In selecting a vendor, we were deliberate and careful with our process,” says Dr. Teresa Marts, a physician with Family Practice Associates in Winner, South Dakota. “We took the time to identify the goals that were most important to us and decided these areas included better workflow, especially around phone calls and nurses’ activities; the ability to create meaningful reports; and a system that was user friendly. Honestly, making the change to an EHR wasn’t something any of us looked forward to. We were nervous our clinic could come to a grinding halt, and we didn’t feel that was an option. We decided that selecting MMIC Health IT to install NextGen and provide our ongoing IT support needs would get us the closest to our vision for the clinic.”

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Case Study: Family Practice Achieves Unexpected Efficiencies

“Why should I care about meaningful use?”

A: Eligible professionals (EP) and eligible hospitals (EH) can earn monetary incentives up to $44,000 + per provider through Medicare, or $63,750 per provider through Medicaid, to help offset the cost of implementing an EHR.

Q: How do I know if I’m eligible?

A: EPs and EHs have been defined under each program as follows:

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What Every Administrator Should Know About Meaningful Use.

In July 2010, Health and Human Services (HHS) published the final rule on the EHR Incentive Program (Meaningful Use) established under the HITECH Act. These programs offer incentive payments for the “meaningful use” of certified EHR technology. Ultimately, the use of EHRs will help achieve health and efficiency goals seeking to improve the health of Americans and the performance of their healthcare system.

The Recovery Act specifies three main components of Meaningful Use:

1. The use of a certified EHR in a meaningful manner
2. The use of certified EHR technology for electronic exchange of health information to improve quality of health care; and
3. The use of certified EHR technology to submit clinical quality and other measures. Participants will be required to demonstrate meaningful use of certified EHR technology based on staged criteria requirements, with functionality/criteria expected to increase with each new reporting stage.

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What Our Clients Are Saying:

“I have felt from day-one, working with MMIC Health IT, that we were in good hands and among friends. The same personal service we experienced 10 years ago is still experienced today. Each little, and big thing they all do is so appreciated!”

— Brody Wheaton, Lakeside Sports and Pain Clinic

Medicare Eligible Professionals:
- Doctors of Medicine or Osteopathy
- Doctors of Dental Surgery or Dental Medicine
- Doctors of Pediatric Medicine
- Doctors of Optometry
- Critical Access Hospitals (CAHs)
- Chiropractors

Medicare Eligible Hospitals
- “Subsection (d) hospitals” in the 50 states or DC that are paid under the Dental Medicine hospital inpatient prospective payment plan
- Critical Access Hospitals (CAHs)
- Medicare Advantage (MA) Hospitals

Note: EPs may not be hospital-based (90% of services performed in inpatient or ER setting)

Medicaid Eligible Professionals
- Physicians (Pediatricians have special eligibility and payment rules)
- Nurse Practitioners (NPs)
- Certified Nurse-Midwives (CNMs)
- Dentists
- Physician Assistants (PAs) who provide services in a FQHC or RHC that is led by a PA

Medicaid Eligible Hospitals
- Acute Care Hospitals (including CAHs) with at least 10% Medicaid patient volume
- Children’s Hospitals (no Medicaid volume requirements)

Note: EPs may not be hospital-based. EPs must also meet patient volume criteria, providing services to those attributable to Medicaid or, in some cases, needy individuals.

Q: Are there additional qualifications beyond being an EP, EH, or CAH?
A: Yes. EPs and EHs must have “certified” EHR Technology. The Office of the National Coordinator (ONC) has published EHR certification standards for meaningful use functionality. EPs and EHs need not have certified technology to enroll, but must have adopted, implemented, upgraded or meaningful use-certified EHR technology before incentive payments will be received through either program.

The standards and certification criteria final rule specifies the technological capabilities EHR technology will need to include in order for the EHR technology to be certified by an ONC-ATCB (Authorized Testing Certification Body). Certification by an ATCB will signify to eligible professionals, hospitals, and critical access hospitals that the EHR they adopt is capable of supporting their efforts to meet the goals and objectives of meaningful use.

Q: How do I register for the Medicare and Medicaid incentive programs?
A: Registration for the Medicare EHR Incentive Program began on January 3, 2011 and is available online at https://ehrincentives.cms.gov. Although the Medicaid EHR Incentive Programs began on January 3, 2011, not all states are ready to participate. Information on when registration will be available for Medicaid EHR Incentive Programs in specific states is posted at http://www.cms.gov/EHRIncentivePrograms/40_MedicaidStateInfo.asp.

Q: What information will I need to register?
Eligible Providers will need:
- National Provider Identifier (NPI).
- National Plan and Provider Enumeration System (NPPES) User ID and Password.
- Payee Tax Identification Number (if you are reassigning your benefits).
- Payee National Provider Identifier (if you are reassigning your benefits).
- An enrollment record in the Provider Enrollment, Chain, and Ownership System (PECOS) (Medicare incentive program only)

Eligible Hospitals will need:
- CMS Identity and Access Management (I&A) User ID and Password.
- CMS Certification Number (CCN).
- National Provider Identifier (NPI).
- Hospital Tax Identification Number.

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Q: If I participate in the Meaningful Use program, am I able to participate in other incentive programs simultaneously?
A: Yes. However, there are some limitations.

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<thead>
<tr>
<th>Program</th>
<th>EHR Incentive</th>
<th>PQRI</th>
<th>eRx</th>
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<tbody>
<tr>
<td>Medicare</td>
<td>Yes</td>
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<td>No</td>
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<tr>
<td>Medicaid</td>
<td>Yes</td>
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For further information on incentive programs, please visit: https://www.cms.gov/MLNProducts/downloads/EHRIncentivePayments-ICN903691.pdf

Q: Will there be any penalties for non-compliance with Meaningful Use?
A: These incentive programs are voluntary. However, all Medicare providers will have a payment reduction in 2015 if they are not demonstrating meaningful use (regardless of whether they are participating in the Medicaid incentives vs. Medicare). For example, if you are a physician and accept both Medicare and Medicaid, you must be demonstrating meaningful use by 2015 or you will see a Medicare fee-schedule reduction for all your Medicare claims. The payment reduction for Medicare Fee-for-Service physicians starts at 1% and increases up to 5% for every year that you are not demonstrating meaningful use. Hospital-based physicians are not subject to possible payment reductions.

Primary Source: http://www.cms.gov/

What You Don’t Know Can Hurt You

Does your practice have an up-to-date disaster recovery model?
Is your current IT solution fully customized to best meet the needs of your practice?
Can you accurately budget for your monthly IT costs?
Does your current IT solution offer a support model that works for you today, and will work for you tomorrow when your needs change?

If you answered no to any or all of the questions above, don’t worry. MMIC Health IT can help.

“We are a small medical practice that does not have an IT professional on staff. MMIC Health IT has allowed us to have the benefits of having a professional manage our technology for a reasonable cost. We have very little down time because of a quick response time and remote access to our system. MMIC Health IT staff always provides personal service in a professional way.”

—Jan Nervick, Maple Grove Surgical Specialists
Case Study: Family Practice Achieves Unexpected Efficiencies

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“Some of the specific features in NextGen we really liked were the MasterIM page where everything is accessible from one page. We liked having a basic summary where we could access our medlist, previous visits, just about anything. We also thought the reporting capabilities were what we were looking for.”

Even though the practice was ready to move to an EHR and everyone was looking forward to the increased efficiencies electronic records would provide, the process of getting there was daunting. In fact, the practice admits that many of the benefits of implementing the EHR weren’t anticipated.

“Printing off patient education materials, the well-child templates, medication list – we didn’t know how much we would use them. Now the nurses love being able to share information such as progress notes to other clinics – right after we see the patient. We also didn’t realize how much we would love being able to fax directly from the EHR. There have been other unexpected benefits, too: Today, the phones no longer ring off the hook while we search all over the clinic to locate charts. In addition, H&Ps are becoming much faster because we have an intact problem list, plus our charting can be done from home and we can answer phone call messages from anywhere outside the office, which is a huge benefit,” adds Dr. Marts.

Dr. Mary Carpenter, a physician with the group, admits to having strong opinions about how the implementation would go. “At the onset, I expected a couple of things. I was pretty adamant that our PT encounters would continue to look exactly the same as prior to implementation. Dee and Beth with MMIC Health IT encouraged us to use the templates provided in NextGen as they thought those were best suited to what we were trying to do, but I was pretty sure that I wanted new templates made. I was wrong about that. We use the standard templates almost exclusively, and they work out great for us. I also had an expectation that we would implement the total EHR at once. Again, MMIC Health IT encouraged us to follow their process and implement in steps. That was the right thing to do, but it was hard for me to see how it would all work once it was fully implemented. Looking back, I think their plan was perfect. The electronic prescribing was definitely a success and I wasn’t convinced that I would think that. I also like the fact that even when I am not in the office I am able to keep track of my patients’ refills, labs, etc. in a real-time fashion. I think that provides better care for my patients. I certainly feel that MMIC Health IT provided us with great service. It was great to have one point of contact in Dee throughout the implementation – we knew her and she knew us.”

In the end, Dr. Marts says, “We liked the staff at MMIC because we felt they were down-to-earth and made our time line and the implementation process understandable. We always felt like MMIC Health IT was there when we needed them. We’re not in Minneapolis so we feared the lack of a local team would be problematic, but they were very responsive to us and continue to be. We staggered our approach so that each of us began using the system on different days, and the whole process did go much smoother than we anticipated, which was a great unexpected success.” The practice does anticipate being able to meet meaningful use criteria and do additional reporting from the EHR. Plans are in place to achieve those goals.
The Importance of Strategic Outsourcing

With outsourcing as a viable alternative to doing everything in-house, it makes little sense for a business to carry a bigger burden than necessary. In fact, when done well, outsourcing allows a business to optimize its effort in two significant ways.

First, it lets business owners concentrate on those activities that matter most to the bottom line. And second, it provides relief from activities that are necessary for survival but fall into the category of "busy work", by turning them over to someone who specializes in performing those services.

As a result, outsourcing IT becomes a doubly good deal. Every aspect of the business is now receiving expert attention, which is probably something the business couldn’t have done on its own without overburdening its budget or its employees.

The key to successful outsourcing

The key to getting the full benefit of outsourcing is to build from a sound strategy. Technology strategist and business re-engineering consultant Geoffrey Moore encourages outsourcing as a means for keeping a business lean. He characterizes lean as "trimming the fat", and he says trimming the fat is a matter of focusing on the core.

Along those lines, Moore has developed a "core and context analysis" for maintaining a lean organization. As the title suggests, this analysis separates an organization’s activities into two categories: core and context.

Core activities

Core activities are those that can set an organization apart from its primary competition. Leadership in core activities often produces strategically meaningful outcomes like quality improvement, innovative customer service, successful adoption of new customer markets, or other value-added benefits. Concentrating on continuous improvement in core activities will yield the greatest rewards at the enterprise level, says Moore. Let others take on your contextual needs.

Why Should You Outsource IT Services?

As the manager of a small to medium-sized business, you may already have challenges maintaining the availability of your IT infrastructure – so why would you consider outsourcing to a Managed Service Provider? Consider the following:

- Do you focus more time on trying to download email than growing your practice?
- Is your practice under constant attack from network connectivity or external virus issues?
- Are you perpetually reacting to crises rather than planning for growth?
- Do you spend more time locating your backup tapes than backing up your infrastructure?

MMIC Health IT can reduce or eliminate these problems and allow you to focus on what you do best. You take care of your patients, and we’ll take care of your IT needs.
Five Easy Ways To Increase Your Personal Efficiency:

1. Don’t be SPAMMED. Verify that your Spam filter is keeping out email you do not want – and letting through ones you need. If you are sending a critical notice to a mobile client, use the electronic receipt function. Using electronic receipts is one way to confirm critical messages have been sent and received and is more efficient than wondering if and when your message was read.

2. Focus on a single task. Multi tasking is NOT more efficient for most people – recent studies confirm – a start-and-finish style is more productive. Make a point to never touch the same email or piece of paper twice. Deal with it and check it off your list. One strategy that can be very effective it to do those nagging things you want to put off first. Get them out the way and move on. You’ll feel better, and you’ll free your mind and your schedule for new items that come up.

3. Break yourself of the 24/7 handheld device. Commit to being device-free for a portion of each day. Focus on the people in front of you and resist the temptation to “just check” your messages. Access to email does NOT equal creativity to solve the problems that show up. It can be a very freeing feeling to be out of arms’ reach of your phone.

4. Recognize what’s important. Verify your priority list – entire work groups can end up spending too much time on activities outside the highest priority. Think about what you spend the most time on – and determine if the time spent is worth the return you get. Connecting with your coworkers may change the way your view your daily workload.

5. Use more video conferencing. Costs are surprisingly low, and access is easy. Time and energy are too valuable to waste on travel unless it’s really necessary.