


ISSUE DATE September 20, 2013	EFFECTIVE DATE October 1, 2013	NUMBER 01-13-41
SUBJECT Medical Assistance Electronic Health Record (EHR) Incentive Program Year 2014 for Eligible Hospitals (EH)		BY  Vincent D. Gordon, Deputy Secretary Office of Medical Assistance Programs

PURPOSE:

The purpose of this Medical Assistance (MA) Bulletin (bulletin) is to inform hospitals about the Medicaid Electronic Health Record (EHR) Incentive Program and program year 2014 registration, attestation, and Meaningful Use (MU) requirements process and how these requirements relate to payment year 1 and subsequent payment years.

This bulletin discusses program year 2014 changes and the differences between the Medicaid and Medicare EHR Incentive Programs. Additionally, the bulletin provides information regarding 2014 Office of National Coordinator (ONC) edition standards and certification criteria for certified EHR technology needed to meet all stages of MU.

SCOPE:

This bulletin applies to all inpatient acute care hospitals, including critical access hospitals (CAHs) and children's hospitals, eligible for participation in the EHR Incentive Program that are enrolled in the Pennsylvania MA Program.

BACKGROUND:

On February 1, 2013, the MA Program issued MA Bulletin 01-13-10, titled "Medical Assistance Electronic Health Record (EHR) Incentive Program Year 2013 for Eligible Hospitals (EH)" to inform hospitals about the application process involving registration, attestation, and Meaningful Use (MU) requirements, and how these requirements relate to payment year 1 and subsequent payment years. The bulletin also discussed changes to MU.

The goal of the EHR Incentive Program is to promote the adoption and MU of certified EHR systems within the healthcare system. Please refer to MA Bulletin 01-11-05 for more information on program eligibility requirements. In program year 2014, there are changes to Meaningful Use Measures, Clinical Quality Measures (CQMs), and 2014 certified electronic

COMMENTS AND QUESTIONS REGARDING THIS BULLETIN SHOULD BE DIRECTED TO:

Matt McGeorge, RA-mahealthit@pa.gov

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

health record technology standards. For specifics on these changes to program year 2014, see the corresponding links in the attachment section of this bulletin.

DISCUSSION:

Pennsylvania's EHR Incentive Program launched on June 6, 2011 and runs through September 30, 2021, for eligible hospitals. Although eligible hospitals can receive payments in any year from federal fiscal year 2011 to federal fiscal year 2021, the last year an eligible hospital can begin to receive a Medicaid Incentive Program payment is federal fiscal year 2016.

As discussed in MA Bulletin 01-13-10, the EHR Incentive Program has 2 time frames that are used in the administration of the program: program year and payment year.

The program year is used to define time frames for submission of data used to determine eligibility. Program year 2013 ends on September 30, 2013. Program year 2014 begins on October 1, 2013 and runs through September 30, 2014 for all eligible hospitals. Payment year defines the number of payments that have been made to an eligible hospital.

Eligible hospitals only need to register with the Centers for Medicare & Medicaid Services (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 second, third, or fourth payment year changed. Please refer to MA Bulletin 01-11-05 and/or the CMS R&A link in the attachment section of this bulletin for more information on program registration and attestation.

Eligible hospitals (i.e. a children's hospital) that are applying only for a Medicaid incentive payment must apply directly through the Medicaid PROMISe™ Provider Portal. Please refer to the Medicaid PROMISe™ Provider Portal link in the attachment section of this bulletin for further information on applying for the EHR Incentive Program payment using the Medicaid PROMISe™ Provider Portal.

Eligible hospitals will need to continue to attest to using federally certified EHR technology to continue to receive incentive payments. Eligible hospitals who qualify for the Medicaid EHR incentive payment may receive incentive payments for up to 4 years. All eligible hospitals will need to complete 2 years of Stage 1 MU before meeting Stage 2 MU.

Changes to Meaningful Use Measures and Clinical Quality Measures:

Eligible hospitals begin meeting Stage 1 MU for a 90-day period in their first payment year. Please refer to MA Bulletin 01-13-10 for more information on Stage 1 MU. In program year 2014 all eligible hospitals regardless of their stage of MU are required to demonstrate MU for a specified quarter (through Medicare) or a 90-day EHR reporting period (through Medicaid) within program year 2014 .

Eligible hospitals can begin to attest to Stage 2 MU in program year 2014 after completing 2 years of Stage 1 MU. For additional information on Stage 2 MU measures, please refer to the Stage 2 Meaningful Use link in the attachment section of this bulletin to

access the latest information on Stage 2 MU. Please note that MU requirements are the same for both Medicaid and Medicare.

In program year 2014 eligible hospitals will be required to report using the new 2014 CQM criteria regardless of whether they are participating in Stage 1 or Stage 2 of the Medicare and Medicaid EHR Incentive Programs. See the 2014 CQM link in the attachment section of this bulletin to access the latest information on Clinical Quality Measures. Eligible hospitals will be required to report on CQMs in order to demonstrate MU.

Stage 3 MU is yet to be defined.

2014 ONC Edition Standards and Certification Criteria for Certified EHR Technology:

In order to qualify for a Medicaid EHR incentive payment in program year 2014, eligible hospitals will need to have a 2014 edition of a certified EHR.

Please refer to the ONC Fact Sheet in the attachment section of this bulletin for additional information on this topic.

PROCEDURES AND DATES:

Medicaid only hospitals (i.e. a children's hospital) that have not received a payment:

- Eligible hospitals will be able to apply for the EHR Incentive Program year 2014/payment year 1 starting October 1, 2013 for Adopt, Implement or Upgrade (AIU) only. The eligible hospital should select program year 2014 in the MAPIR application if they are applying for program year 2014.

Medicaid only hospitals (i.e. a children's hospital) that are applying for a second, third, or fourth payment:

- Eligible hospitals that attested to AIU in their first payment year must attest to MU for all subsequent payments.
- Eligible hospitals will be able to apply for program year 2014/payment year 2, 3, or 4 incentive payment beginning early calendar year 2014, by attesting to a 90-day EHR reporting period within program year 2014.

Dually eligible hospitals (acute care hospitals including critical access hospitals) that have not received a payment:

- Eligible hospitals that did not apply for an incentive payment may apply for AIU and MU in the same federal fiscal year. However, they must attest to AIU through the Medicaid PROMISe™ Provider Portal prior to attesting to a quarter of MU through the Medicare Program at the CMS R&A.

Dually eligible hospitals (acute care hospitals including critical access hospitals) that have only received a payment for AIU prior to program year 2014:

- The eligible hospital must attest to their program year 2014 quarter EHR reporting period through the CMS Medicare Program at the CMS R&A first. The eligible hospital's Medicare attestation must be approved before they can complete their attestation in the Medicaid PROMISe™ Provider Portal.

Dually eligible hospitals (acute care hospitals including critical access hospitals) that have received a MU payment from Medicare:

- If the eligible hospital attested through the CMS Medicare Program prior to program year 2014, they will need to complete a quarter EHR reporting period and attest to Medicare at the CMS R&A in program year 2014. The eligible hospital's Medicare attestation must be approved before they can complete their attestation in the Medicaid PROMISe™ Provider Portal.

ATTACHMENTS:

Stage 2 Meaningful Use:

http://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/Stage_2.html

2014 Clinical Quality Measures:

http://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/2014_ClinicalQualityMeasures.html

ONC Fact Sheet

http://www.healthit.gov/sites/default/files/pdf/ONC_FS_EHR_Stage_2_Final_082312.pdf

CMS Registration and Attestation Information:

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

Medicaid PROMISe™ Provider Portal:

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

CMS Meaningful Use Attestation Calculator:

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

Eligible Hospital Timeline:

www.pamahealthit.org/