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Subject: VT Medicaid EHRIP Updates: The Future of MU; Streamlined Hardship Exception Process; EHS may now attest in MAPIR; PY2016 Resources; 2/29/16 Deadline for Alternate Method for Attestation

To All Vermont Medicaid EHR Incentive Program participants:

MORE ON THE FUTURE OF MU

Since CMS Acting Administrator Andy Slavitt announced 'the end of Meaningful Use as we know it' during [his address](#) to the JP Morgan Healthcare Conference last month, providers and the wider stakeholder community have been following the clues on how the EHRIP will evolve. A few days later, Slavitt, along with Karen DeSalvo (National Coordinator for Health Information Technology and Acting Assistant Secretary for Health and Human Services) followed up by offering their perspective on 'where we go next.' There was important clarification that current law requires federal agencies "to continue to measure the meaningful use of ONC Certified Health Information Technology under the existing set of standards" so the transition "won't happen overnight, enabling more communication, time to plan and opportunity for sharing information with the federal government." Read their entire article [here](#).

Meanwhile, CMS has reiterated that EHRIP incentives will continue through 2021, and is very busy issuing the latest guidance and resources at its website for both [Program Year 2015](#) and [Program Year 2016](#) EHR Incentive Program requirements. If you have any questions about how this information affects your ability to attest with the Vermont Medicaid EHRIP, please do not hesitate to ask the VT Medicaid EHRIP Team!

Recent developments:

KEY CHANGES TO EHR INCENTIVE HARDSHIP EXCEPTIONS: EP DEADLINE 3/15/16; EH DEADLINE 4/1/16

CMS launched important changes to the Medicare EHR Incentive Program hardship exception process that will reduce burden on clinicians, hospitals, and critical access hospitals (CAHs). These changes are a result of recent legislation and ongoing efforts to improve the program. CMS has posted new, streamlined hardship applications, reducing the amount of information that EPs and EHs must submit to apply for an exception. The new applications and instructions for a hardship exception from 2017 Medicare Payment Adjustment are available [here](#). If a provider is unable to meet MU for reasons relating to the timing of the publication of the final rule for Modified-MU2, CMS posted two FAQs indicating that no documentation will need to be submitted with hardship exception applications for that category, since CMS published the Stage 2 modification rule so late: [FAQ 14113](#) and [FAQ 12845](#).

CMS confirmed that this streamlined hardship exception process is also available to providers participating in the MEDICAID EHR Incentive Program. Although the guidance at their website reads like it is specific to participants in the [Medicare](#) EHRIP, CMS has verified that all EHRIP participants (including those in the Medicaid EHRIP) who are subject to Medicare Payment adjustments can utilize the streamlined application process.

The deadline for EPs to submit the streamlined hardship exception application is 3/15/16; EHs must submit by 4/1/16.

DUALLY-ELIGIBLE HOSPITALS ARE NOW ABLE TO PROCEED WITH A PROGRAM YEAR 2015 ATTESTATION IN MAPIR

If you are attesting on behalf of a **dually-eligible hospital** and have submitted a PY2015 [Medicare](#) EHRIP application AND received confirmation of acceptance of MU criteria, you may now proceed with a PY2015 [Medicaid](#) EHRIP application in MAPIR. [Contact the VT EHRIP Team](#) with any questions or issues. EPs attesting to Meaningful Use for PY2015 or PY2016 must wait until further updates to the MAPIR attestation system accomplished in Mid-May (see "Important Dates" below.) More on when EPs and EHs can attest, and deadlines for each provider type are available [here](#).

PROGRAM YEAR 2016: WHAT YOU NEED TO KNOW

[Program Year 2016](#) is underway, and providers who have met Meaningful Use in at least one previous program year will be utilizing the entire calendar year 2016 as their EHR reporting period. Providers meeting MU for the first time in 2016 may use a 90-day EHR reporting period. And, 2016 is also the LAST YEAR providers can BEGIN receiving Medicaid EHRIP: new program participants must register and meet eligibility and Adopt/Implement/Upgrade requirements by 12/31/16. CMS has new resources and tipsheets on the following areas:

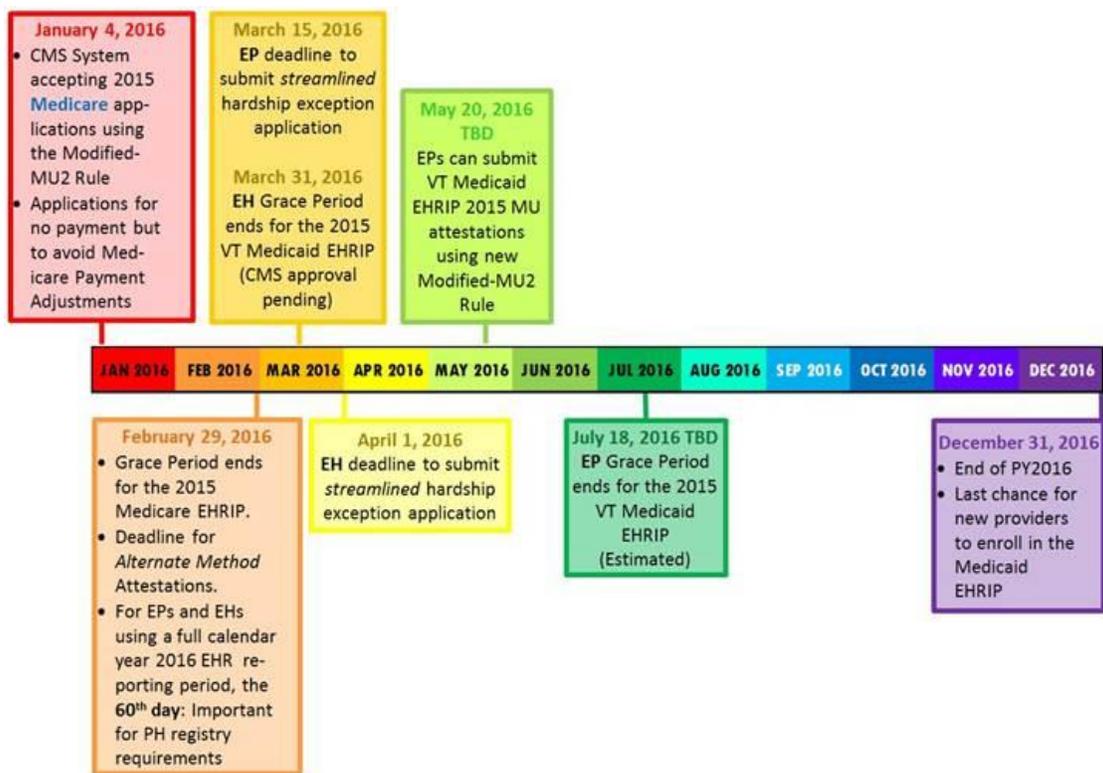
- 2016 Checklists for first-time participants
- [2016 Objectives and Measures](#)
- [Changes to Alternate Exclusions for 2016](#)
- Changes to Specific Objectives for 2016 for [EPs](#) and [EHs](#)
- [EHR Reporting Periods in 2016](#)
- Tipsheets: What You Need to Know for Program Year 2016 for [EPs](#) and [EHs](#)

2/29/16 DEADLINE FOR THE ALTERNATE METHOD FOR ATTESTATION

One of the provisions included in the recent 2015-2017 Modified MU2 Rule allows for an Alternate Method for attestation for participants in the Medicaid EHRIP who cannot meet the Medicaid patient volume threshold. The Alternate Method attestation system will not issue an incentive payment, but it will allow providers to attest to their Meaningful Use criteria in order to avoid a Medicare Payment Adjustment. CMS is accepting Program Year 2015 Alternate Method attestations now through **February 29, 2016** at the Medicare Registration and Attestation site. More information is available [at our website](#).

VT MEDICAID EHRIP IMPORTANT DATES FOR EPs AND EHs

Click the image below to open a document with details about each date and deadline event.



Don't hesitate to contact the [Vermont Medicaid EHRIP Team](#) with any questions, and be sure to check out the [Vermont Medicaid EHRIP website](#) for important information and the latest updates about the program.

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