dr. Oz	10/4/2019	Yes	11/3/2019
115	7/2/1995	Dr. Oz	10/10/2019	Yes	11/3/2019
116	10/11/1975	Dr. Oz	10/10/2019	Yes	11/3/2019
117	5/9/1965	Dr. Oz	10/10/2019	Yes	11/3/2019
118	11/20/1973	Dr. Oz	10/10/2019	Yes	11/3/2019
119	8/9/1983	Dr. Oz	10/10/2019	Yes	11/3/2019
120	12/2/1979	Dr. Oz	10/10/2019	Yes	11/3/2019

**ePIP Numerator = Entries in “API Audit Log” + Entries in “Opt-out Patient Audit Log”\***

**\* Opt-Out Patients documentation required only if applicable (see page 7 for more information).**

## OPT-OUT PATIENT METHOD

**CMS allows EPs to include a patient in the numerator of objective 5 measure 1 and measure 2 if the patient elects to “opt-out” of electronically accessing their health information.**

- The patient must still be included in the denominator.
- An EP may count an opt-out patient in the numerator if the patient is provided all of the necessary information to subsequently access their information, obtain access through a patient-authorized representative, or otherwise opt back in without further follow up action required by the EP.

**Documentation required:**

The EP must provide API documentation to all patients who opt-out of seeing their PHI. If the API documentation is provided via a patient portal, the EP must separately provide it to all opt-out patients via another means because patients will not be able to view the documentation in the portal.

- ❖ Create an Opt-Out Patient Audit Log (example below) including the patient name or identifier and date of service.
  - Do not include patients in the Opt-Out Patient Audit Log that are already included in the numerator of the EP’s CEHRT dashboard, the VDT and API Audit Log, or the API Audit Log.
  - The Opt-Out Patient Audit Log must include only patients that had a visit during the PI (EHR) reporting period.
- ❖ Additional documentation to validate the accuracy of the audit log may be requested if selected for post-payment audit. Supporting documentation must demonstrate the patient willingly chose to opt-out.
  - Ex: Signed a document stating they opt-out
  - Ex: Patient provided all the necessary information but did not login to the patient portal

Patient ID	Patient DOB	Provider	Service Date	Health Information Made Available Timely	Patient Opted-Out of Participation
111	9/9/2020	Dr. Oz	10/1/2019	Yes	Yes
112	3/21/1996	Dr. Oz	10/2/2019	Yes	Yes
113	5/2/1985	Dr. Oz	10/3/2019	Yes	Yes
114	6/4/1990	Dr. Oz	10/4/2019	Yes	Yes
115	7/2/1995	Dr. Oz	10/5/2019	Yes	Yes
116	10/11/1975	Dr. Oz	10/6/2019	Yes	Yes
117	5/9/1965	Dr. Oz	10/7/2019	Yes	Yes
118	11/20/1973	Dr. Oz	10/8/2019	Yes	Yes
119	8/9/1983	Dr. Oz	10/9/2019	Yes	Yes
120	12/2/1979	Dr. Oz	10/10/2019	Yes	Yes