January 26, 2017

With the New Year comes a lot of changes! Eligible professionals and hospitals need to be aware of and understand all of the new information so they can plan accordingly.

In this newsletter we will discuss:

- The launch of the new Colorado Registration and Attestation system for Medicaid EHR Incentive program registrations and attestations
- The “end” of the Medicare EHR Incentive Program
- The beginning of the Merit-based Incentive Payment System (MIPS)
  - Dually eligible clinicians
  - MIPS exclusions
- The 2016 and 2017 90-day MU reporting period(s) and
- The expansion of the Medicaid Colorado Care Connections Program

The New Colorado Registration and Attestation Site
This spring, Colorado will be launching a new Registration and Attestation system for the Medicaid EHR Incentive Program for program year 2016 and beyond. Although the current site will allow entering of information, please do not log on and attempt to enter data or make any changes as this will not transfer to the new system. Please stay tuned to this newsletter for the most up-to-date information on the new site including the opening and closing dates for submitting program year 2016 incentive program attestations.

Is Meaningful Use Ending?
Yes and no...as announced last year, CMS is sunsetting the Medicare EHR Incentive Program and Medicare providers will transition to the MIPS program thereby ending the Medicare Incentive program. Clinicians who meet eligibility for the Medicaid EHR Incentive Program will continue to submit to their state to receive Medicaid incentive payments. Payments are for a total of six years with all payments ending program year 2021. Program year 2016 is the LAST year to begin participation in the Medicaid program so be sure to stay tuned to this newsletter for the most up-to-date information on the opening of the new Colorado Registration and Attestation site.

Dually Eligible Clinicians
Clinicians who participate in the Medicaid EHR Incentive program and also submit Medicare Part B charges may be required to submit to MIPS as well. Moving forward, these are two separate and distinct programs; a clinician could benefit from both or receive a negative Medicare payment adjustment for not submitting to MIPS (if eligible). Historically, if a Medicaid provider successfully submitted to the Medicaid EHR Incentive program, they would have avoided any payment adjustments on Medicare allowable charges; MIPS changes this. If a clinician meets eligibility requirements for MIPS and does not submit, he/she would see a negative payment adjustment on Medicare Part B claims. As a reminder, MIPS does not apply to hospitals or facilities.
Exemptions from MIPS

Calendar year 2017 is the MIPS performance year and any upward/downward payment adjustments will take effect in 2019. There are a few exemptions from MIPS participation:

- Clinicians in their first year of Medicare Part B participation
- Clinicians meeting the Medicare Part B low billing or the low volume thresholds-less than $30,000 in allowable charges in a year or provide care for less than 100 Part B patients in one year. A clinician must meet BOTH the volume and patient thresholds to be included in the program. If a clinician is below on either, he/she is excluded from MIPS
- Clinicians participating in an approved Advanced APM (Advanced Alternative Payment Model)-see the QPP (Quality Payment Program) listing of Advanced APMS

For more information on the MIPS program reporting requirements, tools, and timelines please refer to the CMS QPP site.

90-Day EHR Reporting Period in Program Year 2016 and 2017

In November, CMS finalized that the EHR reporting period in 2016 and 2017 will be any continuous 90-day period within the respective calendar year for all returning EPs, EHs and CAHs that have previously demonstrated Meaningful Use in the Medicare or Medicaid EHR Incentive Programs. The 90-day reporting period allows more time for systems changes in 2017 as well as allows eligible clinicians time to prepare for MIPS and to continue preparation for Stage 3. The EHR reporting period will be any continuous 90-day period between January 1st and December 31st in calendar year 2016 and calendar year 2017.

*The November 2016 final rule changed the program year 2017 EHR reporting period of the MU objectives to 90 days but the CQM reporting period will remain a full year.

Expansion of the Colorado Care Connections Program

The Colorado Care Connections Program, a partnership between Colorado Regional Health Information Organization (CORHIO) and the Department of Health Care Policy and Financing (HCPF) has been expanded, making funds available to a large number of organizations to participate in the health information exchange. Participation and time are limited so please follow the CORHIO e-Newsletter to learn more about this exciting opportunity.

Anticipated Timeline – Colorado Medicaid EHR Incentive Program

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<th>CO R&amp;A System open for EPs to attest to 2016 Meaningful Use</th>
<th>Spring 2017</th>
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<tr>
<td>CO R&amp;A System open for EHs and CAHs to attest to 2016 Meaningful Use</td>
<td>Fall 2017</td>
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For questions regarding the Medicaid Meaningful Use program contact:
Medicaid EHR Incentive Program Coordinator
Kelly Hernandez
(720) 285-3232
MedicaidEHR@corhio.org

For system/technical questions and support contact:
Conduent State Level Registry Helpdesk
Phone: (866) 879-0109
SLRHelpdesk@acs-inc.com

Medicaid Program Point of Contact and Partnerships
The Department of Healthcare Policy and Finance (the Department) 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 will be the central point of contact for EPs, EHs, partners and other interested parties on requirements and processes. Inquiries regarding the Medicaid EHR Incentive Program can be sent to MedicaidEHR@corhio.org or (720) 285-3232.

Conduent is currently contracted by the Department to manage the Provider Outreach Page and to provide the Colorado R&A System, including the web portal through which EPs and EHs can register and attest to receive the EHR incentive payments.