

PROGRAM UPDATE

December 18, 2019

Top Five Reasons to Reach Stage 3 Meaningful Use

With only three program years left to attest to the Medicaid EHR Incentive Program, the Department of Health Care Policy and Financing (the Department) encourages all eligible professionals (EPs) to attest each program year in order to reach your full incentive payment potential. Although Meaningful Use (MU) Stage 3 can be challenging for EPs to achieve, there are benefits in continuing to attest to the Medicaid EHR Incentive Program. Below are the top five reasons to attest to MU Stage 3.

1. **Better Patient Outcomes**– By working towards the goal of meeting requirements for meaningful use, patients also reap the benefits of heightened communication with their providers by utilizing patient portals, which can also benefit providers that are monitoring comorbidities in patients or complicated medical issues in order to deliver accurate preventative measures.
2. **Sense of Accomplishment**– Over the last two Program Years (PYs) 73 Eligible Hospitals (EHs) and 144 Eligible Professionals (EPs) have completed the Medicaid EHR Incentive Program. Completion of the Medicaid EHR Incentive Program is demonstrating commitment and hard work and deserves recognition. Congratulations is order for providers that have improved practice engagement, contributed to interoperability and stayed motivated to achieve MU requirements.
3. **Receive your Full Incentive**– The Medicaid EHR Incentive Program gives EPs the potential to receive \$63,750 by attesting successfully to requirements for the program for six years.
4. **Investment in your Practice**– When you invest in your practice with technology and improvements, it helps your practice grow by providing better care for your patients. An Electronic Health Record can be a big expense and the Medicaid EHR Incentive Program was designed to help off-set those costs and put your practice on a path to interoperability.
5. **Prepare for Future Programs**– With Colorado at the forefront of promoting health and health information exchange, the Department is committed to making Colorado the healthiest state. Medicaid EHR Incentive Program EPs are already prepared to report on continued policies such as Medicaid Advanced Payment Model (Medicaid APM) and electronically reporting your Clinical Quality Measures (CQMs) or electronic CQMs (eCQMs). Medicaid EHR Incentive Program EPs are already prepared to participate to these programs by virtue of having knowledge of the requirements and being set up to meet them.

Changes to Final Rule for PY 2020

Many participants are looking ahead of Program Year 2019 (PY) and preparing early to get on track for PY 2020. The Centers for Medicare and Medicaid Services (CMS) released its [Final Rule](#) on November 15, 2019 outlining changes to the CQMs and eCQMs reporting period and how many CQMs are available to participants. The following information explains what changes have been made to PY 2020 for CQMs:

- For PY 2020 there will be 47 eCQMS available for EPs to attest to.
- The eCQM reporting period for EPs and EPs demonstrating Meaningful Use for the first time will be a minimum of any continuous 90-day period within Calendar Year (CY) 2020 for EPs. Due to comments submitted to The Centers for Medicare and Medicaid Services (CMS), which proposed a minimum of any continuous 274-day period was modified.
- The final rule is aligning with the Quality Payment Program (QPP/MIPS) for CQM/eCQMS for PY 2020. The same list of quality measures for QPP/MIPS is the same list for the Medicaid EHR Incentive Program.
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- EPs will report on any six CQM/eQMs that are relevant to their scope of practice and will need to report on at least one outcome measure or, if an outcome measure is not available or relevant, one other high priority measure.

As participants await the opening for PY 2019, please keep checking the CORHIO website for more tip sheets and webinars. With new screen changes for attestations for PY 2019, it is important to keep up to date on information and be prepared.

For questions regarding program requirements, eligibility and Meaningful Use, contact:

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Medicaid Program Point of Contact and Partnerships

The Department of Healthcare Policy and Financing has partnered with CORHIO to provide program coordination and assist with provider communications and outreach regarding the Medicaid EHR Incentive Program. The Medicaid EHR Incentive Program Coordinator is the central point of contact for EPs, EHS, partners and other interested parties regarding requirements and processes. Inquiries concerning the Medicaid EHR Incentive Program can be sent to MedicaidEHR@corhio.org or by calling 720-285-3232.