



From: Siciliano, Lorraine

Sent: Friday, December 08, 2017 2:09 PM

To: Siciliano, Lorraine <Lorraine.Siciliano@vermont.gov>

Subject: VT Medicaid EHRIP Update 12/08/17 - Preparing to attest for PY2017; Consult with the EHRIP Team; Actions allowed outside the 90-day reporting Period; MIPS

To All Vermont Medicaid EHR Incentive Program participants:

PREPARING TO ATTEST FOR PY2017

The EHRIP Team is working on the MAPIR system upgrade that will be available in early January 2018 for providers to start submitting their [Program Year 2017 EHR Incentive Program applications](#). We are prepared to accept all attestations for Modified-MU2. **The deadline for all 2017 Modified-MU2 EHRIP applications will be March 31, 2018.** Attesting to Stage 3 criteria is an *option* for the first time in 2017 for those providers who have upgraded their CEHRT to 2015 standards, or a combination of 2014/2015 editions that supports Stage 3. However, MAPIR will not correctly process all MU Stage 3 criteria until an additional update is applied later in the spring of 2018. If you are planning to utilize Stage 3 Meaningful Use criteria for 2017 applications, please contact the EHRIP Team for guidance on when to proceed: ahs.dvhaEHRIP@vermont.gov

QUESTIONS ABOUT PY2017 REQUIREMENTS? ASK THE EHRIP TEAM!

If you have any questions related to provider applications for Program Year 2017, schedule a session with the EHRIP Team. We have a short refresher on the changes related to Program Year 2017 requirements, plus you can ask us about issues specific to your practice: provider eligibility, patient volume strategies, etc. We have a 30-minute presentation we would be happy to schedule with you: contact us at ahs.dvhaEHRIP@vermont.gov. The outline of the review is as follows:

- Changes Resulting from the August 2017 IPPS Rule from CMS
 - EHR Reporting Period for MU Objectives and CQMs are 90 Days for All Providers
 - Changes to Clinical Quality Measures for EPs
 - CEHRT Flexibility and Extension of MU Stage 2 for PY2018
- Changes to Meaningful Use Objectives in 2017 as Compared to 2016
 - Objective 1, Protect ePHI: SRA conducted or reviewed by 12/31/17
 - Objective 8, Measure 2, Patient Electronic Access: Threshold Change
 - Objective 9, Secure Messaging: Threshold Change
 - Objective 10, Option 1, IZ Reporting: Ongoing Documentation Requirements
 - Objective 10, Option 3A, Specialized Registry Reporting: No More Alternate Exclusion
 - ONC EHR System Surveillance and Review Activities: "Objective 0"
- CMS Specification Sheets for PY2017 Objectives
- Other CMS Guidance and Resources for PY2017
- VT Medicaid EHRIP Audit Tip Sheet - Updated
- Are your providers required to participate in the Medicare Quality Payment Programs (MACRA/MIPS)?
- Questions and Contact Information

OBJECTIVES THAT ALLOW ACTION TO OCCUR OUTSIDE OF THE 90-DAY EHR REPORTING PERIOD

For those providers challenged to meet revised, higher thresholds for certain Meaningful Use measures in Program Year 2017, remember that the data on certain actions can be included even if the action occurred before, during or after the 90-day EHR Reporting Period (but within the calendar year). Each objective's specification sheet lists the information under the '*Additional Information*' section of any objective that allows this. The following objectives for Modified Stage 2 in Program Years 2017 and 2018 include this option:

- Objective 1 - Protect Patient Health Information
- Objective 5 - Health Information Exchange
- Objective 6 - Patient-Specific Education
- Objective 8 – Patient Electronic Access; Measure 2 – Patient View/Download/Transmit
- Objective 9 - Secure Electronic Messaging

In order to provide the necessary documentation to support inclusion of the data, the EHRIP Team requests a data file that verifies that the action that occurring outside the EHR Reporting period during the calendar year is valid for a patient seen during the 90-day EHR reporting period. For guidance on documenting and reporting data, please contact the Vermont Medicaid EHRIP Team: ahs.dvhaEHRIP@vermont.gov. A complete listing of Meaningful Use measures for Modified-MU2 and MU3 in 2017 and 2018 is available here:

<http://healthdata.vermont.gov/sites/healthdata/files/pdfs/EHRIP/ActionsAllowableOutside90DayReportingPeriod.pdf>

MERIT-BASED INCENTIVE PAYMENT SYSTEM (MIPS)

The U.S. Department of Health and Human Services has implemented the Merit-Based Incentive Payment System (MIPS) and the Advanced Alternative Payment Model (APM) incentive payment provisions in the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA), collectively referred to as the *Quality Payment Program*. MIPS applies to physicians and clinicians providing services under Medicare Part B. Any providers that bill Medicare Part B and are required to submit data to MIPS, can continue to participate with the Medicaid EHR Incentive Program until the maximum six payments are received or until the final Program Year of 2021. **Submission of Meaningful Use data to the Medicaid EHR Incentive Program does not fulfill the MIPS reporting requirements. MIPS does not replace the Medicaid EHR Incentive Program, which will continue through Program Year 2021.** Providers that are eligible for the Medicaid EHR Incentive Program will continue to attest in Vermont's MAPIR system to receive their incentive payments. More information about the Medicare Quality Payment Program is available here: QPP@cms.hhs.gov and the QPP Helpdesk number: 1-866-288-8292.

If you are aware of anyone who would like to receive our EHRIP email updates, or if you would like to be removed from this distribution list, please forward the updated information to ahs.dvhaEHRIP@vermont.gov.

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 about the program.

Thank you,
Lorraine

Lorraine Siciliano

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