

Nebraska Medicaid EHR Incentive Program – Frequently Asked Questions

The Centers for Medicare and Medicaid Services (CMS) web site offers provider guidance and official up-to-date, detailed information about the Medicare and Medicaid EHR Incentive Programs, including eligibility, payments, meaningful use, and registration at:

<http://www.cms.gov/EHRIncentivePrograms/>.

General Program Questions

1. What is the Electronic Health Record (EHR) Incentive Payment Program?

In 2009, the Health Information Technology for Economic and Clinical Health Act (HITECH) established programs under the Centers for Medicare and Medicaid Services (CMS) to provide incentive payments for the meaningful use of certified electronic health record (EHR) technology by eligible providers. Nebraska's Medicaid EHR Incentives Program is program administered by the Department of Health and Human Services, the Division of Medicaid and Long-Term Care.

2. What is Certified Electronic Health Record Technology?

Certified Electronic Health Record (EHR) technology are products that have been tested and certified under the Office of the National Health Information Technology Coordinator (ONC) in accordance with the standards, implementation specifications, and certification criteria set forth in the ONC's Final Rule. The web address to the ONC Certified HIT Product List is: <http://onc-chpl.force.com/ehrcert>.

Nebraska Program Eligibility and Enrollment Questions

3. When did the program start?

Nebraska's State Medicaid Health Information Plan (SMHP) was approved by CMS in November, 2011. Nebraska launched the Medicaid EHR Incentive Program on May 7, 2012.

4. What are the eligibility requirements for qualifying provider types?

Eligible Medicaid provider types must meet the following additional criteria in order to participate in the Medicaid EHR Incentive Payment Program:

- Must see patients covered by Nebraska Medicaid;
- Must meet appropriate patient volume thresholds;
- Must not be hospital-based. A hospital-based EP is defined as an EP who furnishes 90% or more of their covered professional services in either the inpatient or emergency department of a hospital;
- Must meet practitioner licensing requirements for the EP type in the state in which they are located;

- Must not have any current sanctions that have temporarily or permanently barred them from participation in the Medicare or State Medicaid programs;
- Must demonstrate that during the payment year, it has adopted, implemented, upgraded or demonstrated meaningful use of certified EHR technology;
- PA's must practice in a Federally Qualified Health Center (FQHC) or Rural Health Clinic (RHC) that is so led by a physician assistant.

5. To apply as an eligible professional (EP), what information do I need for the Medicaid EHR Incentive Program?

The registration process begins with CMS. Registration with CMS is only completed one time unless something needs to be changed.

The CMS federal government's Registration & Attestation System requires that Medicaid eligible professionals registering with CMS submit the following information:

- NPI: National Provider Identifier (NPI) where the source system is NPPES (National Plan and Provider Enumeration System)
- Payee TIN: Tax Identification Number that is used for payment
- Personal TIN: Personal Taxpayer Identification Number
- Program Option: Choice of program to use for incentives; Medicare or Medicaid
- State: The selected State for Medicaid participation
- Provider Type: Types of providers as listed in HITECH legislation
- Provider's email address that is used to submit information to the CMS Registration & Attestation System.
- Indication of whether the provider will assign the incentive payments (and, if so, to whom they wish to assign their incentive payments)

6. To apply as an eligible hospital (EH), what do I need?

The registration process begins with CMS. Registration with CMS is only completed one time unless something needs to be changed

- Medicare Provider Enrollment, Chain, and Ownership System (PECOS) enrollment - All EHs must have enrollment information in PECOS to register for the EHR Incentive Programs. PECOS system which manages, tracks, and validates enrollment data for Medicare providers and suppliers. If a hospital has never enrolled in PECOS, the hospital will need to do so at: <http://www.cms.gov/MedicareProviderSupEnroll>. Providers can check to see if they are enrolled in PECOS at this link.
- CMS Identity and Access Management (I&A) User ID and Password.
- A National Provider Identifier (NPI).
- Hospitals will also need a CMS Certification Number (CCN).
- An active web user account in the National Plan and Provider Enumeration System (NPPES).
- Taxpayer Identification Number (TIN) or Employer Identification Number (EIN).

7. After I register with CMS, what do I need to do to create a new user account for Nebraska's Medicaid EHR Incentive program?

To complete your new user registration for Nebraska's Medicaid EHR Incentive program you will need to register here <https://www.nebraskaehrincentives.com/ProviderWebRegister.aspx>. You will need to provide your CMS registration number, NPI and the last four digits of your Tax ID number. This information can be obtained from your CMS registration information.

8. When do providers make attestations? What attestations are required? What attestation documentation is required?

EPs and EHs will attest to all information collected as part of the enrollment in the State Medicaid EHR Incentive program. The enrollment process must be done each year for which payment is being requested. The participation years do not need to be consecutive. The last year to begin participation in the Medicaid EHR Incentive program is 2016.

Eligible Providers and Eligible Hospitals will attest to the following:

- Patient volume calculations
- Documentation of adopt, implement, or upgrade of certified EHR technology (in the first participation year)
- Meaningful Use of certified EHR technology for EPs and Medicaid only hospitals
- Assignment of payment- voluntary for EPs (if applicable)
- EP practicing predominantly in an FQHC or RHC
- Provider type (including whether the EP meets the definition of a pediatrician)
- EHR Certification Number (ONC Certification Number) for the EHR Technology
- EH Data on Medicaid discharges, total discharges, Medicaid inpatient days, total inpatient days, hospital's total charges and charity care charges

9. What will Nebraska Medicaid accept as documentation for a certified EHR Technology?

Acceptable evidence of a certified EHR technology will include the following information:

- Vendor name and contact information
- Certified system name, version, and ONC certification number
- CMS EHR Certification ID
- Date and term of provider contractual arrangements

Typically, appropriate documentation will be a copy of the signed purchase order or contract between the provider and EHR vendor.

EHR Incentive Program Payments

10. How will the Nebraska Medicaid incentive payments be made to eligible hospitals?

DHHS will calculate an annual EHR hospital incentive amount which will be paid to eligible hospitals over a 3-year period. Incentive payments to hospitals will be distributed at 50, 40 and 10% respectively. Hospitals need to demonstrate and attest to program qualifications each year to receive payment.

11. How will payments be made?

The incentive payment will be issued from and distributed by the state accounting and payment system through electronic fund transfer (EFT).

Meaningful Use

12. What are the timing requirements for Meaningful Use?

All Providers are eligible to participate under AIU or MU in the first payment year. Dually-eligible hospitals attesting to Meaningful Use under Medicare in the first year will also be under MU for Medicaid. All providers must demonstrate Meaningful Use in the second and subsequent payment years.

2015: All providers will attest to any consecutive 90-day period in calendar year 2015

2016: New providers who have never received an incentive payment will attest to 90-days meaningful use and all other providers will attest to a full calendar year.

2017: all provider will attest to a calendar year.

Resources

13. Who can I contact if I have questions?

You can email your questions to

DHHS.EHRIncentives@nebraska.gov.