



Have you heard the news?

CMS has proposed adjusting the 2016 meaningful use reporting period from a full year to a **90-day** period. Want to know more? Click here for the [proposed rule](#).



Your Practice Support Consultants are here to help!

Contact us with any questions or concerns you may have.

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Measure: The EP that transitions or refers their patient to another setting of care or provider of care must (1) use CEHRT (EHR) to create a summary of care record; and (2) electronically transmit such summary to a receiving provider for **more than 10 percent** of transitions of care and referrals.

Exclusion: Any EP who transfers a patient to another setting or refers a patient to another provider less than 100 times during the EHR reporting period.

Is Direct Messaging set up?

Not sure? Give us a call!

Are you using direct messaging to send summary of care documents?

Not sure? Give us a call!

Do you have Direct Messaging but don't have any direct addresses for your referral providers?

Not sure? Give us a call!

To meet the measure your EHR must have the capability to create the summary of care document and send it by direct message.



Patient-Centered Medical Home (PCMH)



Alphabet Soup

Many of the practices we serve are now working towards **PCMH** recognition. If your practice is starting on the journey to recognition, we want to congratulate you for taking that first step!

Transformation to a patient-centered medical home is not easy. It takes time as well as a dedicated team. As we move toward a value-based payment system **PCMH** practices will be better positioned to face the changes ahead.

Would you like to learn more about becoming a patient-centered medical home? NCQA offers [free webinars](#). Check out their “**Getting on Board**” Learn It – Earn It – Keep It slides.

We will be offering [PCMH Lunch N’ Learn](#) sessions during the next few months. We hope you will join us. Look for details soon.



The acronym for July is **MIPS**, short for the Merit-Based Incentive Program.

The MACRA [Quality Payment Program](#) has two paths:

1. [Merit-Based Incentive System \(MIPS\)](#)
or
2. Alternative Payment Model (APM)

The **MIPS** program brings with it parts of PQRS, Value-Based Modifier and the EHR Incentive Program. Most providers will initially participate in the **MIPS** program. In this program providers will be measured on:

- Quality
- Resource use
- Clinical practice improvement
- Meaningful Use

Important Dates!

July 15th - [NC MIPS](#) Portal opens for attestations (only providers who are attesting to meaningful use for the first time)

Don't forget if you have new eligible providers starting in 2016 this is the last year to submit an AIU!



Passing the Test! CMA Prep (Self-paced Certification Review) Ongoing, Online

Available July 1, 2016 – December 31, 2016

This **3-module class** will allow current and graduating medical assistants to prepare for certification examination with the AAMA through review of learned psychomotor, affective, and cognitive domains. Students will review competencies learned in the three areas of the examination: clinical, administration, and general. Utilizing the AAMA recommended content outline, students will review each section of the exam material through exercises, discussion, and pre-test.

Instructor: Melanie Moore, BA, CMA, AAMA
Instructor, CPCC-Medical Assisting Program

Credit: 0.3 IACET CEU / 3.0 Contact Hours

\$60.00 Registration Fee



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