MIDWEST QIN-QIO
Supporting CMS to improve health outcomes through relationships and data

AHQT Readiness Assessment
FOR NURSING HOMES

AHQT Baseline Assessment

1. Which representative from the facility/practice is providing information for this assessment?* [Note: Answers to all questions marked with * are required.]

_____

2. Organization/Facility Name*

_____

3. In which state is your organization/facility located?*

◯ AK	◯ ID	◯ MT	◯ OR	◯ WA
◯ CO	◯ KS	◯ ND	◯ SD	◯ WY
◯ IA	◯ MO	◯ NE	◯ UT	

4. Which of your organization's locations, by name, are you completing this survey on behalf of? If you are not completing this on behalf of many locations that share the same standardized health IT, you can enter the organization name from Question 2. [Note: Please use a semicolon (;) between each location name.]

_____

_____

_____

General & Foundational

5. Setting Type*

◯ Nursing Home

6. Does your organization/facility use internet connectivity to support operations?*

◯ Yes
◯ No (please elaborate:)* _____

_____

7. Does your organization/facility currently use an electronic health record (EHR) or other Health Information Technology (IT) solution?*

◯ Yes
◯ No
◯ Use both paper and electronic health record

Resource Availability

8. **Who supports Health IT within your organization/facility?***

- ◯ A single staff member with other non-Health IT responsibilities
- ◯ A small internal dedicated Health IT department (1-5 staff)
- ◯ A large internal dedicated Health IT department (more than 5 staff)
- ◯ A combination of internal staff and third-party contractor(s) / vendor(s)
- ◯ Our organization does not have dedicated Health IT staff

Technical Readiness

9. **Is your organization/facility planning any changes to its primary EHR system within the next 12 months?***

- ◯ Yes
- ◯ No

10. **Which changes to the primary EHR system is your organization planning to make in the next 12 months? Please select all that apply.***

- ☐ Initial deployment
- ☐ Vendor switch
- ☐ Optimization of functionality for new releases
- ☐ Significant additional functionalities (e.g., adding modules)
- ☐ Planned update to newer version of EHR

11. **Who is your organization/facility's EHR vendor? Please select all that apply.***

SKIP THIS QUESTION IF YOU ANSWERED NO TO QUESTION #7.

Allscripts	☐
Athenahealth	☐
CPSI	☐
eClinicalWorks	☐
Epic	☐
MatrixCare	☐
Meditech	☐
NextGen	☐
Oracle Cerner	☐
System built in-house	☐
PointClickCare	☐
Other	☐

If you answered 'Other' above, please specify your organization/facility's EHR vendor: _____

12. **What is your organization/facility's EHR Product Name?*** [Note: Use a semicolon (;) between each product name.]

_____

13. **What is your organization/facility's EHR Product Version?*** [Note: If you have identified multiple EHR products, please include each version of those products and use a semicolon (;) between each product name.]

_____

14. **Is your organization/facility's EHR version compliant with the most recent ONC-certified criteria for Health IT?***

- ◯ Yes, our EHR complies with the most recent ONC-certification criteria for Health IT.
- ◯ No, our EHR does not comply with the most recent ONC-certification criteria for Health IT, but there is a plan to upgrade to the ONC-certified version.
- ◯ No, our EHR does not comply with the most recent ONC-certification criteria for Health IT, and there is no plan to upgrade to the ONC-certified version.

15. **Does your organization/facility offer a patient portal?***

CMS Definition: *CMS defines a patient portal as a secure online platform offering patients 24-hour access to personal health information, including medical records, visit summaries, appointment scheduling, secure messaging, and billing.*

Note for Nursing Homes: A "Yes" response is appropriate if the facility meets any part of this definition, including having a patient portal feature within their EHR that is available but not currently active.

SKIP THIS QUESTION IF YOU ANSWERED NO TO QUESTIONS #6 OR #7.

- ◯ Yes, it is part of our EHR vendor products
- ◯ Yes, we are using a third-party vendor
- ◯ No

16. **How frequently has your organization/facility transmitted data externally in an electronic format to public health agencies or registries (e.g., for public health reporting, registry reporting, electronic health exchange)?*** [Note: "Production data" refers to data generated through clinical processes involving patient care, and it is used to distinguish between data and "test data" which may be submitted for the purposes of enrolling in and testing electronic data transfers.]

Example: *Minimum Data Set (MDS) - 3.0: Clinical assessments of resident functional capabilities, cognitive patterns, mood, behavior, and physical health, submitted upon admission, periodically, and upon discharge. The data is submitted via the Internet Quality Improvement and Evaluation System (iQIES) to drive federal star-rated quality assessments.*

SKIP THIS QUESTION IF YOU ANSWERED NO TO QUESTIONS #6 OR #7.

- ◯ More than once within the last 12 months
- ◯ Only once within the last 12 months
- ◯ Not within the last 12 months
- ◯ Never

17. **Is a cybersecurity risk analysis an element of your organization/facility's Emergency Preparedness All Hazards Planning or as part of another effort (e.g., performance improvement projects, cyber hygiene review)?***

SKIP THIS QUESTION IF YOU ANSWERED NO TO QUESTIONS #6 OR #7.

- ◯ Yes
- ◯ No

18. **What is your organization/facility's level of participation in a state, regional, vendor-mediated and/or local health information exchange (HIE) or health information organization (HIO)?***

SKIP THIS QUESTION IF YOU ANSWERED NO TO QUESTIONS #6 OR #7.

- ◯ At least one HIE or HIO is operational in our area, and we are participating and actively exchanging data in one or more.
- ◯ At least one HIE or HIO is operational in our area, but we are not participating.
- ◯ No HIEs or HIOs are operational in our area.

19. **Does your organization/facility use Fast Healthcare Interoperability Resources (FHIR®)?*** [Note: FHIR® is a standard way for healthcare systems to share data with each other electronically–quickly and consistently. Utilizing FHIR® enhances interoperability and data exchange capabilities. This question evaluates whether the organization uses FHIR® for data exchange, which is a standard for interoperable healthcare data.]

Examples: *Quality Measurement submission; prior authorization; SMART on FHIR® patient apps; FHIR® Bulk Data Exchange; Health Information Exchange to external entities*

SKIP THIS QUESTION IF YOU ANSWERED NO TO QUESTIONS #6 OR #7.

- ◯ Yes
- ◯ No