MARCH 2017

Incentive News

TENNCARE EHR PROVIDER INCENTIVE PAYMENT PROGRAM

ACCEPTING NOW THESE ATTESTATIONS

- **2016 AIU and all MU attestations.**
- **2017: AIU only**

CUMBERLAND PROVIDERS FIRST TO EARN ALL SIX PAYMENTS!

Congratulations to **Ty T. Webb**, **Diana Jo Turner**, and **Marla J. Moore** of Cumberland Family Care. They are our first three TennCare Medicaid Eligible Profesionals to receive all six of the EHR Provider Incentive Payment Program incentive payments.

All EPs can earn up to six EHR Incentive payments. If you have not yet attested for six Incentive years, plan now to attest again!

March 31 Marks the End of Program Registration and AIU Attestation

THIS IS IT! March 31, 2017 is the final date any provider who wishes to participate in the TennCare EHR Provider Incentive Payment Program can enroll and submit a first-year attestation.

IF YOU DO NOT ENROLL AND ATTEST FOR 2016, YOU CANNOT PARTICIPATE IN THE PROGRAM!

Although the program will continue through Incentive Year 2021, you MUST enroll and submit a 2016 attestation by March 31, 2017 in order to be able to participate after this year. Enrollment in PIPP will close after March. To meet the deadline, providers

- MUST go to the CMS EHR Registration website to register
- MUST submit a Program Year 2016 attestation
- MUST do so by March 31, 2017 (11:59 PM CT)

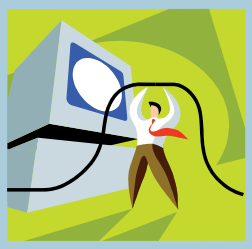
Program Year 2016 is the last year a provider will be able to submit an AIU attestation. As AIU has only been a choice in the first year of attestation, and 2016 is the last program year for which one may attest for the first time, Program Year 2017 AIU attestations will NOT BE ACCEPTED and will be returned.

If you have already enrolled and are continuing to attest, the only concern you have is submitting your Program Year 2016 attestation by March 31.

If you know providers in or outside your group who are not yet participating, don't let them pass up this opportunity!

Providers who checked into the program before and decided they did not meet the Patient Volume requirement might want to revisit their calculation. They may now meet the requirement without realizing it, as situations do change.

Anyone with questions about enrolling in, qualifying for, or attesting to the program can contact our EHR Provider Incentive Unit at TennCare.EHRIncentive@tn.gov.



Getting down to the wire!

Attesting for Meaningful Use for 2016? Watch our helpful video *before* beginning your attestation: MU Attestation Presentation

DID YOU KNOW?

The ability to enroll in the TennCare EHR Provider Incentive Payment Program will end after March 2017.

Recent News Round-Up

Survey for All TennCare Providers Coming Soon

This month the Bureau of TennCare will be reaching out to ALL medical providers across the state with a brief EHR survey.

Since 2011, TennCare has been encouraging providers who are eligible to participate in the EHR Provider Incentive Payment Program (PIPP). Previously, we conducted an "interest" survey in 2010; now we would like to determine the current EHR landscape using a new survey tool.

This survey is for ALL providers, it is NOT only for Medicaid providers. We would like to hear from ALL Tennessee medical professionals and facilities.

The survey will be available in March, please spread the word to colleagues and other interested providers (including any who may have not participated in the EHR PIPP) to participate in this EHR survey.

We especially would like to hear from providers and facilities that are not eligible for the EHR PIPP and their opinions on EHRs and connectivity in Tennessee.

We have amazing TN prizes for which all survey respondents will be eligible to win. On completion/close of survey, your name will be entered into a drawing and we will notify the winners by email.

The PIPP program provides a financial incentive for providers to adopt and use certified EHR technology (CEHRT). One of the goals of PIPP is to increase the connectivity between providers across Tennessee in order to share patient health information.

Alternate Medicare Meaningful Use Attestations for 2016 Available to EPs through March 13, 2017

Medicaid Eligible Providers (EPs) who do not meet eligibility requirements to attest for the Medicaid Electronic Health Record (EHR) Incentive Program for Program Year 2016 may attest to Meaningful Use (MU) with Medicare in order to avoid a payment adjustment in 2017 (for first-time MU attesters in PY 2016) or 2018 (for returning MU attesters in PY 2016).

The Alternate Medicare MU attestation will be available to Medicaid EPs who have registered for PY 2016 at the CMS EHR Registration & Attestation site.

PLEASE NOTE: There is no incentive payment for successfully completing an Alternate Medicare MU attestation. Its sole purpose is to allow EPs to avoid Medicare payment adjustments only.

If any difficulties are encountered while attempting the Alternate Medicare MU attestation, contact the CMS Help Desk/EHR Information Center for assistance: 888.734.6433 (TTY: 888.734.6563) and select option 1. Hours are Monday to Friday between 8:30 a.m. and 7:30 p.m. ET.

Direct Secure Messaging Allows Best Sending and Receiving of Encrypted Medical Information

Direct offers a simple, secure, scalable, standards-based way to send encrypted health information directly to known, trusted recipients over the internet.

It is a secure email-like service that lets participants in healthcare – physicians and other healthcare professionals, clinical labs, patients, public health departments – send and receive encrypted medical information such as

- Medical summaries
- Lab results
- Hospital discharge information
- Diagnostic test reports
- Continuity of Care Documents (CCDA)
- Transitions of Care
- Images, and more.

Direct offers secure delivery of health information for immediate use by healthcare providers, enabling physicians and hospitals to increase efficiency and lower costs, because

- Traditional forms of sending health information via fax, phone and US mail may not be secure and is time consuming
- Receiving health information via fax or US mail does not allow computer processing of the information
- Traditional email is sometimes used to exchange information between patients and providers but violates HIPAA requirements, and
- Commercial secure email systems are not universal and cannot provide the level of security available in Direct.

Direct enables physicians to reliably send orders to labs and receive results in a structured format that is incorporated immediately into the EHR with the potential to improve care (meeting MU2 requirements). Major reference labs have already implemented Direct Secure Messaging enabling this process, eliminating the need for costly interfaces between the electronic health record (EHR) and the lab.

Who benefits from using Direct Secure Messaging?

- Physicians and hospitals are enabled to deliver better care with increased efficiency and lower costs.
- Patients may access their own health information which can allow them to make better decisions and be more involved in their care.
- Non-physician providers (home health, long-term care, therapists, and others) for whom the process of treatment authorizations is streamlined.
- Members of a patient's care team, between whom communication is improved in various ways.
- Federal and State employees who directly provide care or who coordinate patient care.
- The nation benefits from lower health costs and healthier citizens.

Tennessee providers already utilizing Direct Technology can register their direct addresses using a registration form located at http://www.healthesharetn.com/add.php. The online form allows you to register one licensed provider and one non-licensed provider at a time. The directory makes your direct address available to other providers in the state using Direct Secure Messaging. If you have *multiple locations* and many users, contact the office of eHealth at office.ehealth@tn.gov. You will be provided a form to list all providers at each location. Once the form has been completed it will be imported into the Direct Provider Directory.

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State Has Sent 1099s to EPs for Incentives Paid During 2016

The State of Tennessee has issued individual 1099s to Eligible Professionals (EPs) receiving EHR Incentive Payments during 2016. The mailing occurred on after January 31, 2017. EPs do have the option to assign their EHR Incentive Payment to their Group Practice or Clinic, however, IRS guidelines requires the issuance of Form 1099 to the EP.

The 1099 is an informational return that is also provided to the IRS. To determine if payments are taxable, you must consult your tax professional. The EP is responsible for selecting the appropriate option in the CMS Registration and Attestation System, whether the EP is to receive the EHR Incentive Payment or it is to be made to a designated Payee NPI (one with which the EP has a contractual relationship). The payment can be designated to a different entity for each year of program participation, but cannot be divided during a single year of program participation.

CMS, the Bureau of TennCare, and the EHR Provider Incentive Payment Program are not responsible for decision-making or mediation regarding the assignment of EHR Incentive Payments.

In most cases the EHR Incentive Payment itself is distributed to the group practice. When this occurs, it is the responsibility of the EP to report the payment on Form 1099-MISC to the employer or entity which bills for the EP's services. Contact your employer to obtain the tax ID number to be entered on the Form 1099-MISC.

Again, EPs are strongly encouraged to contact their tax professional on the proper handling of this matter.

EPs who lose their 1099 or otherwise need a replacement should contact F&A Accounts, Supplier Maintenance at F_A.Accounts@tn.gov. (There is an underscore [_] between the F and the A.) In your message, please provide the tax year for which the 1099 is needed, Tax ID number, name, and either an email address, fax number, or current mailing address where the replacement 1099 can be sent.

Any questions about the EHR Provider Incentive Payment Program should be sent to TennCare.EHRIncentive@tn.gov. F&A Accounts, Supplier Maintenance is NOT able to assist you with EHR Program-related questions.

Direct Secure Messaging...

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Once you have implemented Direct Secure Messaging, you can participate in

- Cancer and other disease registries at TN Department of Health
- Clinical quality measure submission to CMS
- Syndromic Surveillance
- Data collection for analytics to improve care

If you do not have Direct Secure Messaging capabilities and would like to use Direct to securely deliver protected health information for immediate use by healthcare providers, increase efficiency and lower costs in your practice; contact Lovel VanArsdale at Office.eHealth@tn.com. The Tennessee Office of eHealth Initiatives is offering Direct Secure Messaging accounts at ***no charge for a limited amount of time.***

Engaging with Specialized Registries to Meet Meaningful Use Requirements

Reporting to public health registries as part of Meaningful Use is an integral part of improving population and public health. The MU final rule made public health reporting a core objective for all eligible professionals (EPs).

The EP must attest to **two** Public Health measures to satisfy this objective. An EP who reports to specialized registries should select a registry that is relevant to his or her practice and one that can monitor quality for their specific scope of practice.

The EP must be in active engagement to submit data to a specialized registry to meet the measure requirements. Active engagement means that the provider is in the process of moving towards sending "production data" to a public health agency or clinical data registry, or is sending production data to a public health agency or clinical data registry.

Registration must be completed within 60 days after the start of the EHR reporting period.

Determining Availability of a Specialized Registry

CMS does not require the EP to make an exhaustive search for potential specialized registries. The EP should take a few steps of due diligence to determine if there is a specialized registry available to them or if they meet the exclusion criteria.

- **Step 1:** An EP should check with their State (or the entity used as their reporting jurisdiction, such as a county) to determine if there is an available specialized registry maintained by a public health agency.
- **Step 2:** An EP should check with any specialty society with which they are affiliated to determine if the society maintains a specialized registry and for which they have made a public declaration of readiness to receive data for Meaningful Use no later than the first day of the provider's EHR reporting period.

If the EP determines no registries are available, they may exclude from the measure.

Please note: Cancer Registries and specialized registries on a national level are an option for reporting; however, an eligible professional is not required to report to them as a specialized registry. Also for program year 2016, all EPs may claim the **alternate exclusion** for public health reporting measures 2 and 3. For 2017, the EP must either attest or qualify for the exclusion because the alternate exclusions will not be available.

For more information, see "What Can Count as a Specialized Registry" on the CMS website.

We will also find a list of registries on the CMS PQRS website. For the most up-to-date list, scroll down the page to the paragraph labeled "2016 Qualified Clinical Data Registries" or use the following link to access the current PQRS list: PQRS Registries. These registries can be used to satisfy meaningful use as long as the EP uses CEHRT to collect the case information and the information is sent electronically during the appropriate reporting period.

The EP must be in active engagement with the specialized registry to meet the measure requirements.

TN Division of Health Care Finance & Administration | TennCare

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With EHR Incentive Program questions, email TennCare.EHRIncentive@tn.gov

With Meaningful Use (MU) questions, email EHRMeaningfuluse.TennCare@tn.gov
CMS Help Desk, 888.734.6433

TennCare Medicaid EHR Incentive Program website: www.tn.gov/tenncare/section/electronic-health-record

How-to PowerPoint Presentations are available at www.tn.gov/tenncare/topic/powerpoint-presentations

As always, anytime you have a question or need assistance, please feel free to contact us. We will get back to you as quickly as possible.

Please be sure to include the provider's name and NPI when contacting us.

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TennCare Medicaid EHR Incentive Program Update

The TennCare Medicaid Electronic Health Record (EHR) Incentive Program provides financial incentives to eligible professionals and hospitals to promote the transition to EHRs. Providers who practice using EHRs are in the forefront of improving quality, reducing costs, and addressing health disparities. Since June 2011 ***$258,003,910*** in incentive funds have been distributed ***within 8,387*** payments to Tennessee Medicaid providers.

8,387 Payments	255.8 Million $ Paid	Are you eligible?

For more information, visit the TennCare Medicaid EHR Incentive Program website.

How-to PowerPoint Presentations are also available.