DECEMBER 2018

Incentive News

TENNCARE EHR PROVIDER INCENTIVE PAYMENT PROGRAM

Reminders:
Information which will assist you —and the latest updates — is available on the TennCare EHR Incentive website.

Accepting first time MU attestations now. All other returning providers can submit beginning January 1. All Program Year 2018 attestations must be submitted by 11:59 P.M. Central Time on March 31, 2019.

EHR Incentive Payments to Date:

EPs: 10,517

EHs: 295

Total: 10,812

EHR Incentives Paid to Date:

EPs: $155,141,529

EHs: $128,223,438

Total: $283,364,967

Tips to Reduce Meaningful Use Attestation Returns

General Tips for Reporting Meaningful Use:

- No aspect of the attestation process requests the submission of protected health information, and any such disclosures are governed by HIPPA. Do not upload documents containing personal health information (PHI).
- When selecting options for measures offering more than one reporting option, be sure to read the option and select the most appropriate selection for your scope of practice.
- When selecting exclusions, be sure to read the exclusion to ensure you meet the exact exclusion criteria. There are no exclusions for not meeting thresholds or other measure requirements.
- Eligible Professionals (EPs) who practice in multiple locations must ensure 50% of their patient **encounters** (not unique patients) during the reporting period occurred at locations with certified EHR.

Common Meaningful Use Attestation Return Reasons and How to Resolve the Issue

Meaningful Use Attestations are returned:

- If the denominator value of at least one or more measures with a **denominator of unique patients seen by the EP during the reporting period** is a different number than the other denominators with the same definition. In order to resolve this issue, report the same numerical value for all measures with the unique patient denominator. The numerators can vary, but the denominators should not vary. This includes the denominator of the general question asking the number of unique patients seen by the EP during the reporting period.
- When the unique patient denominator exceeds or equals the number of encounters (for multiple locations) or office visits. Generally, the number of encounters or office visits should exceed the number of unique patients seen during the reporting period. If your scope of practice differs from this assumption, you will need to upload an explanation.

Continued on next page

Do You Have General Questions about the EHR Incentive Program or your attestation?

Email TennCare.EHRIncenitve@tn.gov

***Always* include the Provider's Name and NPI when communicating with TennCare.**

Do You Have Specific Questions about the MU Pages of Your Attestation?

Email EHRMeaningfuluse.TennCare@tn.gov

***Always* include the Provider's Name and NPI when communicating with TennCare.**

Tips to Reduce Meaningful Use Attestation Returns…

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- If exclusions are claimed unexpectedly. An example of this would be an EP reporting from a pediatric practice that claims no immunizations are given to patients. To resolve this return reason issue, upload an explanation of exactly how the specific exclusion criteria for the measure apply to your scope of practice.
- If there are unexpected denominators of zero reported for Clinical Quality Measures. To resolve this issue, upload a report from your EHR showing the correct reporting period, numerator and denominator as they are reported.
- When inconsistent documentation is uploaded with the attestation. TennCare reviews all documents uploaded in PIPP and compares the values to the attested values for each measure. When submitting your attestation, make sure all uploaded documents contain the correct EP, correct reporting period as well as numerator and denominator values.

If you have questions on Meaningful Use criteria and attesting to Meaningful Use, please email EHRMeaningfulUse.TennCare@tn.gov.

Avoid Possible Audit Headaches – File Past Documentation Now

As you begin to work on your 2018 EHR Incentive attestation, you may be tempted to discard the documentation that you used for your 2017 and/or earlier attestations.

Don't do it!

File your previous documentation immediately with your long-term records. In light of the possibility of a post-payment audit, providers are required to retain documentation in support of all attestations for no fewer than six years after each payment year.

Because a provider can be asked to show documentation to support any of the information for his/her attestations, from any year for which an EHR incentive was received, you don't want to be caught lacking!

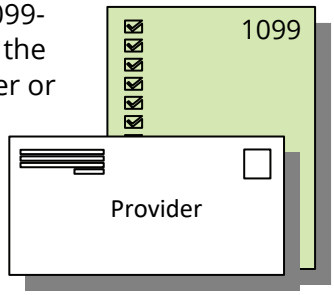
State to Issue 1099s for EPs Who Received EHR Incentive Payments during 2018

The State of Tennessee will issue individual 1099s to Eligible Professionals (EPs) who have received EHR Incentive Payments during 2018. The mailing will occur by January 31, 2019. 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.

Setting Up Your EHR System to Interface Bi-directionally with TennIIS

The Tennessee Immunization Information System (TennIIS) allows Electronic Health Record (EHR) systems to interface bi-directionally in support of the Centers for Medicare and Medicaid Services (CMS) Promoting Interoperability Programs.

First it is important for you and your EHR vendor to review the TennIIS onboarding instructions if your organization has not yet registered its intent to exchange immunization data.

If your organization has already registered in the Trading Partner Registration (TPR) system and your EHR vendor is prepared to support the CMS 2015 Certified EHR Technology bidirectional requirements, send an email request for bidirectional testing to TennIIS.MU@tn.gov. The TennIIS team will list the date that the connection between your organization's EHR system and the TennIIS Staging environment is set-up as the bi-directional MU Stage III/MIPS start date.

TN Division of TennCare

We Can't Say This Enough: Your *EXACT* Address Is Required for Your 2018 Attestation

When attesting for Program Year 2018 (January 1 – March 31, 2019) the "**Primary Business Address**" listed on your CMS Registration and Attestation profile and PIPP Attestation must match ***EXACTLY*** one of the practice locations listed in your TennCare Provider Registration Portal profile (for the time period covered by your attestation). ***If it does not, your attestation will be returned for correction.***

When you registered or updated your profile as a TennCare-participating provider through CAQH, you gave us your primary practice location. And if you were/are a member of a group with multiple locations, or practice in multiple locations, you gave us those additional locations as well.

When you went to the CMS Medicare & Medicaid EHR Incentive Program Registration and Attestation System (RNA) website to enroll and participate in the EHR Incentive Program, you completed a page titled "Business Address & Phone Number". CMS clarified that you should enter your primary practice location for "business address". If anything changes affecting your EHR Incentive registration, you must make corrections at the CMS RNA website. If such changes impact what you have entered in the NPPES website, you ***must*** go to NPPES to make the corrections. Data from the CMS RNA website **DOES NOT** transfer to NPPES. You are required to update NPPES directly.

Check your profiles *before* you attest. If the addresses do not match…

1. Correct TennCare's Provider Registration Portal:

If you are listed as an individual or sole proprietor, you will need to log into the CAQH application (https://proview.caqh.org/Login) to make the update to your primary practice location address.

If you are registered as a member of a group, your group will need to log into the TennCare Provider Registration Portal: https://pdms.tenncare.tn.gov/Account/Login.aspx

- Select **"update registration".** Then select each link on the left side of the screen from the Identification section through the Agreements section. Review information in each section and select "save", then "next". In the Practice Locations section, select the edit icon on the far right after the Primary Practice Address. In the next box, edit the address to match as needed. After all sections are reviewed, select "Submit to TennCare" to submit the change. For assistance, please contact Provider.Registration@tn.gov.
- If you have additional practice locations listed and need to make changes to any of those addresses, scroll down the page to those listings and follow the same steps as above.
- If you have additional or new practice locations that have yet to be added to your TennCare registration, follow the same steps as above to add these addresses to the profile.

2. Correct your CMS EHR Registration Profile:

Return to this CMS website: https://ehrincentives.cms.gov/hitech/login.action

- Enter the CMS Registration Number you were originally given upon enrollment
- Click on "**Modify**"
- On ***EACH*** page, click "Save & Continue"
- On the "**Business Address & Phone Number**" page, make the needed change(s), then click "Save & Continue"
- On the last page, click "Submit"
- For this process to be successful, it is ***important*** that you:
  - On **each and every page**, all the way through, click "**Save & Continue**" whether or not you made changes to that page.
  - At the end, after making any and all changes, click "**Submit**." If you do not click "Submit", your changes will not be sent to TennCare.

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With EHR Incentive Program questions and questions regarding eligibility, contact TennCare.EHRIncentive@tn.gov

For help with MU pages, please contact Edith Murphy, Clinical Nurse Educator, at EHRMeaningfulUse.TennCare@tn.gov. Place "Attn: Edith Murphy" in the subject line.

For CMS issues, contact the CMS Help Desk at NLRProdSupport@cms.hhs.gov or (833) 238-0203 (toll free). Hours of operation are Monday to Friday, 8:00 a.m. to 5:00 p.m. Eastern Time. Voicemail is available of outside regular operating hours.

View TennCare Medicaid EHR Incentive Program online assistance at

- Program website
- How-to PowerPoint Presentations
- FAQs
- Acronyms & Glossary
- Previous issues of EHR Incentive News

As always, anytime you have a question or need assistance, please 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.

TennCare E-Newsletters: If you choose to unsubscribe from this list at any time, you may do so by sending a message to: listserv@listserv.tn.gov, (no subject) and unsubscribe MedicaidHIT. You will receive an email confirming your removal.

A Call for Timely Reporting: Neurologic Birth Defects Surveillance

The Tennessee Department of Health's (TDH) Tennessee Birth Defects Surveillance System (TNBDSS) is requesting your help to improve reporting of all microcephaly and neurologic birth defects. Reporting is required of all physicians, hospitals, laboratories, healthcare providers, and other persons knowing of or suspecting a reportable disease case to TDH. Improved and timely reporting could improve monitoring, ensure timely referral to services, and enhance the overall coordination of care for affected children in Tennessee.

The TNBDSS Reporting Portal provides a complete list of reportable birth defects and is also a simple, easy to use online reporting tool for required reporters. Due to the risk of microcephaly and other neurologic birth defects associated with Zika virus, there is an important need for timely identification and comprehensive follow-up. Submitted data will be used to monitor any changes in the incidence of these birth defects, ensure timely referral to services, and enhance care coordination for affected children in Tennessee.

If you want more information concerning who should report or questions about Tennessee Birth Defects Surveillance, contact the Division of Family Health and Wellness at Birth.Defects@tn.gov or call (615) 532-8462 & (855) 202-1357 (toll-free).