



NEWS BRIEFS

Informational Newsletter for Wyoming Hospitals

WHA Calendar:

- WHA Trustee Education Casper **5/10**
- WHA Board Meeting Casper **5/10**
- WSHE Spring Meeting Casper **5/7-5/10**

Other Events

- AHA Annual Meeting Washington, DC **4/25-4/28**
- Western Regional Trustee Symposium Denver, CO **6/9-6/11**

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Wyoming Receives Federal Funding to Assist with EHR Implementation

Wyoming's Medicaid program will receive more than half a million dollars in federal matching funds to assist with the implementation of electronic health records, CMS announced last week.

In making its announcement, CMS indicated that the \$596,000 Wyoming will receive is another key step to further state's roles in developing a robust U.S. health information technology infrastructure. The matching dollars are to be used for state planning activities necessary to implement the EHR incentive program established by the American Recovery and Reinvestment Act (ARRA).

ARRA provides a 90 percent federal match for state planning regarding the administration of incentive payments to Medicaid providers, to ensure their proper payments through audits, and to participate in statewide efforts to promote interoperability and meaningful use of EHR technology statewide and, eventually, across the nation.

Wyoming will use its federal matching funds for projects that include a comprehensive analysis to determine the current status of HIT activities in the state. As part

of that process, the state will gather information on issues such as existing barriers to the use of EHRs, provider eligibility for EHR incentive payments, and the creation of a state Medicaid HIT plan, which will define the state's vision for its long-term HIT use.

"We congratulate Wyoming for qualifying for these federal matching funds to assist its plan for implementing the Recovery Act's EHR incentive program," said Cindy Mann, director of the Center for Medicaid and State Operations at CMS.

"Meaningful and interoperable use of EHRs in Medicaid will increase healthcare efficiency, reduce medical errors and improve quality outcomes and patient satisfaction within and across the states," she said.

The Office of the National Coordinator for Health Information Technology (ONC) also announced recently that funding will be available for critical access hospitals to receive technical assistance for the adoption and meaningful use of EHRs.

That funding, about \$12,000 per CAH, will be provided to HIT Regional Extension Centers (RECs), which will provide the necessary technical assistance to

critical access hospitals.

Although the details regarding this program are not clear, every state will be represented by at least one REC. The Mountain Pacific QIO applied to fill that role for Wyoming and Montana, and is likely to receive a grant award to serve that purpose.

The final rules for implementation of this program are expected by June.

Beyond these two federal funding programs, the Wyoming Hospital Association continues to represent Wyoming's hospitals on the E-Health Partnership, a task force initially created by the Governor's office to develop a statewide plan for Health Information Exchange (HIE).

Separate workgroups are developing plans for sustainability, governance, technology, and other areas, and those plans are to be melded into a single statewide approach by June.

Contact the WHA with questions about the E-Health Partnership and its work. For more information on implementation of the Medicaid-related provisions of the ARRA's EHR incentive program, visit http://www.cms.hhs.gov/Recovery/11_HealthIT.asp#TopOfPage.



Don't forget to send us a story about your hospital so we can feature you in our Member Spotlight section!

CRMC Partners to Make St. Patrick's Day Safer

In Wyoming, one-third of all traffic fatalities in 2007 involved drivers with blood alcohol concentrations of .08 or higher.

Laramie County alone accounted for 6 percent of alcohol-related motor vehicle fatalities.

So this year, Cheyenne Regional Medical Center (CRMC) partnered with Cheyenne-based Doug's Towing to play a role in preventing such crashes on St. Patrick's Day.

CRMC's Injury Prevention and Safe Communities program and Doug's Towing offered free rides and tows to drivers who had been drinking on St. Patrick's Day.

"St. Patrick's Day has become a big night out for many Americans — especially young adults," said Stephanie Heitsch, CRMC's coordinator for Injury Prevention/Safe Communities. "But it has also become a dangerous night on our road-

ways due to impaired drivers."

Doug's Towing provided free rides and towed vehicles anywhere within 10 miles of the location where the driver was picked up, within the Cheyenne city limits. The towing company has provided "Operation Topsy Tow" during major holidays since 1986.



AHA Creates Calculators to Estimate the Impact of Reform

President Obama has signed The Patient Protection and Affordable Care Act, as well as the companion Health Care and Education Affordability Reconciliation Act of 2010 into law.

Now, hospitals are working to understand the impact of the far-reaching legislation on their facilities. Together, the measures are estimated to expand coverage to 32 million people at a

cost of \$940 billion over 10 years.

To assist hospitals in their efforts, the American Hospital Association has created two calculators to help hospitals estimate the impact of the new laws on their organizations: a coverage expansion benefit calculator and a payment impact calculator.

Using information specific to each hospital and community, the calculators

create rough estimates of the 10-year net impact of key provisions. Although these tools can be helpful, it is important to note that because of the complexity of the laws and the uncertainty of future policy and market environments, estimates beyond three to five years can be unreliable.

Contact the WHA for links to the calculators and instructions for using them.



PEPPER Second Release Now Available for Hospital Auditing

The second release of the new Program for Evaluating Payment Patterns Electronic Report (PEPPER) has been completed for short-term and long-term PPS acute care hospitals. PEPPER files were distributed through a My QualityNet secure file exchange to hospital QualityNet Administrators and user accounts with the PEPPER recipient role.

PEPPER provides hospital-specific data for Medicare severity diagnosis-related groups and discharges at high risk for payment errors. It is distributed by TMF® Health Quality Institute under contract with CMS. Visit <http://www.PEPPERresources.org/> to access resources for using PEPPER, including User's guides, a recorded training session, information about

QualityNet accounts and frequently asked questions.

For further assistance using or obtaining PEPPER, click on the "Help/Contact Us" tab at <http://www.PEPPERresources.org/> to submit questions to the Help Desk. Long-term care hospitals who do not have a QualityNet account may request their hospital's PEPPER through the help desk.

Wyoming Hospital Association

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