

NOVEMBER
2017



Incentive News

TENNCARE EHR PROVIDER INCENTIVE PAYMENT PROGRAM

WHICH ATTESTATIONS ARE WE CURRENTLY ACCEPTING?

The TennCare EHR Incentive office is currently accepting second-year attestations only for first-year Meaningful Use. These require only 90-days of MU data for the current year.

WHEN CAN OTHERS ATTEST FOR 2017?

The software vendor for the PIPP program, as of this writing, is completing the updates to allow attesting under the recent CMS rule changes. As testing must now be conducted, the vendor estimates PIPP will be ready for all other 2017 attestors on December 1.

Are More Payments Waiting for You?

So you received EHR Incentive payments in the past, but stopped attesting?

Good News! If you are an Eligible Professional (EP) that hasn't yet received six payments, you may be eligible for more!

TennCare's Electronic Health Records (EHR) Provider Incentive Payment Program (PIPP) is not a completed program — it will continue through program year 2021! If you've received only an Incentive payment for proving Adoption, Implementation, or Upgrade (AIU) to a certified EHR technology, now's the time to attest for your first year of Meaningful Use (MU)! Or, if you've already begun attesting to MU, you may have more years of attesting ahead!

The end of the 2016 program year marked the closing of enrollment and first-time attestation. All providers who continue will now be attesting for MU. Those who have received only an Incentive payment for AIU can attest for their first year of MU in 2017 as soon as they can show MU and Clinical Quality Measure (CQM) data for a 90-day period from the year.

If you checked into MU previously and decided it was too complicated to

continue, be aware there have been changes to streamline requirements and reporting. For all EPs in 2017, CMS modified the reporting periods for MU and CQMs to continuous 90-day periods. CMS also aligned the number of CQMs available for PIPP with the CQMs that are available for the Merit-Based Incentive Payment System (MIPS). This means there are now only 53 CQM options, the same as MIPS, and EPs may report the six that are most relevant to their scope of practice.

Don't delay! If you've only attested once, you MUST successfully attest for program year 2017 — and each year thereafter — in order to be eligible for all five remaining Incentive payments available.

Contact the EHR Provider Incentive Unit with your questions about PIPP at TennCare.EHRIncentive@tn.gov. If you have questions specifically about the two MU pages of your attestation, contact Edith Murphy, Clinical Nurse Educator, at ehrmeaningfuluse.tennicare@tn.gov. Place "Attn: Edith Murphy" in the subject line.



Do We Have Your Current Address?

To ensure your
EHR Incentive can
be paid, keep your
CMS, NPPES,
CAQH and
TennCare
Provider
Registration Portal
information
current.

DID YOU KNOW?

Should you need
help when using the
TennCare Provider
Registration
system, you can
contact
Provider.Registration
@tn.gov for
assistance.

Tennessee Hospitals Required to Report Drug Overdoses

This is a reminder for Tennessee hospitals to submit the required information needed by the Tennessee Department of Health (TDH) to begin reporting drug overdoses.

Tennessee Public Chapter 959, which was passed in 2016, requires TDH to establish a method of collecting data from hospitals on substance abuse and misuse, and nonfatal and fatal opioid overdoses.

All hospitals must successfully report their data by March 2018.

There are two important steps for hospitals to take now in preparation for meeting the reporting deadlines:

- Identify your hospital's key contacts for drug overdose reporting and submit their contact information to TDH.
- Register for the TDH Trading Partner Registration (TPR) system or update existing trading partner agreements. The information required for registering is included in the [worksheet](#).



Hospitals should begin now to put processes in place for reporting. The hospitals in the pilot reporting group last spring experienced 8-12 weeks of preparatory work to successfully extract and submit the correct data fields.

To help with reporting, the Tennessee Department of Health launched [a dedicated website](#) that provides instructions for the data reporting process, as well as a variety of related materials and information.

For additional information, contact TDH.Informatics@tn.gov.

When Your Attestation Comes Back Because of a Medicaid ID

A number of EHR Incentive attestations are held up or returned each year because of an incorrect or missing Medicaid ID (MID). Typically, providers are assigned an MID after registering via the TennCare Provider Registration portal. However providers can run into MID issues anytime they update or enter new information in CAQH.

TennCare Provider Registration offers this list of frequent CAQH errors that prevent an MID from being properly assigned.

1. Missing license issue date.

The original date of license must be entered on the CAQH website.

2. Missing Credentialing address (this includes phone number).

3. Missing uploaded documentation. CAQH will not release file information to TennCare if the provider has not completed the necessary uploads for their provider type. For instance, providers most often enter their Disclosure of Ownership on CAQH's portal but fail to also upload a signed and dated DOO document. Other documentation that is often missing includes professional liability insurance and licensing documentation.

4. Incorrect NPI or name listed.

5. Currently practicing flag.

This is found when an individual provider lists a practice location, leaves, and then returns to that location again. They have at one time answered the question "Are you currently practicing at this location?" as NO, and TennCare becomes unable to receive that practice location to load into the Provider Registration portal.

6. Incorrectly listing the Tax ID business type.

If you incorrectly list your business type as a group or sole proprietor, this can often impede CAQH progress. If the same Tax ID was already registered on the portal differently or you did not enter the business type that you report to the IRS.

Example: John Doe, individual provider with a type 1 NPI, registers on the CAQH portal. Under the practice location, he listed the Tax ID 12-3456789 which is an individual Tax ID for ABC Medical suggesting that he is a sole Proprietor. ABC Medical is already registered with this same Tax ID (as they should be) creating an error within PDMS. The provider must go back into CAQH to fix and then re-attest

7. The attester does not have a type 2 NPI.

Example: John Doe, sole proprietor using a type 1 NPI, has never enumerated a type 2 NPI because he is NOT a group. He registered on the CAQH website listing the Tax ID as a Group instead of Individual. We often have to walk sole proprietors through this investigation to discover if they are a true sole proprietor

8. The affiliated practice location did not add the provider to their group.

As the individual must complete all documentation in CAQH listing the affiliated practice location, we often see that the affiliated practice location did not add the provider to their group. This link must be present between the individual and the group in which he or she is attesting to be a part. The group must also confirm the individual is a part of the group as well.

Should you need assistance entering information into CAQH, you may contact accounthelp@proview.caqh.org or 888-600-9802 (Help desk hours Monday-Friday 8:00 a.m. – 6:00 p.m., Eastern Time).



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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

View TennCare Medicaid EHR Incentive
Program online assistance at

- [Program website](#)
- How-to [PowerPoint Presentations](#)
- [FAQs](#)
- [Acronyms & Glossary](#)

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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Keep Your Practice Site Address Updated

Eligibility reviewers of your TennCare EHR Incentive attestation are verifying your practice site address.

In doing so they will compare the address on your attestation with the address entered at NPPES, in CAQH, and at the TennCare Provider Registration Portal. The addresses must match or the attestation will be returned for correction.

To avoid a return for a mismatch of addresses it is imperative you maintain a correct address in these systems.

The practice site address on your attestation is populated by the information that was

entered at the CMS EHR Registration website when you registered or made a change there. Therefore you are unable to change the address on the attestation itself, but you must return to CMS EHR Registration to make the change. To do so, please go to the [CMS Registration & Attestation System website](#) to make the change.

In addition, individual providers are required to keep their CAQH Proview profile current by reviewing and updating their information every 120 days. This step can only be completed after your Medicaid ID has been assigned.

To update your group address(es) in the [TennCare Provider Registration Portal](#), once you log in go to the "Practice Locations" tab. There you will be able to update your primary practice location, billing / payment contact information, correspondence information and address, as well as additional practice locations.

Any questions you have about updating CAQH and the TennCare Provider Registration Portal, including entering and submitting banking information, may be addressed to Provider.Registration@tn.gov.