Medicaid EHR Incentive Program Overview & Status

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American College of Nurse Practitioners

Denver, Colorado

Overview

- HITECH Legislation

- Provider Eligibility & Payments

- Meaningful Use

- Program Status & Updates

- Tools & Resources

HITECH Legislation

Definition: **H**ealth **I**nformation **T**echnology for **E**conomic and **C**linical **H**ealth Act

Purpose: Improve outcomes, facilitate access, simplify care and reduce costs by providing:

- Major *__financial support__* to providers and States
- Far-reaching *__frameworks__* are being established that will orchestrate federal, State and local, public and private health care resources for generations to come

Conceptual Approach to Meaningful Use

GOALS:
- *This is part of an evolutionary path*
- *There will be incremental growth*
- *All journeys start with a few steps*

Improved outcomes

Advanced clinical processes

Data capture and sharing
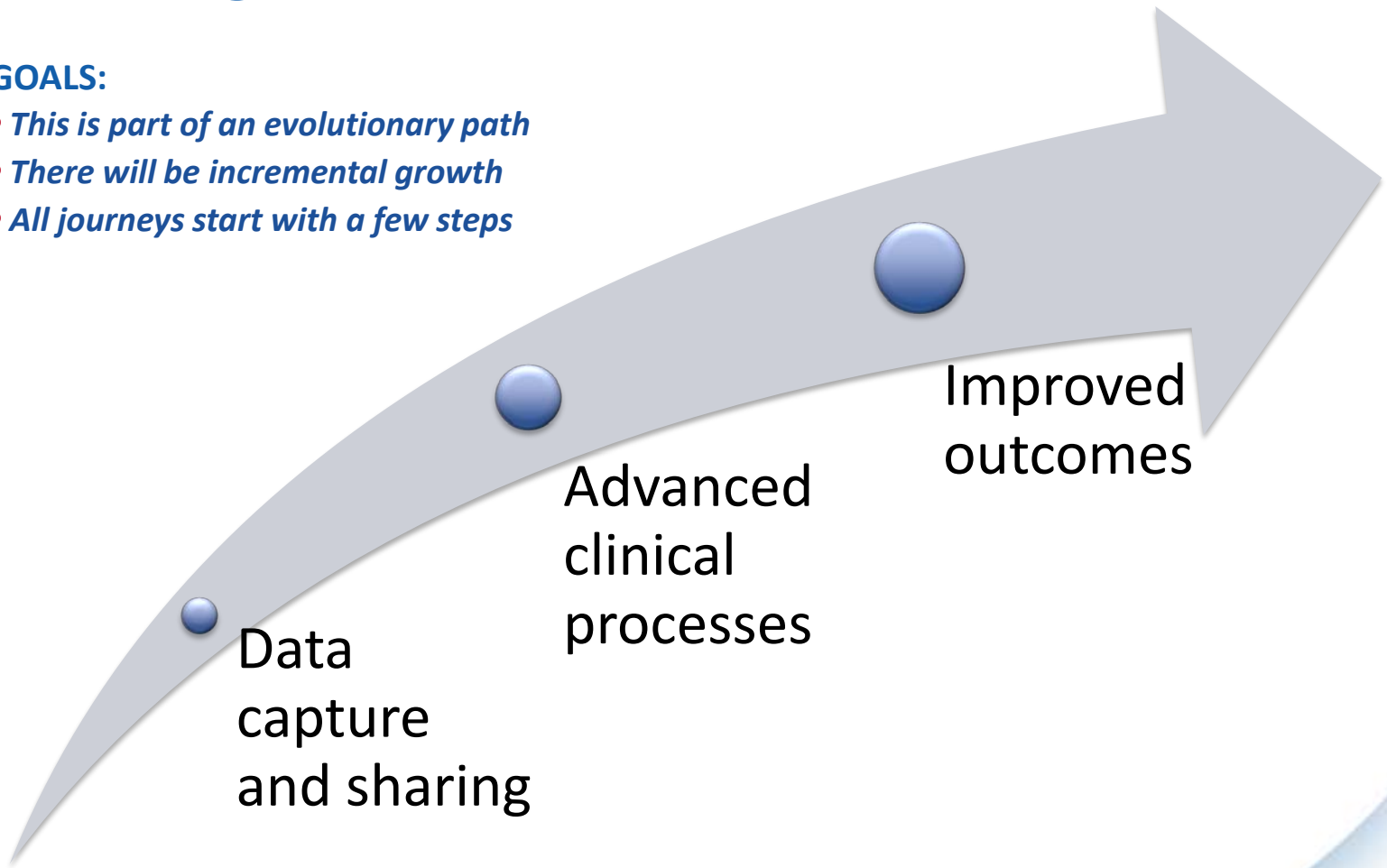
Feds pay 90%, States pay 10%

Money for States to plan for & implement the program

Feds pay 100%

Incentive funds paid to providers

Hospitals only eligible for Medicare incentive

Hospitals only eligible for Medicaid incentive

Subsection(d) hospitals in 50 U.S. states and the District of Columbia*
Critical Access Hospitals (CAHs)*

without 10% Medicaid

Most subsection(d) hospitals/ acute care hospitals
Most CAHs

Children's hospitals
Acute care hospitals in the territories
Cancer hospitals

Could be eligible for both Medicare & Medicaid (most hospitals)

EP Eligibility: Medicaid Basics

Must be one of 5 types of EPs

- Physicians
- **Nurse Practitioners (NPs)**
- Certified Nurse-Midwives (CNMs)
- Dentists
- Physician Assistants (PAs) working in a Federally Qualified Health Center (FQHC) or rural health clinic (RHC) that is so led by a PA

Must either:

- Have ≥ 30% *Medicaid* patient volume (≥ 20% for pediatricians only); or
- Practice predominantly in an FQHC or RHC with ≥30% *needy individual* patient volume

Licensed, credentialed

Must not be hospital-based

Incentives

Medicaid EPs= up to $63,750

- Over six years
- Pediatricians at <30%, but >20% Medicaid patient volume= reduced by a third

Medicaid hospitals= varies according to size and other factors

- big money for most hospitals

Incentive Payments for Medicaid EPs

First Calendar Year (CY) for which the EP Receives an Incentive Payment

	CY 2011	CY 2012	CY 2013	CY 2014	CY 2015	CY 2016
CY 2011	$21,250					
CY 2012	$8,500	$21,250				
CY 2013	$8,500	$8,500	$21,250			
CY 2014	$8,500	$8,500	$8,500	$21,250		
CY 2015	$8,500	$8,500	$8,500	$8,500	$21,250	
CY 2016	$8,500	$8,500	$8,500	$8,500	$8,500	$21,250
CY 2017		$8,500	$8,500	$8,500	$8,500	$8,500
CY 2018			$8,500	$8,500	$8,500	$8,500
CY 2019				$8,500	$8,500	$8,500
CY 2020					$8,500	$8,500
CY 2021						$8,500
TOTAL	$63,750	$63,750	$63,750	$63,750	$63,750	$63,750

Adopt/Implement/ Upgrade (AIU)

- First participation year only for Medicaid providers
- Already have an EHR? **Upgrade** to the newly certified version
- Don't have an EHR? **Adopt** a certified EHR system or combination of modules
- Must use certified EHR technology capable of meeting all the MU objectives
- demonstration of a financial and/or legal commitment to certified EHR technology
- No EHR reporting period

Meaningful Use: HITECH Act Description

- The Recovery Act specifies the following 3 components of Meaningful Use:
    1. Use of certified EHR in a <u>meaningful manner</u> (e.g., e-prescribing)
    2. Use of certified EHR technology for <u>electronic exchange</u> of health information to improve quality of health care
    3. Use of certified EHR technology to submit <u>clinical quality measures</u> (CQM) and other such measures selected by the Secretary

Program Status

- Launched on January 2011

- 33 States have launched as of Oct. 3rd

- Most remaining States to launch by end of 2011

- 21 States have made payments as of September 30th

Medicaid Payments

As of September 1, 2011:

- 294 dually-eligible hospitals have been paid more than $262 million

- 15 Medicaid-only hospitals have been paid nearly $33 million

- 4,463 eligible professionals have successfully attested and have been paid almost $94 million

Program Updates

Updates to CMS and ONC regulations

- Changes to current regulations with public comment, updating MU for phase 2

Intersection with other programs

- e.g., CHIPRA, ACA

Medicare penalties in 2015 (*Not applicable to NPs*)

Update to Frequently Asked Question (FAQ) on tribal clinics

IAPD and SMHP Templates

7 Standards and conditions, 42 CFR 433

State checklist for Medicaid EHR program launch

Exchange/Medicaid IT Guidance 2.0

Support/Partnership
Regional Extension Centers (REC)

- Collaboration with Medicaid on provider outreach (value-case of EHR adoption)

- Expanding the REC focus beyond the ONC-funded primary care providers to offer TA to other eligible professionals

- An "extender" of States and CMS on messaging, tools, resources, etc.

Summary & Final Thoughts

10 year program

- ✓ no penalties
- ✓ non-consecutive participation
- ✓ providers can start as late as 2016 *and* still get the full incentive amount

- Voluntary for States to implement
- No Medicaid payment reductions
- A/I/U option for 1st participation year
- Maximum incentive is $63,750 for EPs
- States can adopt certain additional requirements for MU
- Last year a provider may initiate/register program is 2016

Resources to Get Help and Learn More

- Get information, FAQs, tip sheets and more at CMS' official website for the EHR incentive programs www.cms.hhs.gov/EHRIncentiveprograms

  - Videos

  - FAQs

  - Email list-serv

  - EP Users' Guides for Registration and Attestation

  - EH Users' Guide for Registration and Attestation

  - Helpful Links

  - Monthly data on provider registration, attestation and payment

Resources…

Follow the latest information about the EHR Incentive Programs on Twitter at www.Twitter.com/CMSGov

- Learn about certification and certified EHRs, as well as other ONC programs designed to support providers as they make the transition:

http://healthit.hhs.gov

Support Staff

Central Office support for EHR, Jessica Kahn and Michelle Mills and other staff

4 CMS HITECH Regional Office personnel to assist the States with EHR issues

Tom Novak, Regions 1, 2, 3

Nick Blake, Regions 5, 7, 9

Jason McNamara, Regions 4, 5, 6

Robert McCarthy, Regions 8 and 10

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