

PROGRAM UPDATE



October 3, 2018

Future Reporting Periods for Program Year 2018

Medicaid EHR Incentive Program participants need to be aware of future program year (PY) reporting requirements. The reporting period for PY 2018 will be a continuous 90-day period in calendar year (CY) 2018 for objectives only (from January 1, 2018 to December 31, 2018).

The change for PY 2018 reporting period for Clinical Quality Measures (CQMs) has changed from a continuous 90-day period to a *full* CY of CQM data. Participants understanding reporting requirements are more successful at meeting Meaningful Use (MU).

Please refer to the [2018 Program Requirements for Medicaid](#) for more information.

Medicaid EHR Incentive Program Name Change

The name change from the Centers for Medicare and Medicaid Services (CMS) for the Medicaid EHR Incentive Program has created some confusion. Some participants have found it difficult to get to the Registration and Attestation login page to update their registration information. Although Colorado has kept the name, Medicaid EHR Incentive Program, CMS has changed the name to Promoting Interoperability (PI) Programs.

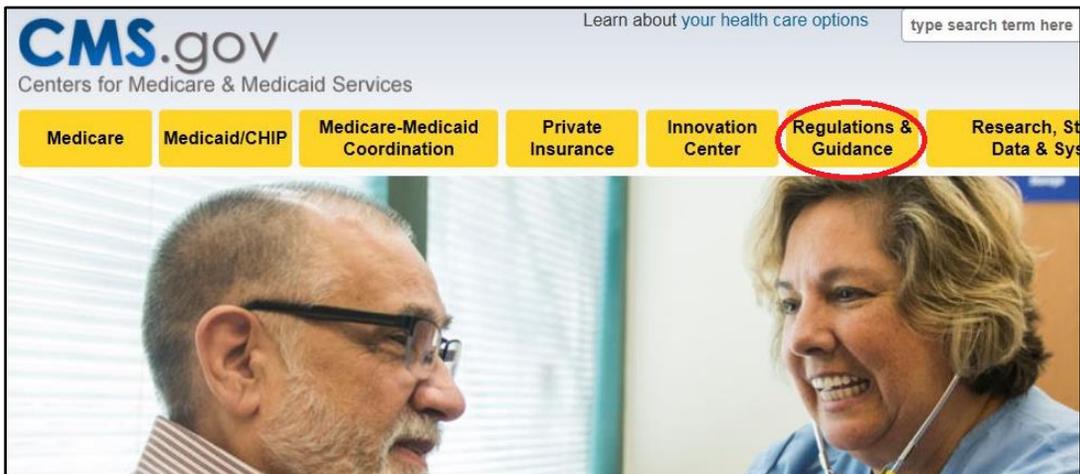
The directions below will help participants find the login page on the CMS website.

After accessing the [CMS landing page](#), select “Regulations & Guidance.”

Remember to Attest today!

Program Year 2017 is closing October 12, 2018 for all Eligible Professionals, Eligible Hospitals and Critical Access Hospitals to attest. The Department will not approve any requests for an extension.

Time is of the essence. If you require assistance with your attestation, please contact MedicaidEHR@corhio.org.



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The “Promoting Interoperability (PI) Programs” must be selected to find any information on the Medicaid EHR Incentive Program.

Regulations & Guidance

Guidance	Legislation
Advisory Committees	Clinical Laboratory Improvement Amendments (CLIA)
CMS Records Schedule	Conditions for Coverage (CfCs) & Conditions of Participations (CoPs)
CMS Small Business Administration Ombudsman	Deficit Reduction Act
CMS Small Entity Compliance Guides	Economic Recovery Act of 2009
Executive Order Guidance	Promoting Interoperability (PI) Programs
Manuals	Emergency Medical Treatment & Labor Act (EMTALA)
Privacy Act System of Records	

Please select “Registration & Attestation” in the left-hand column of the page.

Promoting Interoperability (PI) Programs

The Centers for Medicare & Medicaid Services (CMS) is dedicated to improving interoperability and patients' access to health information. To better reflect this focus, we've renamed the EHR Incentive Programs to the Promoting Interoperability (PI) Programs. Through this rulemaking, we are also streamlining the programs to reduce the time and cost required of providers to participate. Stay tuned for more information. To find out more on how this rulemaking affects Medicare eligible clinicians participating in the Promoting Interoperability (formerly Advancing Care Information) performance category of the Merit-based Incentive Payment System, visit the Quality Payment Program website at <https://qpp.cms.gov/>.

Latest News

- On August 2, 2018, CMS published the Fiscal Year (FY) 2019 Medicare Hospital Inpatient Prospective Payment System and Long Term Acute Care Hospital Prospective Payment System Final Rule. For more information on the upcoming changes for the 2019 program year, visit the [Federal Register](#), and view this [fact sheet](#).
- Now Available: CMS' electronic clinical quality measure (eCQM) annual update for calendar year (CY) 2018 reporting. For more information, the updated measure specifications are available on the [eCQI Resource Center](#)

In the middle of the page is the selection for the “Registration and Attestation System.” Follow the prompts to the login page and sign in to begin updating registration information.

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<ul style="list-style-type: none"> Interoperability Program Basics Clinical Quality Measures Basics eQIM Library Certified EHR Technology Eligible Hospital Information Medicaid State Information Medicare Advantage CMS Promoting Interoperability (PI) Listserv Attestation Batch Upload Page 	<h3>Registration Resources</h3> <p>Below are step-by-step guides to help you register and attest for PI Programs. These official guides provide easy instructions for using CMS systems, helpful tips and screenshots to walk you through the process, and important information that you will need in order to successfully register and attest. Please download the guide that best fits your needs:</p> <ul style="list-style-type: none"> • Registration and Attestation System • Registration User Guide for Medicare EPs • Registration User Guide for Medicaid EPs • Registration User Guide for All Eligible Hospitals • Identify & Access System Quick Reference Guide • EHR Registration, Attestation, and PECOS Checklist
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Tips When Updating Registrations at CMS

It is the participants responsibility to make sure the address, phone number, email address, Social Security Number and payee information is correct with CMS before attesting to the Colorado Medicaid EHR Incentive Program. With this in mind, please note the following:

- Any changes made will take 24-48 hours to complete
- Participants must not make changes to the registration after submission of the attestation or before the incentive payment has been received by the payee
- If a participant moves either out-of-state or to a new location of employment, the registration must not be altered or changed until the incentive payment has been received

The registration tips above are to help with the incentive payment process. If participants change address, city or state in the registration after submission of the attestation, it will result in an incentive payment failure. This failure will not allow participants to attest to future program years until the issue has been resolved.

Tips for Successful Attestations

In order to avoid payment delays or issues during the attestation process, we have gathered some tips to help participants be successful.

- When selecting payee location (where the incentive payment will be sent), if the address, location ID or name selection doesn't match where the incentive payment should be sent, *do not* submit the attestation
- Check the CMS registration payee information
- Check the [InterChange](#) payee information

Because the Department of Healthcare Policy & Financing (the Department) or CORHIO may need to contact participants regarding their attestation, we ask that you ensure the contact phone number, if possible, is a DIRECT line or extension, not a phone tree. Because this number is used to contact delegates and participants in the event of a program update, etc., it is imperative that the contact number is current and a direct line. Neither the Department or CORHIO will continue to make contact when put on hold.



COLORADO MEDICAID EHR INCENTIVE PROGRAM

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Program Year 2017 Frequently Asked Questions

I am a first-time participant; can I attest to PY 2017 or PY 2018?

No, if a participant has never participated in the Medicaid EHR Incentive Program, they are not eligible to attest to the program.

Is the vendor certification the same as my CHPL ID?

The vendor certification number is *not* always the same as the Certification ID from the Office of the National Coordinator for Health Information Technology (ONC). Please enter your product information into the Certified Health IT Product List (CHPL) [website](#) to find the correct certification ID. The certified ID can change from year to year, so it is important for participants to check the CHPL website for each PY.

The admin/practice manager has changed/been fired/quit from our practice and we do not have the User IDs, passwords or past attestation information. Can you help me retrieve information?

The responsibility to keep User IDs, passwords and past attestation information is the organization or participants to store in secure, but accessible, manner. Neither the Department nor the Medicaid EHR Incentive Program Coordinator can be responsible for the loss of information by the organization or the participant. If a participant/provider/admin cannot login into the Medicaid Portal, select the “Forgot User ID” or “Forgot Password” links to help retrieve information. The historical data for the attestation can be accessed in the MAPIR system after logging into the MAPIR system (known as the CO Registration and Attestation website).

Newsletter Index Now Available Online

The Medicaid EHR Incentive Newsletter is a great resource for participants of the Colorado Medicaid EHR Incentive Program. The newsletter has pertinent information to help participants successfully meet MU requirements and attest. With this in mind, CORHIO has now indexed all the Medicaid EHR Incentive Program newsletters to help participants find information quickly.

Follow [this link](#) to reference newsletters from the current and past program years.

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

Medicaid EHR Incentive Program Coordinator
Kelly Hernandez
(720) 285-3232
MedicaidEHR@corhio.org

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.