Department: Social Services   HB Section(s):   11.630
Program Name: HITECH
Program is found in the following core budget(s): HITECH

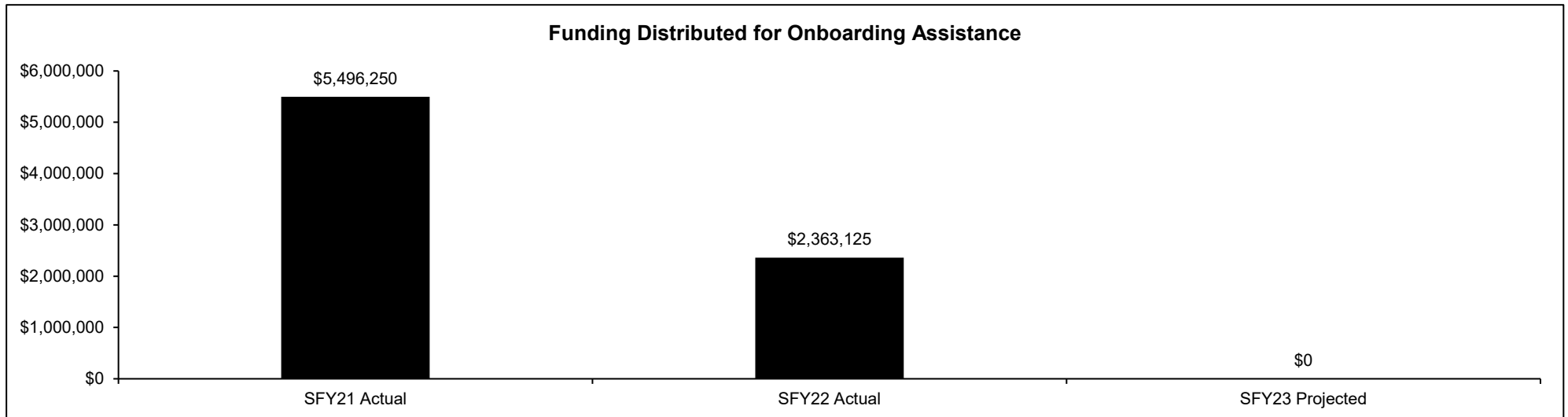**1a. What strategic priority does this program address?**

Connecting Electronic Health Record Providers

1b. What does this program do?

The Health Information Technology for Economic and Clinical Health Act (HITECH) is for expenditures related to connecting eligible Medicaid providers under the Medicaid Electronic Health Record (EHR) Incentive Program to other MO HealthNet providers through a health information exchange (HIE), another interoperable system, or the costs of other activities that promote providers' use of EHR or HIE. House Bill 11 language also requires that no single vendor can be awarded an exclusive contract to provide said services. The HITECH Act required that all program activities be completed by no later than September 30, 2021, including payments to contractors. Therefore, this program description is for one-time funding for a project that was successfully launched and completed in SFY21 and SFY22, called the Health Information Exchange (HIE) Onboarding Program. The funding was used to subsidize connections between Medicaid providers and the Health Information Network (HIN) of their choice. Onboarding each organization takes many months. Funding was distributed to the HINs based on when each deliverable was invoiced, shown by SFY of the pay-out.

2a.   Provide an activity measure(s) for the program.

The HIE Onboarding Program assisted 87 Medicaid provider organizations, such as hospitals, clinics, and long-term care facilities, to get connected to the HIN of their choice. A total of $7,859,375 was distributed during SFY21 and SFY22.

Funding Distributed for Onboarding Assistance

SFY21 Actual	$5,496,250
SFY22 Actual	$2,363,125
SFY23 Projected	$0

Note: No SFY23 projection is provided because HITECH funds expired on September 30, 2021.

PROGRAM DESCRIPTION

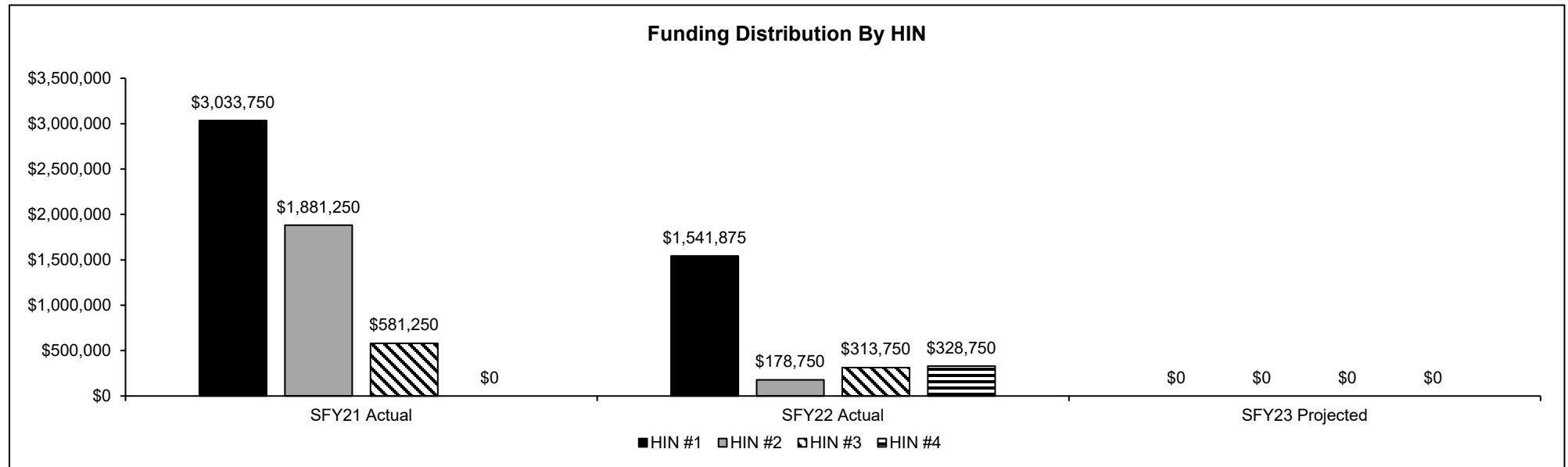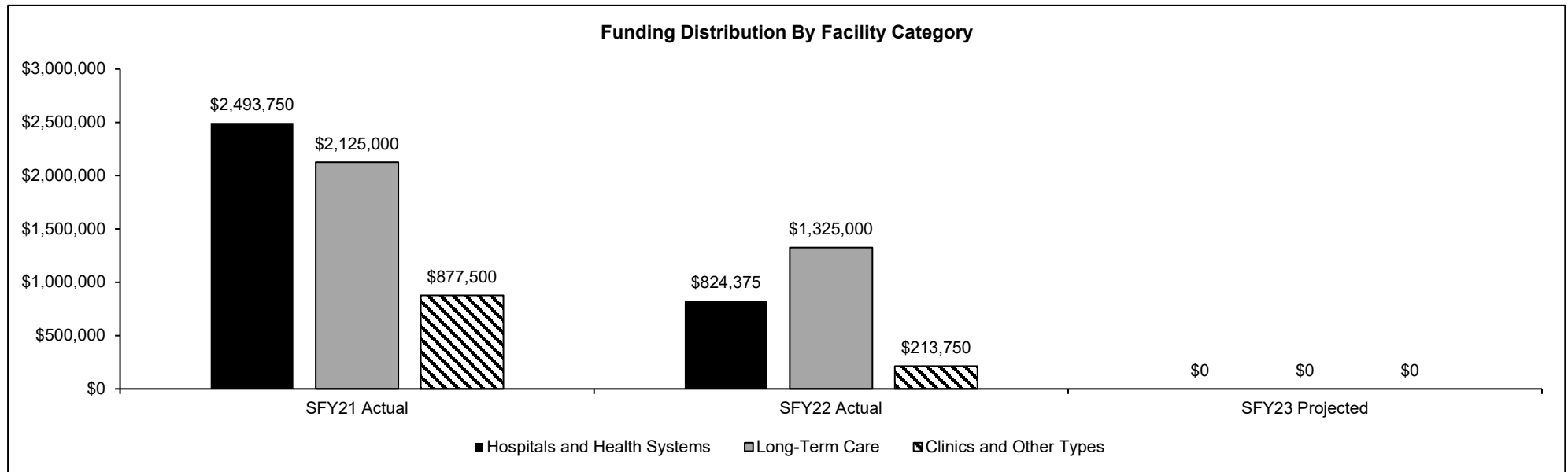**Department: Social Services**   HB Section(s):   11.630
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2b. Provide a measure(s) of the program's quality.

The budget language for the HIE Onboarding Program specifically required MO HealthNet to ensure the funding was not distributed to only one HIN. MO HealthNet established a Qualified Vendor List (QVL) contract with all four of Missouri's HINs in order to comply with this requirement. Through the QVL HIN Services Contract, all four of Missouri's HINs were able to participate in the HIE Onboarding Program. The process of recruiting Medicaid providers was competitive and some HINs acquired more participants than others. HIN #4 had a delay in the execution of their contract and had less time to participate.

Funding Distribution By HIN

Legend: HIN #1, HIN #2, HIN #3, HIN #4

SFY21 Actual: HIN #1 $3,033,750; HIN #2 $1,881,250; HIN #3 $581,250; HIN #4 $0
SFY22 Actual: HIN #1 $1,541,875; HIN #2 $178,750; HIN #3 $313,750; HIN #4 $328,750
SFY23 Projected: HIN #1 $0; HIN #2 $0; HIN #3 $0; HIN #4 $0

Note: No SFY23 projection is provided because HITECH funds expired on September 30, 2021.

PROGRAM DESCRIPTION
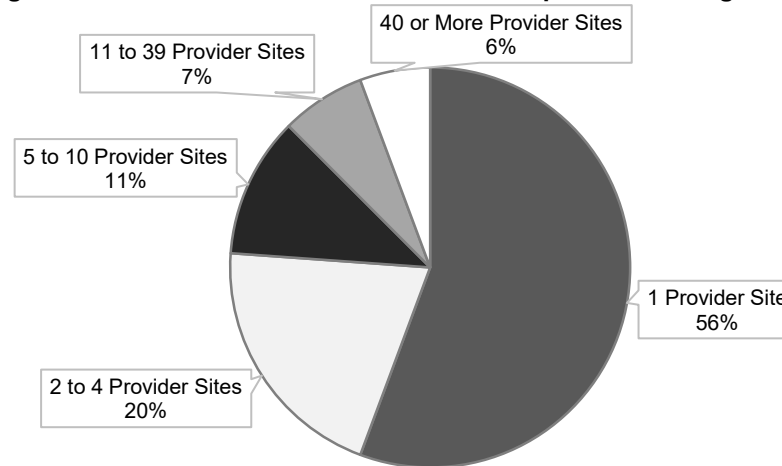
Department: Social Services
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2c.   Provide a measure(s) of the program's impact.

The HIE Onboarding Program funding was designed to be used by a wide variety of Medicaid providers. A fee schedule was established to reflect costs associated with creating and maintaining interfaces for bi-directional data exchange, an outbound data feed of Admit-Discharge-Transfer data, and accommodations for user volume. User volume was gauged differently by facility category; hospitals and long-term care facility volume was based on the number of staffed or licensed beds while clinic volume was based on the number of prescribing providers that would be using the HIN's services. Out of the 87 provider organizations that participated in the HIE Onboarding Program, 45 were in the Clinic and Other Settings category, however, the least amount of funding was distributed to these organizations because they are generally more cost-effective to onboard. Inpatient settings such as hospitals and long-term care facilities are more expensive to onboard, which is reflected in the dollars distributed to these organization types.

Funding Distribution By Facility Category

Category	SFY21 Actual	SFY22 Actual	SFY23 Projected
Hospitals and Health Systems	$2,493,750	$824,375	$0
Long-Term Care	$2,125,000	$1,325,000	$0
Clinics and Other Types	$877,500	$213,750	$0

Note: No SFY23 projection is provided because HITECH funds expired on September 30, 2021.

Department: Social Services
Program Name: HITECH
Program is found in the following core budget(s): HITECH

HB Section(s):   11.630

2d.   Provide a measure(s) of the program's efficiency.

MO HealthNet required the HINs to be as efficient as possible in the HIE Onboarding Program. Many hospitals and clinics have multiple sites that all use the same instance of EHR software. The HINs were required to ensure they were requesting funding based on an instance of an EHR, rather than requesting funding for individual hospital plus multiple clinic locations. The alternative would not have been interoperable and would have been a poor use of state and federal onboarding funding. As a result of this requirement, among the 87 organizations that participated in the program, 546 provider sites or locations were onboarded. The number of provider locations onboarded per interface ranged from 1 to 71, reflecting the range of different Medicaid providers that participated in the program. This efficiency allowed MO HealthNet to support a wide range of Medicaid providers - from small clinics with less than 10 prescribing providers to large health systems, with dozens of hospital and clinic locations. Nearly half of Onboarding Program participants only onboarded one location as part of the project, typically because they only had one location on the instance of an EHR. However, 44% of participants connected more than one location. The 11 organizations that onboarded more than 11 locations under each interface accounted for 395 individual provider locations, which is an incredibly efficient use of funding to onboard providers to a HIN.

Percentage of HIN's with One or More Provider Sites per Onboarding Program Interface

- 40 or More Provider Sites 6%
- 11 to 39 Provider Sites 7%
- 5 to 10 Provider Sites 11%
- 2 to 4 Provider Sites 20%
- 1 Provider Site 56%

Note: Organizations that have additional provider sites with the ability to share the same Onboarding Program Interface allows MO HealthNet to more efficiently support every site.

Department: Social Services
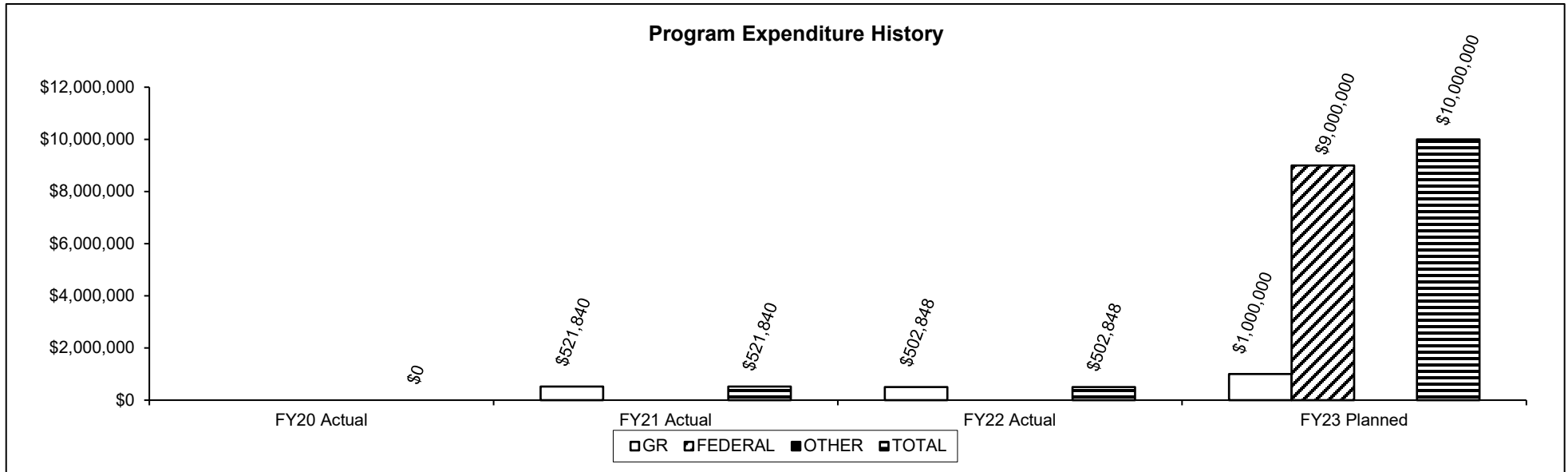
HB Section(s): **11.630**

Program Name: HITECH

Program is found in the following core budget(s): HITECH

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3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (*Note: Amounts do not include fringe benefit costs.*)

Program Expenditure History

Planned FY2023 expenditures are net of reverted.

4. What are the sources of the "Other " funds?

N/A

5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)

N/A

6. Are there federal matching requirements? If yes, please explain.

Expenditures earn a 90% federal match and require a 10% state share.

7. Is this a federally mandated program? If yes, please explain.

No.