September 12, 2019

Overview of the Proposed Rule for Medicaid EHR Incentive Program Participants
On July 29, 2019, the Centers for Medicare & Medicaid Services (CMS) released a proposed rule. The proposed rule, or notice of proposed rulemaking (NPRM), is offering changes to the Medicaid EHR Incentive Program (also known as Promoting Interoperability Program) for Eligible Professionals (EPs).

The below information will outline the proposed changes in the NPRM for the program years (PY) outlined:

Program Year 2020

- Clinical Quality Measures/Electronic Clinical Quality Measures (CQMs/eCQMs) will align with the Merit-based Incentive Payment System (MIPS) eligible clinicians under the eCQM collection type on the final list of quality measures established under MIPS for the Calendar Year (CY) 2020 performance period.
- For PY 2020, it is proposed for EPs to report on any six eCQMs that are relevant to their scope of practice. In addition, EPs report on at least one outcome measure (or, if an outcome measure is not available or relevant, one other high-priority measure) that aligns with the MIPS eCQM.
- The eCQM proposed reporting period for EPs in the Medicaid EHR Incentive Program will be a minimum of any continuous 274-day period within CY 2020 for EPs who have demonstrated Meaningful Use in a prior year. This proposal would allow states to accept attestations for program year 2020 as early as October 1, 2020 from EPs who choose to use an eCQM reporting period early in the year, and possibly allowing states additional time to prepare for PY 2021 and the end of the Medicaid EHR Incentive Program. EPs will be permitted to submit a full calendar year of CQM data if needed.
- The proposal also includes an eCQM reporting period for EPs demonstrating Meaningful Use for the first time would remain any continuous 90-day period.

Security Risk Assessment (SRA)
For PY 2021, the proposed changes will affect the Security Risk Assessment (SRA) Requirement. The Department of Health Care Policy and Financing (the Department) has a deadline for completing all incentive payments for the Medicaid EHR Incentive program by December 31, 2021.

Due to this deadline, proposed changes to the SRA requirement must be reviewed. CMS is proposing to change the SRA measure to allow an EP to conduct a security risk assessment at any time during CY 2021, even if that is after the EP attests. All EPs who choose not to complete a security risk assessment by the time the EP attests will be required to attest that they will complete one by December 31, 2021.

CMS will give the state flexibility to require EPs to submit evidence that the SRA has been completed, even after the incentive payment has been issued. In addition, states could require EPs to attest that if an SRA is not completed by December 31, 2021, the EP would willingly withdraw their attestation and return the incentive payment for PY 2021.

Clinical Quality Measure Reporting Period
In the CY 2019 Provider Fee Schedule (PFS) final rule, the CQM/eCQM reporting period for EPs in PY 2021 will be a minimum of any continuous 90-day period within CY 2021 but the end date for this period must be before October 31, 2021. In doing so, the Department can issue all Medicaid EHR Incentive Program payments to EPs by the December 31, 2021 deadline.
Please refer to the CY 2019 PFS final rule (83 FR 59759) for more details on reporting requirements. In this proposed rule, the Department proposes to align the CY 2020 eCQM reporting requirements for the EPs participating in the Medicaid Promoting Interoperability Program with the MIPS eCQM reporting requirements. Please refer to section III.D. of the proposed rule for additional details and criteria on the Medicaid Promoting Interoperability Program proposals.

If EPs/participants would like to comment on the NPRM, the deadline for comments is September 27, 2019 by 5:00 PM EDT. Please include the file code CMS-1715-P when submitting comments. See below on how to send CMS comments on the proposed rule. Please allow enough time for mailed comments to be received by CMS.

- No facsimile (FAX) transmissions
- Electronically - submit electronic comments on this regulation to http://www.regulations.gov and follow the “Submit a comment” instructions
- Mail - written comments to the following address ONLY: Centers for Medicare & Medicaid Services, Department of Health and Human Services, Attention: CMS-1715-P, P.O. Box 8016, Baltimore, MD 21244-8016
- Express or overnight mail - written comments to the following address ONLY: Centers for Medicare & Medicaid Services, Department of Health and Human Services, Attention: CMS-1715-P, Mail Stop C4-26-05, 7500 Security Boulevard, Baltimore, MD 21244-1850

Resources for Program Year 2019
Look for workbooks, checklists and tip sheets coming soon to the CORHIO website for PY 2019. New tip sheets are being created for PY 2019 Objectives. If participants want to request a certain tip sheet please contact the Medicaid EHR Incentive Program Coordinator at MedicaidEHR@corhio.org.

Stay tuned for the new PY 2019 Clinical Decision Tip Sheet soon to be published on the CORHIO website select the link above.

For questions regarding program requirements, eligibility and Promoting Interoperability (Meaningful Use), contact:
Medicaid EHR Incentive Program Coordinator
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MedicaidEHR@corhio.org

Medicaid Program Point of Contact and Partnerships
The Department of Health Care 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.