



Understanding Eligibility & Registration for the Medicare & Medicaid EHR Incentive Programs

Centers for Medicaid, CHIP, and Survey & Certification

February 18, 2011



Session topics

- Program eligibility
 - Medicare & Medicaid
 - Eligible professionals, CAHs, eligible hospitals
- Registration, eligibility verification
 - With CMS, with States



Medicare-only Eligible Professionals

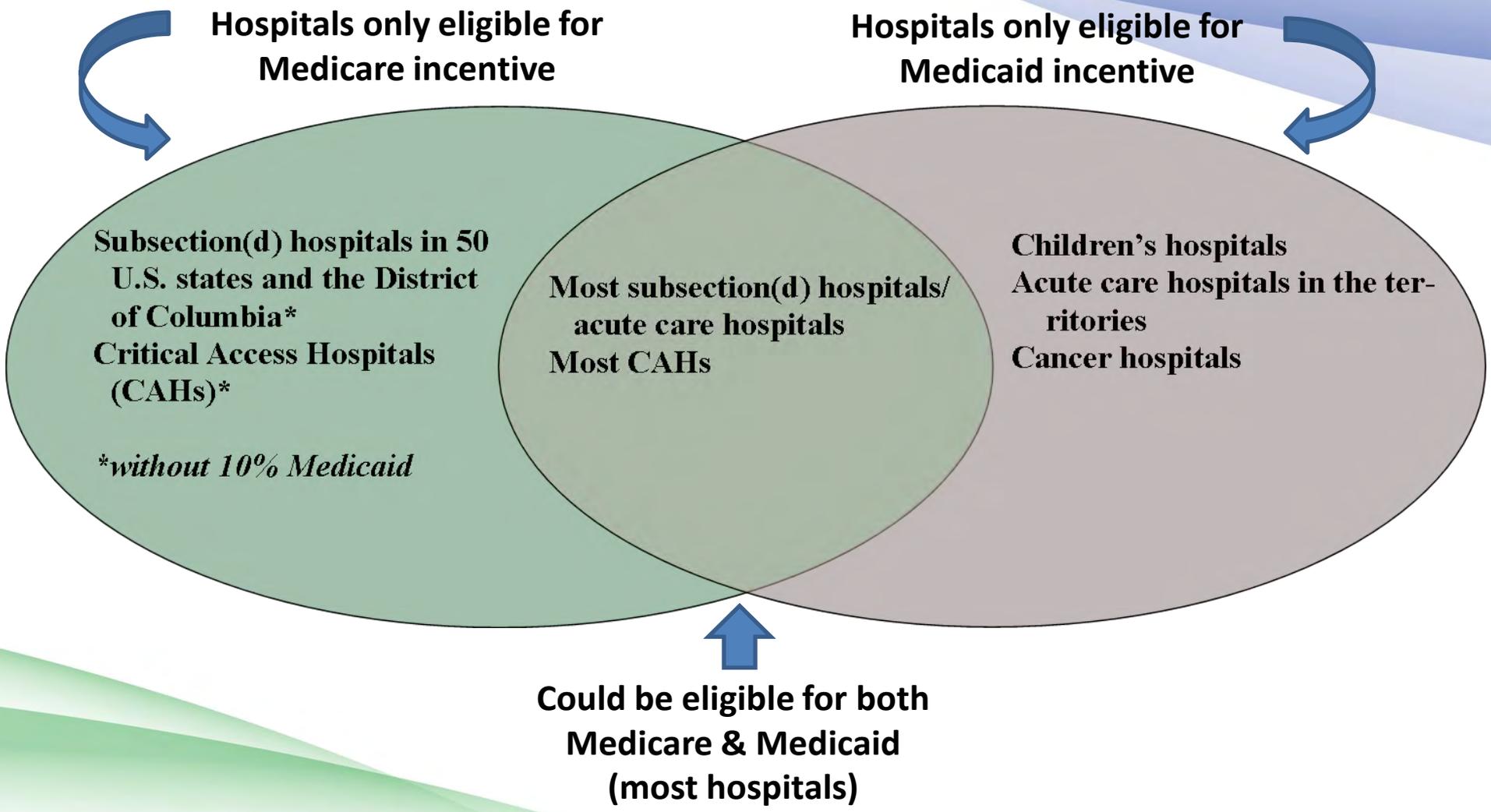
Medicaid-only Eligible Professionals

**Doctors of Optometry
Doctors of Podiatric Medicine
Chiropractor**

**Doctors of Medicine
Doctors of Osteopathy
Doctors of Dental Medicine
or Surgery**

**Nurse practitioners
Certified nurse midwives
Physician assistants (PAs)
when working at an FQHC
or RHC that is so led by a
PA**

**Could be eligible for both
Medicare & Medicaid
incentives**





EP Eligibility: Medicaid Basics

- Must be one of 5 types of EPs
- Must either:
 - Have $\geq 30\%$ *Medicaid* patient volume ($\geq 20\%$ for pediatricians only); or
 - Practice predominantly in an FQHC or RHC with $\geq 30\%$ *needy individual* patient volume
- Licensed, credentialed
- No OIG exclusions, living
- Must not be hospital-based



Hospital Eligibility: Medicaid Basics

- Acute care hospital with $\geq 10\%$ Medicaid patient volume
 - General, short-term stay
 - Cancer
 - Critical Access Hospitals
- Children's hospitals



EP Eligibility: Medicare Basics

- Must be a physician (defined as MD, DO, DDM/DDS, optometrist, podiatrist, chiropractor)
- Must have Part B Medicare allowed charges
- Must not be hospital-based
- Must be enrolled in PECOS, living



Hospital Eligibility: Medicare Basics

- Title XVIII subsection(d) qualified
 - Must be in 50 United States or D.C.
- Critical Access Hospitals



In order to register

- NPPES (i.e., NPI) web user account
- Medicare EPs and all hospitals must have a current enrollment record in PECOS

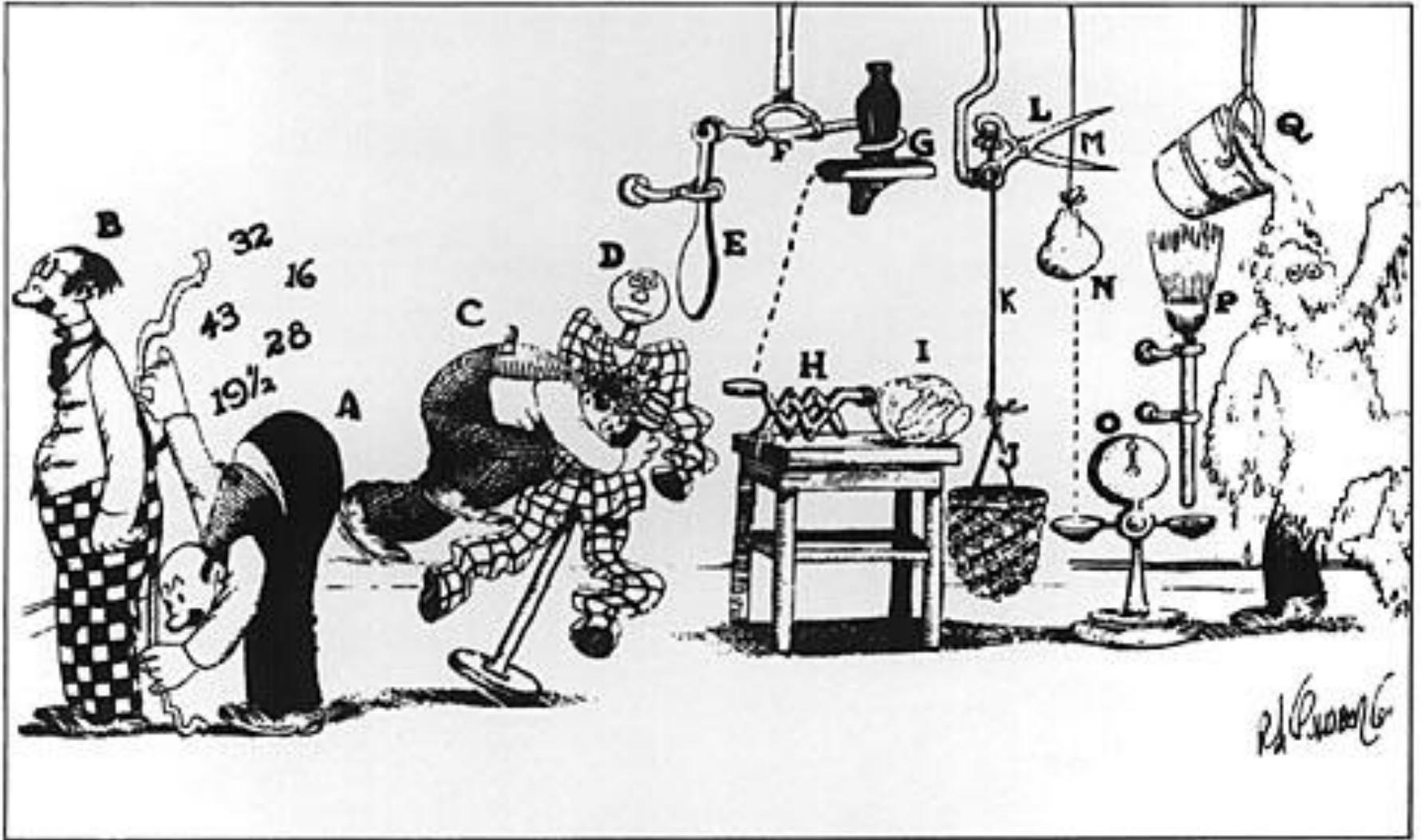


In order to get a payment

- Medicare EPs and hospitals
 - Meaningfully use certified EHR technology
 - Attest to all program requirements, MU requirements, get EHR certification number from CHPL
- Medicaid EPs and hospitals
 - Adopt, implement, upgrade, or meaningfully use certified EHR technology
 - Attest to meeting all program requirements



**Now we're ready to
register! What's next?**







Register-Attest-Get Paid!

Medicaid

For states with launched programs:

- Go to the CMS EHR Incentive Program website
 - Click on the *Registration* tab
 - Complete your registration
- Go to your state's website and complete the eligibility verification
- States will pay no later than 5 months after you register; most sooner



Medicare & Medicaid EHR Incentive Program Registration and Attestation System

Welcome to the Medicare & Medicaid EHR Incentive Program Registration & Attestation System

About This Site

The Medicare and Medicaid Electronic Health Records (EHR) Incentive Programs will provide incentive payments to eligible professionals and eligible hospitals as they demonstrate adoption, implementation, upgrading, or meaningful use of certified EHR technology. These incentive programs are designed to support providers in this period of Health IT transition and instill the use of EHRs in meaningful ways to help our nation to improve the quality, safety, and efficiency of patient health care.

This web system is for the Medicare and Medicaid EHR Incentive Programs. Those wanting to take part in the program will use this system to register and participate in the program.

Additional Resources: For User Guides to Registration and Attestation that will show you how to complete these modules, a list of EHR technology that is certified for this program, specification sheets with additional information on each Meaningful Use objective, and other general resources that will help you complete registration and attestation, please visit [CMS website](#).

Eligible to Participate - There are two types of groups who can participate in the programs. For detailed information, visit [CMS website](#).

[Eligible Hospitals](#)

[Eligible Professionals \(EPs\)](#)



Medicare & Medicaid EHR Incentive Program Registration and Attestation System

Login

Login Instructions

(*) End asterisk indicates a required field.

Eligible Professionals (EP)

- If you are an EP, you must have an active National Provider Identifier (NPI) and have a National Plan and Provider Enumeration System (NPPES) web user account. Use your NPPES user ID and password to log into this system.
- If you are an EP who does not have an NPI and/or an NPPES web user account, navigate to [NPPES](#) to apply for an NPI and/or create an NPPES web user account.

Eligible Hospitals

- If you are an Eligible Hospital, you must have an active NPI. If you do not have an NPI, apply for an NPI in [NPPES](#).
- Users working on behalf of an Eligible Hospital(s) must have an Identity and Access Management system (IAM) web user account (User ID/Password) and be associated to an organization NPI. If you are working on behalf of an Eligible Hospital(s) and do not have an IAM web user account, [Create a Login](#) in the IAM System.

Account Management

- If you are an existing user and need to reset your password, visit the [IAM System](#).
- If you are having issues with your User ID/Password and are unable to log in, please contact the EHR Incentive Program Information Center at 888-734-6433 / TTY: 888-734-6583.

WARNING: Only authorized registered users have rights to access the Medicare & Medicaid EHR Incentive Program Registration & Attestation System. Unauthorized access to this system is forbidden and will be prosecuted by law. By accessing the system users are subject to monitoring by system personnel. Anyone using this system expressly consents to monitoring and is advised that if such monitoring reveals possible evidence of criminal activity, system personnel may provide the evidence of such monitoring to law enforcement officials.

* User ID:
* Password:

Providers will use the
NPPES/NPI web user
account user name
and password





Medicare & Medicaid EHR Incentive Program Registration and Attestation System

[Home](#) | [Help](#) | [Log Out](#)

Home

Registration

Attestation

Status

Account Management

Welcome Nichole Davick

Last Successful Login: 11/24/2010 | Unsuccessful Login Attempts: 0

Notifications

Welcome to the Medicare & Medicaid EHR Incentive Program Registration & Attestation System

For Medicare EHR incentive program participants, you will need to demonstrate meaningful use of certified EHR technology.

For Medicaid EHR incentive program participants, you will need to demonstrate adoption, implementation, upgrading, or meaningful use of certified EHR technology in your first year and demonstrate meaningful use for the remaining years in the program. Attestation for Medicaid occurs through your State Medicaid Agency.

Instructions

Select any tab to continue.



Tabs will guide users through each phase



Registrations

Registration Instructions

Welcome to the Registration Page.

Depending on the current status of your registration, please select one of the following actions:

Register

- Register for the EHR Incentive programs
- Continue an incomplete registration

Modify

- Modify Existing Registration
- Switch Incentive Programs (Medicare/Medicaid)
- Switch Medicaid State

Cancel

- Discontinue participation in the Medicare & Medicaid EHR incentive programs

Reactivate

- Reactivate a previously canceled registration

Resubmit

- Resubmit a registration that was previously deemed ineligible

Registration Selection

Identify the desired registration and select the Action you would like to perform. Please note only one action can be performed at a time on this page.

Name	Tax Identifier	National Provider Identifier (NPI)	Registration Status	Action
Nichole Davick	XXX-XX-2454 (SSN)	1174853675	ISSUE PENDING	Resubmit Cancel



Topics for this Registration

Registration ID: 1000000703

Reason for Registration

- You have decided to resubmit your registration information.

Topics

The data required for this registration is grouped into topics. In order to complete registration, you must complete ALL of the following topics. Please click on Start Registration or Modify Registration to provide the required information. The system will show checks for item when completed.

Completed	Topics
<input checked="" type="checkbox"/>	EHR Incentive Program
<input checked="" type="checkbox"/>	Personal Information
<input checked="" type="checkbox"/>	Business Address & Phone

Note:
When all topics are checked as completed, select the **BEGIN SUBMISSION** button to submit your registration.

MODIFY REGISTRATION

BEGIN SUBMISSION



Home Registration **Attestation** Status Account Management

EHR Incentive Program

Incentive Program Questionnaire

{*} Red asterisk indicates a required field.

Not sure which incentive program to select? For information on the requirements and the differences between the Medicare and Medicaid EHR incentive programs visit the [CMS Website](#).

***Please select your Incentive Program**

Medicare Medicaid

Note: Medicare EPs cannot receive both Medicare EHR and e-Prescribing incentive payments.

***Please select your Eligible Professional Type:**

The EHR incentive programs require the use of EHR technology certified for this program. For more information about certified EHRs, visit the [CMS Website](#).

***Do you have a certified EHR?**

Yes No

Note: A certified EHR is not required to complete the registration process, but an EHR Certification Number will be required when you attest for payment.

EHR Certification Number (Optional):

[What is an EHR Certification Number?](#)

Here you select program type (state for Medicaid providers), provider type, and EHR # if they have it

EHR Incentive Program

Incentive Program Questionnaire

(*) Red asterisk indicates a required field.

Not sure which incentive program to select? For information on the requirements and the differences between the Medicare and Medicaid EHR incentive programs visit the [CMS Website](#)

***Please select your Incentive Program**

Medicare Medicaid

Note: Medicare EPs cannot receive both Medicare EHR and e-Prescribing incentive payments.

***Medicaid State/Territory:** [Why is my state not here?](#)

***Please select your Eligible Professional Type:**

The EHR incentive programs require the use of EHR technology certified for this program. For more information about certified EHRs, visit the [CMS Website](#)

***Do you have a certified EHR?**

Yes No

Note: A certified EHR is not required to complete the registration process, but an EHR Certification Number will be required when you attest for payment.

Personal Information

Name

First Name: John
Middle Name:
Last Name: Parker
Suffix:

Identifiers

(*) Red asterisk indicates a required field.

Please note, the tax identification number (TIN) captured below will receive the EHR incentive payment.

Social Security Number (SSN): XXX-XX-9812 (SSN)

National Provider Number (NPI): 1972833564

*Payee TIN Type: EIN

*Group Name: PARKER GROUP

Payee TIN: 991039482

*Payee NPI:

Medicare will derive this information from PECOS for Medicare EPs

Medicaid EPs will have a text field



Home Registration Affirmation Status Account Management

Registration Disclaimer

General Notice

NOTICE: Any person who knowingly files a statement of claim containing any misrepresentation or any other false information in obtaining information has the right of a criminal act punishable under law and may be subject to civil penalties.

Accept, Agree and Submit

I certify that the foregoing information is true, accurate, and complete. I understand that the Medicare/Medicaid DSH Incentive Program payment I request will be paid from Federal funds, that by filing the registration I am submitting a claim for Federal funds, and that the use of any false claims, statements, or documents, or the submission of a false claim used to obtain a Medicare/Medicaid DSH Incentive Program payment, may be prosecuted under applicable Federal or State criminal laws and may also be subject to civil penalties.

I hereby agree to keep such records as are necessary to demonstrate that I met all Medicare/Medicaid DSH Incentive Program requirements and to furnish those records to the Medicare State Agency, Department of Health and Human Services, or contractor acting on their behalf.

No Medicare/Medicaid DSH Incentive Program payment may be paid unless the registration form is completed and accepted as required by coding law and regulations (42 CFR 405.22).

NOTICE: Anyone who misrepresents or falsifies essential information to obtain payment from Federal funds requested by this form may be subject to the civil penalties under applicable Federal law.

REGULATORY NOTICE: Information from the Medicare/Medicaid DSH Incentive Program registration form and subsequently submitted information and documents may be given to the State Revenue Service, private collection agencies, and consumer reporting agencies in connection with investigations of any investigation made and/or Congressional Office investigation to be made at the request of the person to whom a recall pertains. Appropriate disclosures may be made to other federal, state, local, foreign government agencies, private business entities, and individual providers of care, on matters relating to enrollment, health program status, program integrity, and civil and criminal litigation related to the operation of the Medicare/Medicaid DSH Incentive Program.

DISCLAIMER: Submitting false or incomplete information will result in being ineligible to pay or may result in being ineligible for payment. With this one registration document there are no penalties under these programs for refusing to supply information. Failure to furnish information on the registration form will prevent DSH Incentive Program from being issued. Failure to furnish subsequently requested information or documents will result in the issuance of an investigation-related letter followed by enforcement procedures.

It is mandatory that you tell us if you believe you have been overpaid under the Medicare/Medicaid DSH Incentive Program. The Patient Protection and Affordable Care Act, Section 402, Section 1128, provides penalties for submitting this information.

AGREE DISAGREE



Legalese

User agrees and proceeds;
user disagrees and cannot
complete registration



Submission Receipt

Failed Submission

Your Registration for the EHR Incentive Payment Program has not been accepted. Please read the instructions below.

- The Medicare enrollment in PECOS associated with this registration is not approved. This registration will remain in an Issue Pending status until the issue with the enrollment has been addressed. Please navigate to the PECOS website to validate your enrollment status.
- The Provider type you selected for this registration does not match with a Provider specialty on any of your Medicare Enrollments in PECOS. This registration will remain in an Issue Pending status until the issue has been addressed. You may visit [PECOS](#) to view or update your Medicare enrollment information.

Registration Tracking Information

Registration ID: 1000000703

Name: Nichole Davick

Submitted Date: 11/30/2010

Reason(s) for Submission:

- You are an Eligible Professional registering in the incentive program.
- You have modified your registration information.

PRINT

RETURN TO HOME

Provider receives this message when there are problems with the registration. E.g., no match in PECOS, on the Death Master File, etc.



Home Registration **Attestation** Status Account Management

Identification Questionnaire

CCN / NPI Information

(*) Red asterisk indicates a required field.

LBN : Morton Plant Hospital Association, Inc

TIN : 590624462 (EIN)

Please provide the CMS Certification Number (CCN) and the National Provider Identifier (NPI) that is associated to this TIN :

*CCN:

*NPI:

Mostly, the hospital registration is similar to the EP registration.

One difference is that hospitals must provide their CCN and pick an NPI. These must match the TIN as well.



EHR Incentive Program

Incentive Program Questionnaire

(*) Red asterisk indicates a required field.

Not sure which incentive program to select? For information on the requirements and the differences between the Medicare and Medicaid EHR incentive programs visit the [CMS Website](#)

***Please select your Incentive Program**

Medicare Medicaid Both Medicare & Medicaid

APPLY

The EHR incentive programs require the use of EHR technology certified for this program. For more information about certified EHRs, visit the [CMS Website](#).

***Do you have a certified EHR?**

Yes No

Note: A certified EHR is not required to complete the registration process, but an EHR Certification Number will be required when you attest for payment.

EHR Certification Number
(Optional):

[What is an EHR Certification Number?](#)

PREVIOUS PAGE

SAVE AND CONTINUE

Unlike EPs, some hospitals can pick Medicare, Medicaid, or both



IMPORTANT: If a hospital is eligible for both programs, they should select both, even if they may not get an incentive for both in the 1st year.



You must resolve the following error(s) to continue:

- Please select the appropriate Medicaid State/Territory.
- Please select your Medicare hospital type.
- Please select your Medicaid hospital type.

Incentive Program Questionnaire

(*) Red asterisk indicates a required field.

Not sure which incentive program to select? For information on the requirements and the differences between the Medicare and Medicaid EHR incentive programs visit the [CMS Website](#)

*Please select your Incentive Program

Medicare Medicaid Both Medicare & Medicaid

APPLY

*Medicaid State/Territory: [Why is my state not here?](#)

*My Medicaid hospital is a:

*My Medicare hospital is a:

The EHR incentive programs require the use of EHR technology certified for this program. For more information about certified EHRs, visit the [CMS Website](#)

*Do you have a certified EHR?

Yes No

Note: A certified EHR is not required to complete the registration process, but an EHR Certification Number will be required when you attest for payment.

The system will prevent a provider from proceeding when all required fields aren't complete.



If a provider selects *Medicaid* or *Both Medicare & Medicaid*, they must choose a state

Submission Receipt

Successful Submission

You have successfully registered for the EHR Incentive Payment Program.

IMPORTANT! Please note:

- If you are a Medicaid provider, your State Medicaid Agency will need to collect and verify additional eligibility information. After 24 hours, please continue your registration using your State's eligibility verification tool. You can find your State [here](#). Your State will also collect any information to support a program attestation for Medicaid providers (i.e., Medicaid providers will not use the attestation feature on this site). Your State Medicaid Agency may also contact you through the email and/or street addresses you provided in this registration to explain how to continue the eligibility process.
- You may switch between Medicaid and Medicare any time prior to your payment being initiated. This means that when [Medicare or the State Medicaid Agency] begins calculating and disbursing your payment, you will be unable to switch between Medicaid and Medicare.

Registration Tracking Information

Registration ID: 1000000746

LBN: Greater Baltimore Medical Center, Inc.

Submitted Date: 11/30/2010

Submitted By: Authorized Official

Reason(s) for Submission:

- You have modified your registration information.

Medicaid EPs and Medicaid hospitals must continue with the State's site to verify additional info.

Providers will not receive email confirmations at this point in the program.

It is important that providers print this page or record the information in some other way.



Home

Register

Track

Payment

Logout

Success



Received your registration from NLR. Continue with state registration.

Search Criteria

Registration ID: 1700901825

NPI: 1366472326

Tax ID/SSN: 386006309

Login Information

User ID: abbeyj1245

Profile: Domain Administrator

NLR INFORMATION

Please validate your NLR information. If the information is incorrect contact NLR. If the information is correct please proceed.

Personal Info

First Name : Ellun Last Name : Johnsun
 Middle Initial : Suffix :
 Provider Type : Physician
 Provider Specialty : NEUROPSYCHIATRY

Address

Address : 4165 E Lippincott Blud
 City : Burton
 State : MI Zip : 48519
 Phone : (810) 744-1888 Ext :
 E-mail : Tust@test.com

Identifiers

The Tax Identification Number (TIN) captured below will receive the EHR incentive payment.

Payee NPI : 1366472326
 Payee SSN/Tax ID : 386006309

Exclusion Code	Exclusion Desc	Exclusion Date

ELIGIBILITY

2

ATTESTATION

3

1



Home

Register

Track

Payment

Logout

Success



Received your
NLR. Continue
registration.

NLR INFORMATION

ELIGIBILITY

Pay

1

2

Enter Eligibility Information

Bold fields are required.

Reporting Period

Start Date:

End Date:

Eligible Patient Volume

Are you a pediatrician Yes No

Are you a physician assistant (PA) Yes No

Did you render care in a hospital Yes No

**Do you want use organization
encounters** Yes No

Did you render care in FQHC/RHC Yes No

Do you want to include MCO panel Yes No

FQHC/RHC

Total Encounters: ?

Total unduplicated Encounters: ?

Medicaid Encounters: ?

Medicaid Unduplicated Encounters: ?

MIChild Encounters: ?

Charity Care Encounters: ?

Sliding Fee Scale Encounters: ?

MCO

Total Panel: ?

ATTESTATION

3



Home

Register

Track

Payment

Logout

Success



Received your registration from NLR. Continue with state registration.

Search Criteria

Registration ID: 1700901825

NPI: 1366472326

Tax ID/SSN: 386006309

Login Information

User ID: abbeyj1245

Profile: Domain Administrator

NLR INFORMATION

ELIGIBILITY

ATTESTATION

1

2

3

NOTICE: Any person who knowingly files a statement of claim containing any misrepresentation or any false, incomplete or misleading information may be guilty of a criminal act punishable under law and may be subject to civil penalties.

Signature

I certify that the foregoing information is true, accurate and complete. I understand that the HITECH incentive payment I requested will be paid from Federal and State funds, and that any false claims, statements, or documents, or concealment of a material fact, may be prosecuted under applicable Federal or State laws. I hereby agree to keep such records as are necessary to demonstrate that I met all HITECH requirements and to furnish those records to the Medicaid State Agency, Dept. of Health and Humans Services, or contractor acting on their behalf No HITECH

I accept the terms and conditions

Register





Certified Health IT Product List

The Office of the National Coordinator for Health Information Technology



HealthIT.HHS.Gov

The Certified HIT Product List (CHPL) provides the authoritative, comprehensive listing of Complete EHRs and EHR Modules that have been tested and certified under the Temporary Certification Program maintained by the Office of the National Coordinator for Health IT (ONC). Each Complete EHR and EHR Module listed below has been certified by an ONC-Authorized Testing and Certification Body (ONC-ATCB) and reported to ONC. Only the product versions that are included on the CHPL are certified under the ONC Temporary Certification Program. Please note that the CHPL is a "snapshot" of the current list of certified products. The CHPL is updated frequently as newly certified products are reported to ONC.

Please send suggestions and comments regarding the Certified Health IT Product List (CHPL) to ONC.certification@hhs.gov, with "CHPL" in the subject line.

USING THE CHPL

To determine if an EHR product or a bundle of EHR products meets meaningful use requirements, or to request a CMS reporting ID:

1. Select your practice type using the two buttons below
2. Search for EHR Products and add them to your cart
3. Check your cart to see if the product or products meet 100% of the required criteria
4. Request a CMS EHR Certification ID using the button on the Certification Cart page

[Search Ambulatory Products](#)

[Search Inpatient Products](#)

If you do not wish to request a CMS EHR Certification ID, and only want to view a complete list of Certified EHR products that includes both Ambulatory and Inpatient products, please use the 'View list of all Certified Products' button.

[View List of all Certified Products](#)



Questions?

CMS EHR Incentive Program website

www.cms.gov/EHRIncentivePrograms

- FAQs
- Final Rule
- Eligibility wizard
- EHR Information Center: 1-888-734-6433
- Regional Extension Centers (RECs)
- Much more!