Medicare and Medicaid EHR Incentive Program

Path to Payment

Check you eligibility by following the checklist on the Eligibility Page.

Eligibility Requirements for Professionals

- Incentive payments for eligible professionals are based on individual practitioners.
- If you are part of a practice, each eligible professional may qualify for an incentive payment if each eligible professional successfully demonstrates meaningful use of certified EHR technology.
- Each eligible professional is only eligible for one incentive payment per year, regardless of how many practices or locations at which he or she provide services.
- Hospital-based eligible professionals are not eligible for incentive payments. An eligible professional is
 considered hospital-based if 90% or more of his or her services are performed in a hospital inpatient (Place Of
 Service code 21) or emergency room (Place Of Service code 23) setting.

Who is an Eligible Professional under the Medicare EHR Incentive Program?

Eligible professionals under the Medicare EHR Incentive Program include:

- Doctor of medicine or osteopathy
- Doctor of dental surgery or dental medicine
- Doctor of podiatry
- Doctor of optometry
- Chiropractor

Who is an Eligible Professional under the Medicaid EHR Incentive Program?

Eligible professionals under the Medicaid EHR Incentive Program include:

- Physicians (primarily doctors of medicine and doctors of osteopathy)
- Nurse practitioner
- Certified nurse-midwife
- Dentist

 Physician assistant who furnishes services in a Federally Qualified Health Center or Rural Health Clinic that is led by a physician assistant.

To qualify for an incentive payment under the Medicaid EHR Incentive Program, an eligible professional must meet **one** of the following criteria:

- Have a minimum 30% Medicaid patient volume*
- Have a minimum 20% Medicaid patient volume, and is a pediatrician*
- Practice predominantly in a Federally Qualified Health Center or Rural Health Center and have a minimum 30% patient volume attributable to needy individuals
 - * Children's Health Insurance Program (CHIP) patients do not count toward the Medicaid patient volume criteria.

Eligible for Both Programs?

Eligible professionals eligible for both the Medicare and Medicaid EHR Incentive Programs must choose which incentive program they wish to participate in when they register. **Before 2015, an eligible professional may switch programs only once after the first incentive payment is initiated**. Most eligible professionals will maximize their incentive payments by participating in the Medicaid EHR Incentive Program.

If you need more information about eligibility, click "Frequently Asked Questions (FAQs)" in the "Related Links Inside CMS".

<u>Flow Chart</u> to Help Eligible Professionals Determine Eligibility for the Medicare and Medicaid Electronic Health Record (EHR) Incentive Program.

Medicare EHR Incentive Program Checklist

If you're an eligible professional, become a meaningful user of certified electronic health records to qualify for incentive payments of **up to \$44,000 from Medicare**. Here's how to qualify:

- Make sure you're eligible for the Medicare EHR Incentive Program. View the guidelines above.
- Also eligible for the Medicaid EHR Incentive Program? You can receive higher incentive payments, up to \$63,750, through the Medicaid EHR Incentive Program. See the guidelines above.
- **Get registered.** Registration is now open to eligible professionals. Visit the <u>Registration page</u> for more details.

- Registration for the Medicare and Medicaid EHR Incentive Programs is now open.
 We encourage providers to register for the Medicare and/or Medicaid EHR Incentive Program(s) as soon as possible to avoid payment delays. Please note that not all states have launched a Medicaid EHR Incentive Program yet, and you should check your state's status.
- You can register before you have a certified EHR. Register even if you do not have an enrollment record in PECOS (which is required for all hospitals and Medicare eligible professionals).
- Although the Medicaid EHR Incentive Programs opened in January 2011, some states are not ready to participate. Information on when registration will be available for Medicaid EHR Incentive Programs in specific states is posted at Medicaid State Information. Eligible Professionals will not be able to register for a Medicaid EHR Incentive Program until their state's program has launched and that state's site has opened.

Note: Register as soon as possible. You can register before having a system installed.

Use certified EHR technology. To receive incentive payments, make sure the EHR technology you're using
or are considering buying has been certified by the Office of the National Coordinator for Health Information
Technology. Visit our Certified EHR Technology page for details.

STEP 2: SEARCH FOR CERTIFIED EHR PRODUCTS Use the browse all products, search by product name or search by criteria met to search for certified EHR products. Search by Name or CHPL Product Number: Search by Criteria Met Browse All Ambulatory Products Select search type: Vendor Name Search Search Browse Search for: clicktate Your Search Results: Showing 1-1 of 1 Products Found STEP 3: ADD PRODUCTS TO YOUR CART To add products to your cart, select the "Add to Cart" link in the far-right column. After adding a product to your cart, you will be directed to your cart page. Once on the cart page you can view the criteria met by the product(s) in your cart. Once the product(s) in your cart meet 100% of the required criteria you can obtain a CMS EHR Certification ID. You can sort on any column in the table below. To sort, click on the column header and the arrow will confirm you are sorting in ascending or descending order. Matching Product See Complete Products Only Certifying **Product Product** Vendor Additional Software Required Classification ATCB Version# LCD Solutions NewCrop 10.1; Email; Web Browser; Adobe Reader; Spreadsheet Add to Cart SLI Global Clicktate Complete EHR Inc./Clicktate software (CSV-capable) Display 25 records per page Page 1

• **Be a Meaningful User.** You have to successfully demonstrate "meaningful use" for a consecutive 90-day period in your first year of participation (and for a full year in each subsequent years) to receive EHR incentive payments. Visit the Meaningful Use page to learn about meaningful use objectives and measures.

What Can I Learn from the Meaningful Use Specification Sheets?

The Meaningful Use Objectives specification sheets for the Medicare and Medicaid EHR Incentive Programs bring together critical information on each objective to help eligible professionals and eligible hospitals/critical access hospitals understand what they need to do to demonstrate meaningful use successfully. For **eligible professionals**, there are a total of 25 meaningful use objectives. To qualify for an incentive payment, 20 of these 25 objectives must be met, including:

- 15 required core objectives
- 5 menu set objectives that may be chosen from a list of 10

ELIGIBLE PROFESSIONAL CORE OBJECTIVES
Use CPOE for medication orders directly entered by any licensed healthcare professional who can enter orders into the medical record per state, local and professional guidelines.
Implement drug-drug and drug-allergy interaction checks.
Maintain an up-to-date problem list of current and active diagnoses.
Generate and transmit permissible prescriptions electronically (eRx).
Maintain active medication list.
Maintain active medication allergy list.
Record all of the following demographics: (A) Preferred language. (B) Gender. (C) Race. (D) Ethnicity. (E) Date of birth.
Record and chart changes in the following vital signs: (A) Height. (B) Weight. (C) Blood pressure. (D) Calculate and display body mass index (BMI). (E) Plot and display growth charts for children 2–20 years, including BMI.
Record smoking status for patients 13 years old or older.
Report ambulatory clinical quality measures to CMS or, in the case of Medicaid EPs, the States.
Implement one clinical decision support rule relevant to specialty or high clinical priority along with the ability to track compliance with that rule.

Provide patients with an electronic copy of their health information (including diagnostics test results, problem list, medication lists, medication allergies) upon request.	tics test results, problem
Provide clinical summaries for patients for each office visit.	
Capability to exchange key clinical information (for example, problem list, medication list, allergies, and diagnostic test results), among providers of care and patient authorized entities electronically.	
Protect electronic health information created or maintained by the certified EHR technology through the implementation of appropriate technical capabilities.	ology through the

Eligible Professional Menu Objectives (Choose 5 from the list of 10)
Implement drug formulary checks.
Incorporate clinical lab-test results into EHR as structured data.
Generate lists of patients by specific conditions to use for quality improvement, reduction of disparities, research, or outreach.
Send patient reminders per patient preference for preventive/follow-up care.
Provide patients with timely electronic access to their health information (including lab results, problem list, medication lists, and allergies) within 4 business days of the information being available to the EP.
Use certified EHR technology to identify patient-specific education resources and provide those resources to the patient if appropriate.
The EP who receives a patient from another setting of care or provider of care or believes an encounter is relevant should perform medication reconciliation.
The EP who transitions their patient to another setting of care or provider of care or refers their patient to another provider of care should provide summary care record for each transition of care or referral.
Capability to submit electronic data to immunization registries or immunization information systems and actual submission according to applicable law and practice.
Capability to submit electronic syndromic surveillance data to public health agencies and actual submission according to applicable law and practice.

Helpful Downloads from CMS

Core and Menu Measures for Eligible Professionals with FAQs [PDF, 138KB]

ALL Stage 1 EHR Meaningful Use Specification Sheets for Eligible Professionals [ZIP, 1MB]

Core and Menu Measures for Hospitals with FAQs [PDF, 214KB]

ALL Stage 1 EHR Meaningful Use Specification Sheets for Eligible Hospitals [ZIP, 2MB]

EHR Incentive Program MU Stage1 Requirements Summary [PDF, 1MB]

EHR Incentive Program MU Stage1 Requirements Overview [PDF, 1MB]

Clinical Quality Measures- Webinar [PDF, 899KB]

Attest for incentive payments. To get your EHR incentive payment, you must attest (legally state) through
Medicare's secure Web site that you've demonstrated "meaningful use" with certified EHR technology. You can
now get to our secure Attestation Web site through a link at our Attestation page.

Attestation for the Medicare Electronic Health Record (EHR) Incentive Program opened April 18th. Click here to attest.

What do I need to do to receive my Medicare EHR incentive payment?

- Successfully <u>register</u> for the Medicare EHR Incentive Program;
- Meet <u>meaningful use</u> criteria using certified EHR technology; and
- Successfully attest, using CMS' Web-based system, that you have met meaningful use criteria using certified EHR technology.

How will I attest for the Medicare and Medicaid Incentive Programs?

Medicare eligible professionals, eligible hospitals and critical access hospitals will have to demonstrate meaningful use through CMS' web-based Registration and Attestation System. In the Medicare & Medicaid EHR Incentive Program Registration and Attestation System, providers will fill in numerators and denominators for the meaningful use objectives and clinical quality measures, indicate if they qualify for exclusions to specific objectives, and legally attest that they have successfully demonstrated meaningful use. A complete EHR system will provide a report of the numerators, denominators and other information. Then you will need to enter that data into our online Attestation System. Providers will qualify for a Medicare EHR incentive payment upon

completing a **successful** online submission through the Attestation System—immediately after you submit your results you will see a summary of your attestation, and whether or not it was successful. The Attestation System for the Medicare EHR Incentive Program will open on April 18, 2011.

Questions About Attestation

Get answers to some of the most commonly asked questions about attestation.

How will I attest for the Medicare and Medicaid Incentive Programs?

When can I attest?

What can I do now to prepare for attestation?

Where can I find user guides and other resources?

What will I need to login to the Attestation System?

What is the EHR Certification Number?

I am an Eligible Provider. Can I designate a third party to register and/or attest on my behalf?

When will I get paid?

How will I get paid?

Will CMS conduct audits?