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SUBJECT Medical Assistance Electronic Health Record (EHR) Incentive Program Year 2 for Eligible Professionals (EP)		BY  Vincent D. Gordon, Deputy Secretary Office of Medical Assistance Programs

IMPORTANT REMINDER: If you submit HIPAA compliant electronic healthcare claim transactions to the Department, you need to be prepared for the ANSI X12 v5010 and NCPDP vD.0 upgrades in order to prevent the rejection of your claims. The CMS mandated compliance date for all covered entities to use the new standards is January 1, 2012. For additional information, visit the DPW website at:
<http://www.dpw.state.pa.us/provider/doingbusinesswithdpw/softwareandservicevendors/hipaa5010d.0upgradeinformation/index.htm>

PURPOSE:

The purpose of this bulletin is to inform professionals about the Medicaid Electronic Health Record (EHR) Incentive Program Year 2 registration, attestation, and Meaningful Use (MU) requirements process and how these requirements relate to Payment Year 1 and Payment Year 2.

SCOPE:

This bulletin applies to professionals eligible for participation in the EHR Incentive Program. Eligible professionals include physicians, dentists, pediatricians, certified registered nurse practitioners, certified nurse midwives, and physician assistants who practice predominately in a Federally Qualified Health Center (FQHC) or Rural Health Clinic (RHC) that is so led by a physician assistant that is enrolled in the Pennsylvania Medical Assistance (MA) Program.

BACKGROUND:

On May 13, 2011, the MA Program issued MA Bulletin 08-11-07 titled “Medical Assistance Electronic Health Record (EHR) Incentive Program Application Process for Eligible Professionals (EP)”, to inform healthcare professionals about the application process to register for, and participate in the Medicaid EHR Incentive Program in Pennsylvania.

COMMENTS AND QUESTIONS REGARDING THIS BULLETIN SHOULD BE DIRECTED TO:

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Visit the Office of Medical Assistance Programs Web site at
<http://www.dpw.state.pa.us/provider/healthcaremedicalassistance/index.htm>

The goal of the EHR Incentive Program is to promote the adoption and MU of federally certified EHR systems within the healthcare system. Please refer to Medical Assistance Bulletin 08-11-07 for more information on program eligibility requirements.

DISCUSSION:

Pennsylvania's EHR Incentive Program began on June 6, 2011 and runs through December 31, 2021. Eligible professionals can receive up to six payments throughout the duration of the Program. The EHR Incentive Program has two timeframes that are used in the administration of the Program; program year and payment year. The program year is used to define timeframes for submission of data used to determine eligibility. The first program year ends on December 31, 2011. Program Year 2 is January 1, 2012 to December 31, 2012.

Payment year defines the number of payments that have been made to an eligible professional. Payment Year 1 is the first year an eligible professional successfully attests and receives an incentive payment, regardless of what program year that is in effect. Eligible professionals can participate in Program Year 1, Payment Year 1 through March 30, 2012. This 90-day period from the official end of Program Year 1 is considered the "grace period". Payment Years 2 – 6 are the subsequent payment years in which eligible professionals receive incentive payments. Payment years do not have to be consecutive.

Eligible professionals will need to register at the CMS Registration and Attestation (R&A) if they are registering for their first payment year or if any of the information they submitted to the R&A in their first payment year has changed. Please refer to Medical Assistance Bulletin 08-11-07 and/or the CMS R&A information link in the attachment section of this bulletin for more information on Program registration and attestation.

For eligible professionals that are applying for their second payment year, they must apply directly at the PROMISe™ Provider Portal. Please refer to the PROMISe™ Provider Portal link in the attachment section of this bulletin for further information on applying for the EHR Incentive Program payment.

One of the primary changes for the Program Year 2 of the Medicaid EHR Incentive Program is that professionals will have the ability to attest that they meet the MU standards. Examples of MU standards include:

1. The use of a certified EHR in a meaningful manner, such as e-prescribing.
2. The use of certified EHR technology for electronic exchange of health information to improve quality of health care.
3. The use of certified EHR technology to submit clinical quality and other measures.

Eligible professionals will need to attest that they are using federally certified EHR technology in ways that can be measured significantly in quality and in quantity. The criteria for MU will be staged in three steps over the course of the next five years. Stage 1 sets the baseline for electronic data capture and information sharing. There will be three separate areas of MU that eligible professionals must attest to; Core Measures, Menu Measures, and Clinical Quality Measures (description below). Stage 2 and Stage 3 are yet to be defined.

- Core Measures: Must pass or have exclusions for all 15 Measures.
- Menu Measures: Must pass or have exclusions for 5 of 10 Measures. Of the 10 Menu Measures, 2 of them are Public Health Measures. Of the 2 Public Health Measures, the eligible professional must pass or have an exclusion for at least one of them.
- Clinical Quality Measures: Must report 6 total clinical quality measures: 3 required core measures (substituting alternate core measures where necessary) and 3 additional measures (selected from a set of 38 clinical quality measures).

Please note that CMS MU requirements are the same for both Medicaid and Medicare. For additional information on this subject, please refer to the corresponding MU link in the attachment section of this bulletin.

PROCEDURES AND DATES:

All eligible professionals:

- Eligible professionals are allowed to receive only one payment per program year.

Eligible professionals that have not received a payment:

- Eligible professionals that do not apply for a Program Year 1 incentive payment by December 31, 2011, may participate in Program Year 1 during the attestation grace period (January 1, 2012 to March 30, 2012). If an eligible professional is applying after December 31, 2011, the eligible professional should select the appropriate radio button associated with Program Year 1 in the Medical Assistance Provider Incentive Repository (MAPIR) application if their intention is to apply for Program Year 1.
- Eligible professionals will be able to apply for the EHR Incentive Program Year 2/Payment Year 1 incentive payment starting January 3, 2012 for Adopt, Implement, or Upgrade (AIU) only. The eligible professional should select the appropriate radio button associated with Program Year 2 in the MAPIR application if they are applying for Program Year 2.
- If an eligible professional wants to attest to 90 days of MU, they have to wait until March 31, 2012.

Eligible professionals that are applying for a second payment:

- If the eligible professional attested to AIU in their first payment year, they must attest to MU for all subsequent payments.
- Eligible professionals will be able to apply for Program Year 2/Payment Year 2 incentive payment beginning March 31, 2012 by attesting to 90 days of MU.

Eligible professionals paid by Medicare:

- Eligible professionals may switch between the Medicare and Medicaid Programs one time after an EHR incentive payment is received.
- If an eligible professional does the one-time switch between Medicare and Medicaid and was paid in Program Year 1 by Medicare, the eligible professional must attest to 365 days of MU in Program Year 2. Applications will be accepted for this option on December 31, 2012.

ATTACHMENTS:

CMS Registration and Attestation Information:

https://www.cms.gov/EHRIncentivePrograms/20_RegistrationandAttestation.asp#TopOfPage

https://www.cms.gov/EHRIncentivePrograms/32_Attestation.asp#TopOfPage

PROMISe™ Provider Portal

<https://promise.dpw.state.pa.us/portal/>

CMS MU Information:

https://www.cms.gov/EHRIncentivePrograms/30_Meaningful_Use.asp#TopOfPage

CMS Meaningful Use Attestation Calculator:

<http://www.cms.gov/apps/ehr/>

CMS FAQs on MU:

<https://questions.cms.hhs.gov/app/answers/list/p/21,26,1139,1155>

Eligible Professional Timeline:

www.pamahealthit.org/