

HealthAdvantage CONNECT FAQs

When will HealthAdvantage CONNECT be available?

We will work with interested practices beginning in April 2010 to identify the three pilot implementations for Fall 2010.

How long will I be able to take advantage of the EMR Assistance Program?

The exception to the Physician's Self-Referral Law (Stark) that permits the offer of financial assistance expires at the end of 2013, after which we will no longer be able to offer the EMR Assistance Program. We will continue to offer *HealthAdvantage CONNECT* after that time, but without the financial assistance.

How do I qualify for the EMR Assistance Program?

You must be a medical staff member and either not currently using an EMR in your practice or currently using an EMR for which an upgrade to *HealthAdvantage CONNECT* will result in a significant enhancement of functionality. Federal regulations permit financial assistance to be provided to physicians who may already possess an EMR, but only where the services and items provided are "not technically or functionally equivalent to items or services the physician already possesses or has obtained." The regulations specifically permit financial assistance if the new EMR results in "upgrades of items or service that enhance the functionality of the physicians' existing technology, including upgrades that make software more user-friendly or current" or in "standardization of systems among donors and physicians provided that the standardization enhances the functionality of the electronic health records system (and any donated software is interoperable)." You will automatically receive a 70% subsidy towards those start-up costs that we are able to subsidize. You may also qualify for an additional 10% "Good Install Credit" if you meet criteria predictive of a smooth installation.

What does the EMR Assistance Program cover?

The EMR Assistance Program covers the software license, training, implementation, and go-live support costs for the EMR and Practice Management suite. We are unable to subsidize the cost of any additional hardware necessary to support the system. We are **not** subsidizing the monthly subscription fee, so your monthly cost will not change as a result of the expiration of the Stark exception in 2013.

How much will it cost me?

The following is a sample estimated cost for a *single provider practice* with comparisons for other comparable EMR/Practice Management (PM) packages. Costs may vary based on size of practice and/or customization needs for the practice.

	<i>HealthAdvantage CONNECT(EMR/PM)</i>	Other EMR/PM packages
Initial License and Installation/Training Fee (<i>with EMR Assistance and assuming Good Install criteria are met</i>)	\$5,000	\$15,000+
Hardware (estimated)	\$8,000	\$8,000
Monthly Fee	\$450-500	\$400 - \$1000+
Additional fees: statement printing/ office connectivity/ office hardware support	varies	varies

What are the benefits of subscribing to HealthAdvantage CONNECT over other comparable services?

- **Robust clinical information:** *HealthAdvantage CONNECT* provides you with instant access to your patients' clinical history at all Hawai'i Pacific Health hospitals and clinics in a single EMR.
- **Practice efficiency:** The *HealthAdvantage CONNECT* integrated EMR and Practice Management system provides seamless integration between registration, scheduling, clinical documentation and billing. This can reduce the rework frequently required for systems which are *interfaced* rather than *integrated*.
- **Experience:** Over the last six years, Hawai'i Pacific Health has successfully implemented Epic in most of our clinic locations. A dedicated *HealthAdvantage CONNECT* team will bring this experience to your practice with support to successfully get you through this transition.
- **Epic features:** Epic is consistently ranked higher than other EMR packages (see attached KLAS comparison). Here are a few of the other features which offer outstanding value to the independent physician:
 - order entry and result interface with both local laboratories-CLH & DLS
 - MyHealthAdvantage: A free, on-line patient portal that allows patients to schedule appointments, communicate with their care team, view and chart test results, and refill prescriptions
 - integrated electronic eligibility verification
 - e-prescribing
- **Future enhancements:** Your practice will be eligible to benefit from any on-going Epic upgrades, features and reporting as Hawai'i Pacific Health address new requirements for "meaningful use" and quality reporting.

Can I interface the Epic EMR with my current billing system? No, we will not be supporting interfaces between the Epic EMR and non-Epic billing systems.

Will HealthAdvantage CONNECT include a billing service? We can train your current billing service how to continue billing for you through *HealthAdvantage CONNECT*, but we will **not** provide billing services-only the billing software. In the future, we may provide a list of third party billing services that you can choose from if your current billing service is unwilling to process your claims through *HealthAdvantage CONNECT*.

Will my information be kept confidential? Your billing information will be kept confidential. Only your staff will be able to see your billing, scheduling and revenue information. Your clinical patient information will be part of the shared clinical database which is protected by HIPAA compliant security.

Will subscribing to HealthAdvantage CONNECT allow me to qualify for "meaningful use" criteria for receiving the American Recovery and Reinvestment Act of 2009 (ARRA) stimulus money?

All the tools necessary to enable you to qualify for ARRA stimulus money are included. However, your qualification will be dependent on your use of those tools. Tools available for "meaningful use" include:

- e-prescribing
- patient safety support (drug/ drug, drug/ allergy, etc)
- electronic charting and documentation
- health maintenance reminders
- secure, remote access to patient charts
- secure, HIPAA compliant means of sharing information with other caregivers and patients, including a patient portal

- electronic eligibility verification
- electronic claims submission

How much ARRA stimulus money could I qualify for?

This depends on how soon you are first able to demonstrate “meaningful use”, and whether you choose to apply for the Medicare or Medicaid incentive program. See http://www.cms.hhs.gov/recovery/11_healthit.asp for more information

NOTE: All of the funds come from CMS or Medicaid programs.

Medicaid: Providers who see more than 30% of patients paying with Medicaid/Quest are eligible for \$63,750 over 5 years. In addition, pediatricians who don’t meet this threshold, but see more than 20% of patients paying with Medicaid/Quest are eligible for \$44,500 over 6 years. You must first demonstrate “meaningful use” no later than 2016 to qualify to participate in the program.

Medicare: Physicians who do not have a large Medicaid volume, but do accept Medicare can receive up to \$44,000 over five years, at the following payment schedule:

Payment Year	First Year You Demonstrate Meaningful Use				
	2011	2012	2013	2014	2015 or later
2011	\$18,000	-	-	-	
2012	\$12,000	\$18,000	-	-	
2013	\$8,000	\$12,000	\$15,000	-	
2014	\$4,000	\$8,000	\$12,000	\$12,000	
2015	\$2,000	\$4,000	\$8,000	\$8,000	\$0
2016	-	\$2,000	\$4,000	\$4,000	\$0
Total	\$44,000	\$44,000	\$39,000	\$24,000	\$0 plus 1% annual reduction in Medicare fees

The amount of payment you receive is calculated at 75% of your submitted Medicare allowable charges, up to the above capped amount for the year. Note that if you do not demonstrate meaningful use by 2014, you will see an annual 1% reduction in Medicare fees for every year you do not demonstrate meaningful use down to 97% of the regular fee schedule. This may be further reduced to 95%. For more information go to: http://www.cms.hhs.gov/recovery/11_healthit.asp .