

APRIL 2020



Incentive News

TENNCARE EHR PROVIDER INCENTIVE PAYMENT PROGRAM
A CMS "Promoting Interoperability" Program

Reminders:

Information which will assist you —and the latest updates — is available on the [TennCare EHR Incentive website](#).

Reliable COVID-19 Updates

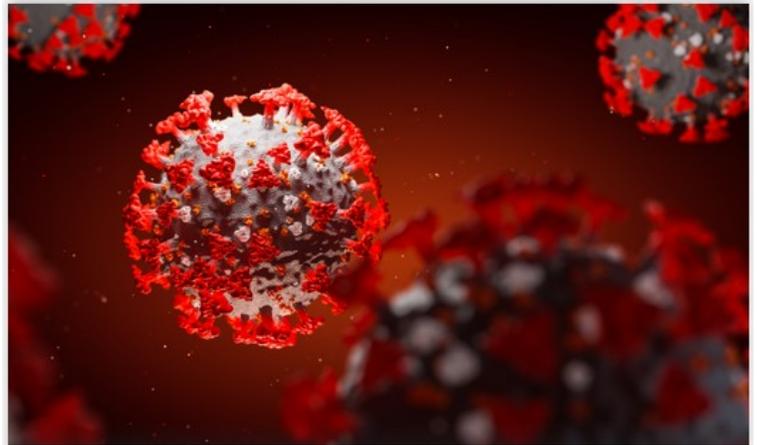
We encourage all Tennesseans to stay vigilant in reading and sharing information from reliable sources. Up-to-date information on COVID-19 in Tennessee can be found [here](#). Daily briefings from Governor Bill Lee's office may be found [here](#).

Don't forget, the deadline for submitting 2019 attestations is now June 30, 2020.

COVID-19 Outbreak, Tornado Damage Prompt PY 2019 Attestation Extension

The submission period for PY 2019 attestations has been extended.

CMS has granted our request to extend the Program Year (PY) 2019 attestation submission period to June 30, 2020 (11:59 p.m. Central Time).



With the current coronavirus pandemic and the emergency guidelines announced by President Trump and Governor Lee, we realize that providers are being pressed on all sides to treat patients and respond to all of the other items asked of a provider. Some offices already had their hands full serving communities devastated by the tornadoes that tore through Tennessee earlier this month. A few offices suffered damages that still hinder their service.

The EHR Incentive Program team wants to help in any way we can. With the CMS approval of our request, we hope to alleviate any stress caused by our previous submission deadline.

Nothing else about the program changes. All attestation and

Meaningful Use requirements remain in place. You now have until June 30 to submit your PY 2019 attestation. Following submission, if your attestation is returned due to errors, we ask that you resubmit your corrected attestation as soon as possible.

We also want to take the opportunity to thank you for serving not only our Medicaid enrollees, but the community at large. This is truly an extraordinary time in the history of healthcare in our country. Please continue to heed all announcements from the CDC, CMS, Tennessee Department of Health, and Division of TennCare. Keep in mind that CMS announcements concerning Medicare do not automatically extend to the Medicaid program.



Do You Have Questions About

The EHR Incentive Program?

Meaningful Use Measures?

Electronic Clinical Quality Measures?

Your attestation?

Email TennCare.EHRIncentive@tn.gov

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

What You Need to Know to Take Advantage of the 2019 Extension

Now that TennCare's Electronic Health Records Incentive attestation software, the Provider Incentive Payment Program (PIPP), will be open through June 30, 2020, here's a collection of information you will need to attest for Program Year (PY) 2019.

All eligible professionals (EPs) attesting in PY 2019 will be required to attest to Stage 3 Meaningful Use (MU) and demonstrate use of a 2015 edition of certified EHR technology (CEHRT). EPs may use any continuous 90-day period from calendar year 2019 for which MU can be successfully demonstrated.

Program Year 2019 eCQMs

EPs will be required to report on six of 50 electronic Clinical Quality Measures (eCQMs). New in Program Year 2019, CMS is encouraging EPs to report at least one outcome measure and one high priority measure. If any outcome or high priority eCQMs are relevant to the EP's scope of practice, those should be reported first. If there are no outcome and/or high priority eCQMs that are relevant to the EP's scope of practice, the EP may choose to report on any other six eCQMs.

EPs who have successfully attested to MU in a previous program year will be required to use a full calendar year reporting period for eCQMs. Those who are attesting to MU for the first time, may use a 90-day eCQM reporting period.

As you work through your 2019

attestation(s), you can find help via our online User Manual. Just look on the left side of each attestation page for the "Help / User Manual" link. Should you get stuck or find something you don't understand in the User Manual, send your questions to TennCare.EHRIncentive@tn.gov.

If your attestation is returned for correction, please resubmit the corrected attestation as soon as possible. If you do not understand why your attestation was returned, please contact us immediately. Failure to correct and resubmit your attestation timely will result in a denial.

Other Reminders and Important Links for PY 2019

EPs will attest to eight MU objectives and six of 50 CQMs.

[Program Year 2019 Stage 3 MU Specification Sheets](#)

[Program Year 2019 CQMs](#)

All EPs must attest using a 2015 Edition of CEHRT. Whereas you can update your EHR Certification ID in PIPP, you may first want to update your ID on [CMS' Promoting Interoperability Programs Registration System](#).

[2019 Program Requirements Website](#)

[Broadband Access Exclusions Tip Sheet](#)

[Security Risk Analysis Tip Sheet](#)

Auditors Provide Additional Information on Objective 5.1 API Access, CEHRT Issues

TennCare Audit, which is responsible for post-payment audits of EHR Incentive attestations, has issued information that is additional to the Meaningful Use (MU) Objective 5, Measure 1 information found in the past two issues of EHR Incentive News. As it may impact your Program Year (PY) 2019 attestation and documentation, we are including their guidance here.

For PY 2019, CMS is providing flexibility for the application-programming interface (API) requirement of Objective 5, Measure 1 (Patient Electronic Access) because the word “timely” used in the definition is unclear. This includes flexibility for possible certified EHR technology (CEHRT) issues.

Program Year 2019 Flexibility (Applies to all EPs) PY 2019 Objective 5, Measure 1 API flexibility:

- The requirement to make patient health information (PHI) available *via API access* within 48 hours is waived.
- EPs now must have enabled API **by December 31, 2019** for PY 2019.

Now Is Your Chance!

With the granting of the submission period extension for Program Year 2019 attestations, you now have a fresh opportunity to attest for the year.

If you haven't already begun, you'll find getting underway to be easier with our [Pre-attestation Checklist](#). Just click the link in the previous sentence to download.

Don't forget, the deadline for submitting your 2019 attestation is now June 30, 2020.



EPs still must make PHI available to patients to view, download, and transmit (VDT) within 48 hours.

With this flexibility, EPs will now be required to have completed the following **by December 31, 2019**:

- Enable an API that provides patients with API access to their health information.
- Provide patients seen during the EP's MU reporting period with instructions on how to authenticate their access through the API, as well as information on available applications that leverage the API.
- Maintain availability of the API. The API cannot be turned on for one day and then disabled.

Please note that CMS has clarified the wording for PY 2020 attestations and the flexibility for this measure only applies to PY 2019.

Even if an EP has already attested for PY 2019, **it is strongly recommended that every EP reviews his or her CEHRT dashboard NOW** to determine if or how this issue impacts you. While the documentation supporting this measure does not need to be uploaded with your attestation, it should be maintained in the event you are randomly selected for a post-payment audit.

There are four possible scenarios for EPs reporting on the Stage 3 Objective 5, Measure 1 in PY 2019. Please see attached to the newsletter email the document titled "Patient Electronic Access - API Documentation Requirements" for further explanation of the four possible scenarios. Also attached is a frequently asked questions (FAQ) document for your reference.

If you have any questions, please contact internalaudit.tenncare@tn.gov.

Coming Soon: A CMS Requirement that Mandates the Updating of NPPES

The Administrative Simplification provisions of the Health Insurance Portability and Accountability Act of 1996 (HIPAA) mandated the adoption of standard unique identifiers for health care providers and health plans.

The purpose of these provisions is to improve the efficiency and effectiveness of the electronic transmission of health information. The Centers for Medicare & Medicaid Services (CMS) has developed the National Plan and Provider Enumeration System (NPPES) to assign these unique identifiers. Known as National Provider Identifiers (NPIs), these unique numbers are the basis of provider profiles that make up the NPPES NPI Registry.

During the course of the TennCare EHR Provider Incentive Payment Program, we have, on occasion, found the need to go to NPPES to verify provider information. In some instances, we have found that the information in the registry had not been updated, often, for a very long time. Where this information has been found to be outdated, we have advised providers to update NPPES with current information.

NPPES is a CMS program which means it is under their control. CMS has recently finalized a rule involving NPPES in which CMS included this information about



updating NPPES (emphasis added):

“Health care providers **are required** to communicate to the NPPES **any information that has changed within 30 days of the change** (45 CFR 162.410(a)(4)). We review NPPES to ensure a provider has a valid NPI as part of the Medicare enrollment process, as well as the revalidation process, which occurs every 3 to 5 years depending on the provider or supplier type.”

In the finalized rule, CMS states that failure to place digital contact information on your NPPES profile will be shared with the public. Here is what CMS said:

“Additionally, as detailed in section IX. of this final rule, we are finalizing our proposal to publicly report the names and NPIs of those providers who do not have digital contact information included in the National Plan and Provider Enumeration System (NPPES) system beginning in the second half of 2020 as proposed. Additionally, we will continue to ensure providers are aware of the benefits of including digital contact information in NPPES, and when and where their names and NPIs will be posted if they do not include this information. We do strongly encourage providers to

include FHIR endpoint information in NPPES if and when they have the information, as well.

“**Final Action:** After consideration of the comments received, and for the reasons outlined in our response to these comments and in the CMS Interoperability and Patient Access proposed rule, we are finalizing to publicly report the names and NPIs of those providers who do not have digital contact information included in the NPPES system beginning in the second half of 2020 as proposed. Additionally, we will engage in continued public education efforts to ensure providers are aware of the benefits of including digital contact information in NPPES, including FHIR API endpoints, and when and where this information will be posted.”

CMS did not state how and when (other than the second half of 2020) this public posting of information will occur. You will be receiving **more information from CMS** about this public posting and updating NPPES. You can go to NPPES and verify and update your information now.

We just wanted to give you a heads-up as to what is coming.

Did You Receive a 1099 this Year for an EHR Incentive Payment Distributed During 2019?

As we move into April, known as “tax month” for individual returns, please take a moment to review any tax documents you may have received so far this year. If you find a Form 1099 in your own name for an EHR Incentive payment distributed during 2019, please read the following very carefully.

The State of Tennessee is issuing individual 1099s to individual Eligible Professionals (EPs) who have received EHR Incentive Payments during 2019. The mailing was set to occur by the end of January. EPs have the option to assign their EHR Incentive Payment to their group practice or clinic, however, IRS guidelines require the issuance of Form 1099 to the EP.

The 1099 is an informational document 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 in the CMS Registration and Attestation website the option to receive the EHR Incentive Payment or to pay it to a designated Payee NPI (one with which the EP has a contractual relationship).

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

When the Incentive is distributed to the group practice, 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 encouraged to contact a tax professional on the proper handling of this matter.

EPs who lose a 1099 or 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.) Provide the tax year for which the 1099 is needed, tax ID number, name, and an email address, fax number, or current mailing address where the replacement 1099 can be sent.

NOTE: Due to the current COVID-19 pandemic, dates impacting tax-related deadlines may change. Our purpose is not to offer tax advice, but to inform individual providers why they are receiving a 1099. As always, consult your tax professional for any changes made to tax laws and deadlines.

CMS Offers Extended Grace Period for Password Reset

In recent issues, we've reported that CMS is implementing Multi-Factor Authentication (MFA) in I&A to better protect information. CMS advises **EVERY** user of the Promoting Interoperability (PI) programs Registration System (CMS R&A) to update their password there.

Although MFA implementation is still scheduled to proceed on

March 28, 2020, users will now have an optional grace period of up to one year (365 days) to set up MFA credentials in the I&A system at a later date. After September 30, 2021 users will no longer be offered any grace period and will be required to set up their MFA in I&A before they can login to the Registration System.

After entering the current password to sign into the RNA, this error message will appear: *“The account's password has expired.*

Please [go to I&A](#) to change the password now”.

Selecting the link will open up the Identity & Access Management System interface. Follow the instruction on the screen to create a new password.

Only one password change is permitted in a 24-hour period.

If assistance is required, contact the NLR Production Support Desk at (833) 238-0203.



Division of
TennCare

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Medicaid EPs and EHRs should submit questions about the Medicaid Promoting Interoperability (PI) Program (in Tennessee also known as the TennCare EHR Provider Incentive Payment Program) to TennCare.EHRIncentive@tn.gov; including questions about

- Eligibility (first 4 attestation pages)
- Meaningful Use
- Clinical Quality Measures
- Program Participation

ALWAYS include the provider's name and NPI when contacting us. We will respond to your inquiry as quickly as possible.

Should you have issues with a CMS website, contact the QualityNet help desk for assistance at qnetsupport@hcgis.org or 1-866-288-8912.

View TennCare Medicaid EHR Incentive Program online assistance at

- [Program website](#)
- How-to [PowerPoint Presentations](#)
- [FAQs](#)
- [Acronyms & Glossary](#)
- [Previous issues](#) of EHR Incentive News

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.

Has Your Practice Moved Recently?

If your practice has moved recently, don't forget to update your practice location(s) in the following systems:

1. CMS EHR Registration and Attestation website
2. CAQH ProView
3. TennCare Provider Registration Portal
4. NPPES NPI Registry

We stress having the correct, up-to-date, and **EXACT** address for all locations because we now check the practice addresses listed on your attestation against the addresses in these system profiles. If there is not an **EXACT** match, we return your attestation.

Not sure of your correct address(es)? Check with your local post office or mail carrier, as they can provide your correct address. If your address is a post office box, ask for the physical address.

Unsure what practice locations are on file for you now in CAQH and the TennCare Provider Registration System? You may contact provider.registration@tn.gov for that information.

Don't know how to update your profiles? Obtain our free PDF resource, [How to Update Your Practice Address](#). This simple, easy-to-follow guide will instruct you on making changes in each system.