

Alternate Medicare attestation for Medicaid EPs – information sheet

Starting with Program Year 2015 and onwards, in order to provide Medicaid Eligible Providers (EPs) a means of attesting to Meaningful Use (MU) and avoiding payment adjustments, for the Program Year(s) in which they cannot meet the Medicaid EHR Incentive program requirements (such as Patient Volume), Medicaid EPs will be able to attest to MU under the Medicare Program, with the 'Alternate Medicare Attestation', through the Registration & Attestation User Interface (RNA).

This document gives a brief overview of the Alternate Medicare Attestation processes, and the RNA webpages Medicaid EPs attempting the Alternate Medicare Attestation will utilize.

A few important clarifications -

- ❖ There is NO incentive payment for successful completion of the Alternate Medicare MU attestation; this attestation serves to avoid getting payment adjustment, but there is no EHR Incentive payment from this successful attestation to MU.
- ❖ Since the Medicaid Incentive program allows for 'skipping' participation years (for instance, an EP who obtained Medicaid incentive payment for PY 2014, and did not attest for PY 2015, could decide to attest for PY 2016, 'skipping' participation for PY 2015), the Medicaid EP utilizing the Alternate Medicare attestation in a given year could claim the same year as a 'skipped' participation year under Medicaid incentive program.
- ❖ A Medicaid EP who has completed the Alternate Medicare Attestation is subject to Medicare (i.e. Medicare Administrative Contractor, MAC) auditing of the Medicare attestation on record.
- ❖ The Medicaid EP does not switch program registration to Medicare in order to utilize this Alternate Medicare MU attestation; the Medicaid EP remains in Medicaid doing this attestation.
- ❖ The Medicaid EP may complete the Alternate Medicare Attestation BEFORE attempting regular Medicaid AIU/MU attestation (with the EP's respective Medicaid State) in the same Program Year. Completing the Alternate Medicare Attestation does not exclude the EP(s) from in future doing Medicaid MU attestation with their respective State Medicaid agencies for the same Program Year. Medicaid EPs can do the 2015 program year Medicare MU attestation now (and up until the end of the CMS 2015 attestation period) with CMS through RNA and get the assurance of no payment adjustments in 2017 (or in 2016 for 1st year EHR Incentive program participants in PY 2015), and then whenever their respective State Medicaid opens up Medicaid Attestation they can do Medicaid MU attestation for Medicaid incentive payment from their Medicaid State as usual.
- ❖ The alternate Medicare MU attestation is NOT mandatory. Medicaid EPs do not have to do this alternate MU Medicare Attestation with Medicare. However, be aware there could be some Medicaid EPs who are 1st-time attestors to MU for PY 2015 who may have not yet attested to the State, and cannot do so right now, and are at risk for payment adjustment in 2016. These EPs could benefit from using the alternate Medicare Attestation to attest to Medicare MU for PY 2015 and avoid payment adjustment in 2016.

- ❖ As the Medicaid EP progresses through the CMS Registration & Attestation UI (RNA) attestation screens (more details will follow in later pages of this information sheet) and about to complete attestation submission, the EP encounters this screen shown below

Home Registration **Attestation** Status

Submission Process: Attestation Statement

Attestation Statements

You are about to submit your attestation for EHR Certification Number **A014E01NDGIDEAT**.

Please check the box next to each statement below to attest, then select the **AGREE** button to complete your attestation:

- The information submitted accurately reflects the output of the certified EHR technology.
- The information submitted for CQMs was generated as output from an identified certified EHR technology.
- I certify that I am ineligible to meet Meaningful Use under the Medicaid program and I am attesting to avoid a payment adjustment under the Medicare program. In addition, I am aware that attestations done under the Medicare program are subject to Medicare audit, and adverse audit findings may lead to rejection of the Medicare attestation.

Please select the **Agree** button to proceed with the attestation submission process, or the **Disagree** button to go to the Home Page (your attestation will not be submitted).

Agree Disagree

The statement for the 3rd checkbox has caused Medicaid EPs concerns, and all 3 checks are required to proceed.

Please be reassured that making that 3rd check (on the Attestation Statements page) does not evaluate the provider's ability to attest successfully to Medicaid MU with their respective Medicaid State EHR Incentive programs to obtain Medicaid incentive payments for the same program year.

Registration & Attestation User Interface (RNA) link <https://ehrincentives.cms.gov/hitech/login.action>

A User name and Password is required to use the RNA, and instructions may be found in the [Identity & Access System Quick Reference Guide](#) on the CMS.gov Registration & Attestation page, at <https://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/RegistrationandAttestation.html>

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Medicare & Medicaid EHR Incentive Program
Registration and Attestation System

Welcome to the Medicare & Medicaid EHR Incentive Program Registration & Attestation System

About This Site

The Medicare and Medicaid Electronic Health Records (EHR) Incentive Programs will provide incentive payments to eligible professionals and eligible hospitals as they demonstrate adoption, implementation, upgrading, or meaningful use of certified EHR technology. These incentive programs are designed to assist providers in this period of health IT transition and instill the use of EHRs in meaningful ways to help our nation to improve the quality, safety, and efficiency of patient health care.

Additional Resources: For User Guides to Registration and Attestation that will show you how to complete these modules, a list of EHR technology that is certified for this program, specification sheets with additional information on each Meaningful Use objective, and other general resources that will help you complete registration and attestation, please visit [CMS website](#).

Eligible to Participate: There are two types of groups who can participate in the programs. For detailed information, visit [CMS website](#).

This web system is for the Medicare and Medicaid EHR Incentive Programs. Those wanting to take part in the program will use this system to register and participate in the program.

Overview of Eligible Professional (EP) and Eligible Hospital Types

Eligible Professionals (EPs)

Medicare EPs include:

- Doctors of Medicine or Osteopathy
- Doctors of Dental Surgery or Dental Medicine
- Doctors of Podiatric Medicine
- Doctors of Osteopathy
- Chiropractors

Medicaid EPs include:

- Physicians
- Nurse Practitioners
- Certified Nurse - Midwife
- Dentists
- Physician Assistants who practice in a Federally Qualified Health Center (FQHC) or Rural Health Center (RHC) that is led by a Physician Assistant.
- Doctors of Osteopathy

Medicare Advantage Organization (MAO) EPs - A qualifying MAO may receive an incentive payment for their EPs. For more information, visit [CMS website](#).

NOTE: EPs may NOT be hospital-based. This is defined as any provider who furnishes 20% or more of their services in a hospital setting (inpatient or emergency room).

Further, Medicaid EPs must also:

- Have a minimum of 20% Medicaid patient volume (20% minimum for pediatricians), OR
- Practice predominantly in a FQHC or RHC and have at least 20% patient volume to needy individuals.

Eligible Hospitals

Medicare Eligible Hospitals include:

- Subsection (d) hospitals in the 50 states or DC that are paid under the hospital inpatient prospective payment system. Hospitals in Maryland may also participate per law.
- Critical Access Hospitals (CAHs)
- Medicare Advantage Affiliated hospitals (MA-Affiliated Hospitals)

Medicaid Eligible Hospitals include:


- Acute Care hospitals with at least 10% Medicaid patient volume. May include CHCs and cancer hospitals.
- Children's Hospitals

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Medicare & Medicaid EHR Incentive Program
Registration and Attestation System

Warning

(*) Red asterisk indicates a required field.



WARNING: Only authorized registered users have rights to access the Medicare & Medicaid EHR Incentive Program Registration & Attestation System.




Please verify the following statements:


- You are accessing a U.S. Government information system
- The U.S. Government maintains ownership and responsibility for its computer systems
- Users must adhere to [U.S. Government Information Security Policies, Standards, and Procedures. \[PDF, 96.6 KB\]](#)
- Usage of this system may be monitored, recorded, and audited
- Unauthorized use is prohibited and subject to criminal and civil penalties
- The use of the information system establishes consent to any and all monitoring and recording of activities

*Check this box to indicate you acknowledge that you are aware of the above statements

Select the **Continue** button to go to the LOGIN page or select the **Previous** button to go back to the WELCOME page

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Use your NPPES user ID and password to log into this system.

- If you are an EP who does not have an NPI and/or an NPPES web user account, navigate to [NPPES](#) to apply for an NPI and/or create an NPPES web user account.

Eligible Hospitals

- If you are an Eligible Hospital, you must have an active NPI. If you do not have an NPI, apply for an NPI in [NPPES](#).
- Users working on behalf of an Eligible Hospital(s) must have an Identity and Access Management system (I&A) web user account (User ID/Password) and be associated to an organization NPI. If you are working on behalf of an Eligible Hospital(s) and do not have an I&A web user account, [Create a Login](#) in the I&A System.

Associated with both Eligible Professionals (EPs) and Eligible Hospitals

- If you are an EP using your NPPES web user account, you may also be permitted to work on behalf of a hospital. Navigate to the I&A System and use your NPPES User ID and password to request to work on behalf of an organization.
- Users working on behalf of an Eligible Professional(s) may also work on behalf of an Eligible Hospital(s). An Identity and Access Management system (I&A) web user account (User ID/Password) can be associated to both an Eligible Professional NPI and an organization NPI. If you do not have an I&A web user account, [Create a Login](#) in the I&A System.

Account Management

- If you are an existing user and need to reset your password, visit the [I&A System](#).
- If you are having issues with your User ID/Password and are unable to log in, please contact the EHR Incentive Program Information Center at 888-734-6433 / TTY: 888-734-6563.

(*) Red asterisk indicates a required field.

*User ID:

*Password:

Log In Cancel

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'Home' page on log in

The screenshot shows a web browser window with the following elements:

- Browser Menu:** File, Edit, View, Favorites, Tools, Help
- Page Header:** Medicare & Medicaid EHR Incentive Program Registration and Attestation System. Includes links for My Account, Log Out, and Help. A welcome message for Robert Patzkowsky is displayed.
- Navigation Tabs:** Home (selected), Registration, Attestation, Status
- Green Banner:** Welcome to the Medicare & Medicaid EHR Incentive Program Registration & Attestation System
- User Information:** Last Successful Login: 12/18/2015 | Unsuccessful Login Attempts: 0
- Welcome Message:** Welcome Robert Patzkowsky, your first step is to register for the EHR Incentive Program.
- Instructions:** Select any topic to continue.
- Registration Section:** A dropdown menu for 'Registration' with a list of options:
 - Register in the Incentive Payment Program
 - Continue Incomplete Registration
 - Modify Existing Registration
 - Resubmit a Registration that was previously deemed ineligible
 - Reactivate a Registration
 - Switch Incentive Programs (Medicare/Medicaid)
 - Switch Medicaid State
 - Cancel participation in the Incentive Program
- Attestation Section:** A dropdown menu for 'Attestation' with the word 'Medicare' visible below it.

Select the 'Registration' tab to continue with registration

IF you are registering for the first time with the RNA, you will see the 'Register' button in the lower right area of the 'Registration Instructions' page. Select this button to proceed.

IF you have previously been registered with the RNA, you may cross-check/update your registration information by selecting the 'Modify' button that would be available. You are not required to Modify information.

(Other actions (Cancel, Reactivate, Resubmit, View Status) buttons may also be available).

The screenshot shows a web application interface with a navigation bar at the top containing 'Home', 'Registration' (highlighted in green), 'Attestation', and 'Status'. Below the navigation bar is a green header with the word 'Registration' in white. The main content area is titled 'Registration Instructions' and includes a welcome message and a list of actions: Register, Modify, Cancel, Reactivate, Resubmit, and View Status. Below this is a 'Registration Selection' section with a table of registration entries. The 'Action' column of the table is highlighted with a red box, and the 'Register' button in the first row is also highlighted with a red box.

Registration Instructions

Welcome to the Registration Page.

Depending on the current status of your registration, please select one of the following actions:

- Register** Register for the EHR Incentive Programs
Continue an incomplete registration
- Modify** Modify Existing Registration
Switch incentive programs (Medicare/Medicaid)
Switch Medicaid state
Update payee of a registration that is locked for payment
- Cancel** Discontinue participation in the Medicare & Medicaid EHR Incentive Programs
- Reactivate** Reactivate a previously canceled registration
- Resubmit** Resubmit a registration that was previously deemed ineligible
- View Status** View Status of a registration that has been successfully submitted

Registration Selection

Identify the desired registration and select the Action you would like to perform. Please note only one Action can be performed at a time on this page.

Create a new registration:

Registration Date (MM/DD/YYYY)::
01/03/2016

Name	Tax Identifier	National Provider Identifier (NPI)	Incentive Type	Registration Status	Action
[REDACTED]	XXX-XX- [REDACTED] (SSN)	[REDACTED]			Register

DO NOT SWITCH INCENTIVE PROGRAMS (from MEDICAID to MEDICARE, by MODIFYING Registration under the 'EHR Incentive Program' topic on the 'Reason for Registration' page) IN ORDER TO DO THE ALTERNATE MEDICARE ATTESTATION.

The Alternate Medicare Attestation is done with your MEDICAID Registration.

Home Registration Attestation Status

Registration Progress

Reason for Registration

You are an Eligible Professional registering in the incentive program.

Tax Identifier: XXX-XX-XXXX (SSN)
NPI: XXXXX-XX-XXXX

Topics


The data required for this registration is grouped into topics. In order to complete registration, you must complete ALL of the following topics. Select the TOPIC and provide the required information. The system will show when each TOPIC is completed.

- 1 **EHR Incentive Program** Progress: 0 of 1
- 2 **Personal Information** Progress: 0 of 1
- 3 **Business Address & Phone** Progress: 0 of 1

Note: When all topics are marked as completed, select the Proceed with Submission button to submit your registration.

Proceed with Submission

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Registration Progress

Reason for Registration

You are an Eligible Professional registering in the incentive program.

Tax Identifier: XXX-XX-XXXX (SSN)

NPI: XXX-XX-XXXX

Topics

The data required for this registration is grouped into topics. In order to complete registration, you must complete ALL of the following topics. Select the TOPIC and provide the required information. The system will show when each TOPIC is completed.

- 1 [EHR Incentive Program](#) Progress: 1 of 1
Completed
- 2 [Personal Information](#) Progress: 1 of 1
Completed
- 3 [Business Address & Phone](#) Progress: 1 of 1
Completed

Note: When all topics are marked as completed, select the **Proceed with Submission** button to submit your registration.

[Proceed with Submission](#)



You Click to 'Submit Registration' on the Verify Registration page

The screenshot shows a web browser window displaying the 'Verify Registration' page of the Medicare & Medicaid EHR Incentive Program Registration and Attestation System. The browser's address bar shows the URL: <http://www.cms.gov/eHR/incentives/attestation/registration>. The page header includes the system logo and navigation links: 'My Account', 'Log Out', and 'Help'. A welcome message is displayed: 'Welcome [REDACTED]'. The main navigation menu has tabs for 'Home', 'Registration', 'Attestation', and 'Status', with 'Registration' currently selected. The page title is 'Verify Registration'. Under the heading 'Registration Information', a message asks the user to review the summary and click 'Submit Registration' if correct. The registration details are as follows:

Registration ID:	[REDACTED]	Business Address:	[REDACTED]
Name:	[REDACTED]	[REDACTED]	[REDACTED]
TIN:	XXX-XX-[REDACTED]N)	Phone #:	[REDACTED]
NPI:	[REDACTED]	E-Mail:	[REDACTED]
Incentive Program:	Medicaid(OK)		

A yellow callout box on the right side of the page displays: 'Tax Identifier: XXX-XX-[REDACTED] (SSN)' and 'NPI: [REDACTED]'. At the bottom of the registration information section, there are two buttons: 'Submit Registration' and 'Exit'. A photograph of three healthcare professionals in white coats is positioned on the right side of the page. The footer contains links for 'Web Policies & Important Links', 'Department of Health & Human Services', 'CMS.gov', 'Accessibility', and 'File Formats and Plugins', along with the CMS logo.

Your registration information is then sent to the State Medicaid Agency you specified association with.

At this point, the 'Registration', 'Attestation', and 'Status' tabs do not contain current information, and you cannot proceed with submitting any attestation data, pending confirmation of your registration by your Medicaid State.

You may contact your State Medicaid EHR Incentive program to stay alerted about when your registration may be confirmed. **This confirmation of your registration by your State Medicaid EHR Incentive program is required by CMS/NLR to permit MU attestation at the RNA.**

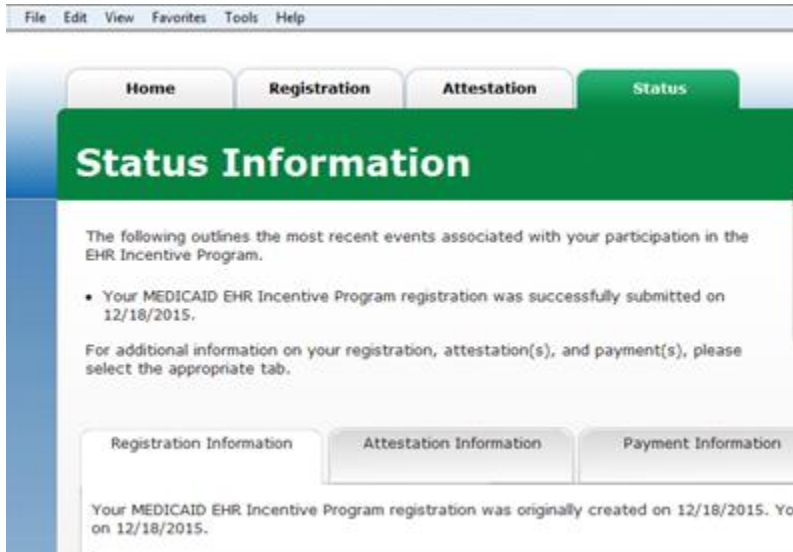
VERMONT MEDICAID PROVIDERS PLEASE NOTE

It can take 24-48 hours for the file exchange between the CMS/NLR and the State Medicaid system to confirm a provider's eligibility to proceed with an Alternate Attestation. It does not result in a specific notification unless the provider is registering for the first time ever. Please email the VT EHRIP Team at ehrip-support@vitl.net if you are submitting an Alternate Attestation, so that we can facilitate the information exchange in time to meet the Friday, 3/11/16 deadline.

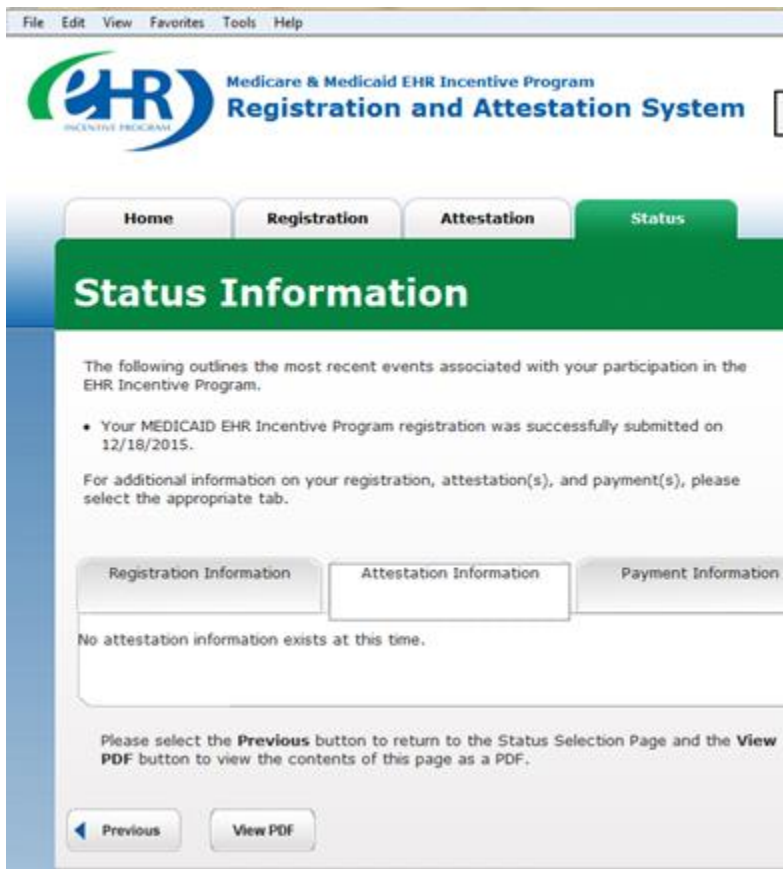
After the Medicaid State confirms the EP registration,

The 'Registration' and 'Status' tabs will now contain updated Medicaid registration information.

And, although the 'Attestation' tab would still not contain any information for the Program Year of registration, the forms/menus will now be accessible to permit Attestation data submission.



This screenshot shows the 'Status Information' page in a web browser. The browser's menu bar includes 'File', 'Edit', 'View', 'Favorites', 'Tools', and 'Help'. The page has a navigation bar with tabs for 'Home', 'Registration', 'Attestation', and 'Status', with 'Status' being the active tab. Below the navigation bar is a green header with the text 'Status Information'. The main content area contains the following text: 'The following outlines the most recent events associated with your participation in the EHR Incentive Program.' followed by a bullet point: '• Your MEDICAID EHR Incentive Program registration was successfully submitted on 12/18/2015.' Below this, it says: 'For additional information on your registration, attestation(s), and payment(s), please select the appropriate tab.' There are three buttons: 'Registration Information', 'Attestation Information', and 'Payment Information'. At the bottom of the page, it states: 'Your MEDICAID EHR Incentive Program registration was originally created on 12/18/2015. You on 12/18/2015.'

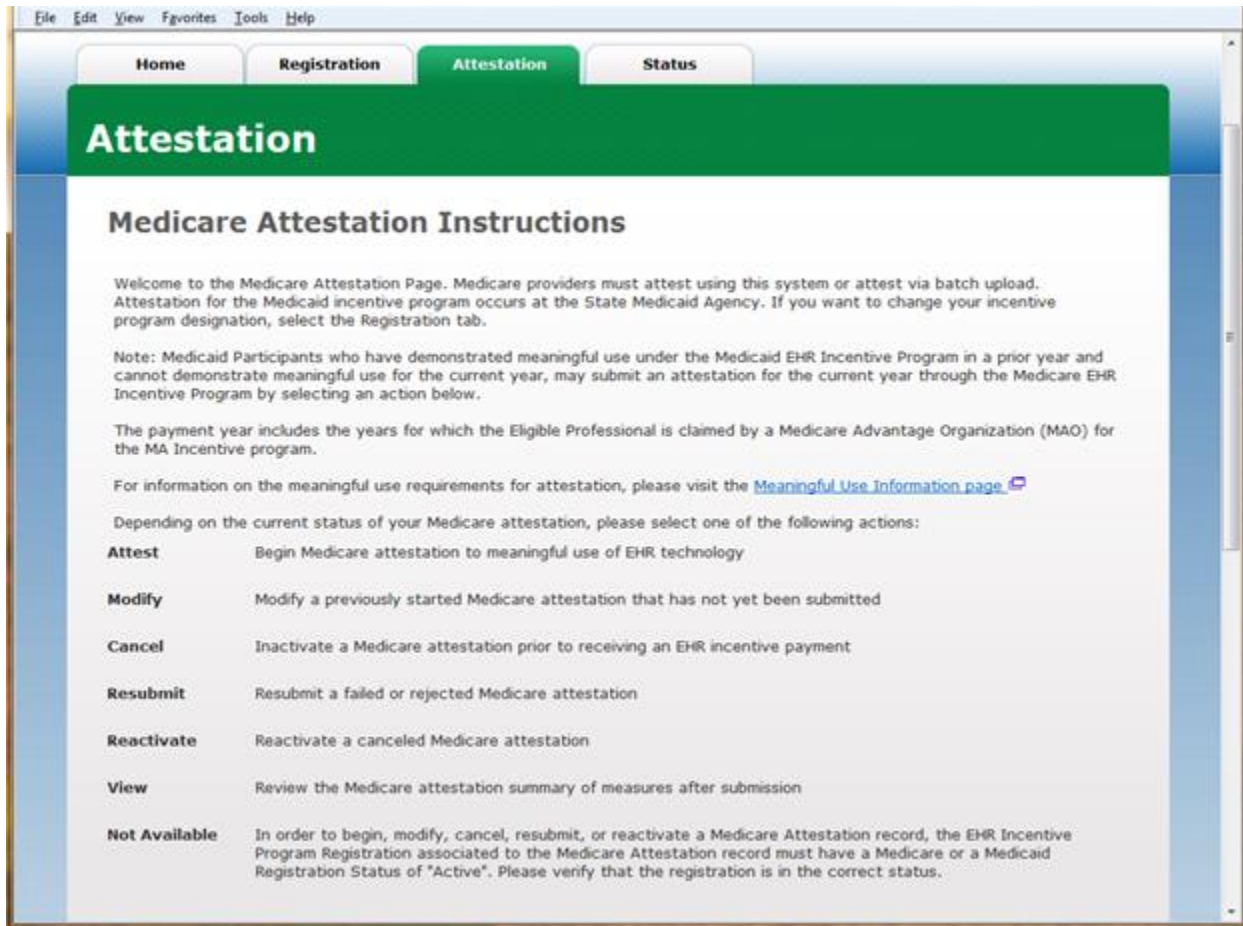


This screenshot shows the 'Status Information' page in a web browser. The browser's menu bar includes 'File', 'Edit', 'View', 'Favorites', 'Tools', and 'Help'. The page has a navigation bar with tabs for 'Home', 'Registration', 'Attestation', and 'Status', with 'Status' being the active tab. Below the navigation bar is a green header with the text 'Status Information'. The main content area contains the following text: 'The following outlines the most recent events associated with your participation in the EHR Incentive Program.' followed by a bullet point: '• Your MEDICAID EHR Incentive Program registration was successfully submitted on 12/18/2015.' Below this, it says: 'For additional information on your registration, attestation(s), and payment(s), please select the appropriate tab.' There are three buttons: 'Registration Information', 'Attestation Information', and 'Payment Information'. Below the buttons, it states: 'No attestation information exists at this time.' At the bottom of the page, it says: 'Please select the **Previous** button to return to the Status Selection Page and the **View PDF** button to view the contents of this page as a PDF.' There are two buttons: 'Previous' and 'View PDF'.

DO NOT SWITCH INCENTIVE PROGRAMS IN ORDER TO DO THE ALTERNATE MEDICARE ATTESTATION.

The Alternate Medicare Attestation is done with your MEDICAID Registration.

Proceed to the Attestation tab to continue.



Click on the 'Attest' button for the appropriate Program Year in the lower part of the Attestation tab to continue with the Alternate Medicare attestation



Observe the guidance in red text at the top of the webpage

If this has not yet been corrected at the CMS website, it should say "Medicaid Patient Volume threshold."

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Home Registration **Attestation** Status

Attestation Progress

Warning: A Medicaid provider who has participated in Medicaid for a prior year and cannot meet Meaningful Use for the current year may submit an Alternate Attestation under the Medicare program. However, if the Medicaid provider receives an EHR Incentive Payment from the Medicaid program for the same Program Year, the Alternate Attestation status will be set to Rejected. In addition, Alternate Attestations done under the Medicare program are subject to Medicare audit, and adverse audit findings may lead to rejection of the Medicare attestation.

Tax Identifier: XXX-XX-XXXX (SSN)
NPI: XXXXX-XX-XXXX
Program Year: 2015

Reason for Attestation

You are a Medicaid Eligible Professional completing an attestation for the EHR Incentive Program.

Topics

The data required for this attestation is grouped into topics. In order to complete your attestation, you must complete ALL of the following topics. Select the **TOPIC** and provide the required information. The system will show when each **TOPIC** is completed.

1 **Attestation Information** Topic Pending

Note:
When all topics are marked as completed, select the **Continue with Attestation** button to complete the attestation process. The topic of Clinical Quality Measures should be considered complete if it has a status of Electronic Reporting Program.

Continue with Attestation

File Edit View Favorites Tools Help

Home Registration **Attestation** Status

Attestation Information

(*) Red asterisk indicates a required field.

Tax Identifier: XXX-XX-XXXX (SSN)
 NPI: XXX-XX-XXXX
 Program Year: 2015

Name: Robert Gene Patzkowsky
TIN: XXX-XX-7486 (SSN)

EHR Certification Number:

Please provide your EHR Certification Number:

*EHR Certification Number:

[How do I find my EHR Certification Number?](#)

Note: If an EHR Certification Number is displayed, please verify that it is accurate.

EHR Reporting Period:

Please provide the EHR reporting period associated with this attestation:


A minimum of 90 days must be specified for your meaningful use attestation. Please enter your EHR Reporting Period within the same calendar year.

*EHR Reporting Period Start Date (mm/dd/yyyy):


*EHR Reporting Period End Date (mm/dd/yyyy):

Please select the **Previous** button to go back a page. Please select the **Save & Continue** button to save your entry and proceed.

◀ Previous
Save & Continue ▶



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Medicare & Medicaid EHR Incentive Program

Registration and Attestation System

[My Account](#) | [Log Out](#) | [Help](#)

Welcome [REDACTED]

Home
Registration
Attestation
Status

Meaningful Use Objectives

Instructions: You must attest to all ten Meaningful Use Objectives.

To meet meaningful use for the Public Health Reporting Objective in 2015:

You are required to select and attest to one measure from Public Health Reporting Measures 1-3 (Immunization Registry Reporting, Syndromic Surveillance Reporting, Specialized Registry Reporting).

- You may claim an Alternate Exclusion for Public Health Reporting Measures (Immunization Registry Reporting, Syndromic Surveillance Reporting, Specialized Registry Reporting)
- An Alternate Exclusion may only be claimed for up to two measures, then the provider must either attest to or meet the exclusion requirements for the remaining Public Health Reporting Measure

[REDACTED]

Tax Identifier: XXX-XX-[REDACTED]N)

NPI: [REDACTED]

Program Year: 2015

Meaningful Use Objectives	Select
Protect electronic protected health information (ePHI) created or maintained by the certified EHR technology through the implementation of appropriate technical capabilities.	Required
Use clinical decision support to improve performance on high-priority health conditions.	Required
Use computerized provider order entry for medication, laboratory, and radiology orders directly entered by any licensed healthcare professional who can enter orders into the medical record per state, local, and professional guidelines.	Required
Generate and transmit permissible prescriptions electronically (eRx).	Required
The EP who transitions their patient to another setting of	

As you proceed through the attestation data entry pages, prompts for Numerator and Denominator numbers will require manual entry of the numbers.

One of the last pages encountered (Attestation Statements page) displays as shown below. The statement for the 3rd checkbox has caused Medicaid EPs concerns, and all 3 checks are required to proceed.

Home Registration **Attestation** Status

Submission Process: Attestation Statement

Attestation Statements

You are about to submit your attestation for EHR Certification Number **A014E01NDGIDEAT**.

Please check the box next to each statement below to attest, then select the **AGREE** button to complete your attestation:

- The information submitted accurately reflects the output of the certified EHR technology.
- The information submitted for CQMs was generated as output from an identified certified EHR technology.
- I certify that I am ineligible to meet Meaningful Use under the Medicaid program and I am attesting to avoid a payment adjustment under the Medicare program. In addition, I am aware that attestations done under the Medicare program are subject to Medicare audit, and adverse audit findings may lead to rejection of the Medicare attestation.

Please select the **Agree** button to proceed with the attestation submission process, or the **Disagree** button to go to the Home Page (your attestation will not be submitted).

Agree Disagree

All 3 checks are required to proceed.

Please be reassured that making that 3rd check on this page does not evaluate nor affect your ability to attest successfully to Medicaid MU with the Vermont Medicaid EHRIP to obtain Medicaid incentive payment for the same program year.