



**From:** Siciliano, Lorraine  
**Sent:** Thursday, June 29, 2017 4:09 PM  
**To:** Siciliano, Lorraine  
**Subject:** VT Medicaid EHRIP Update 6/29/17: July 1 Deadline for Hardship Exemptions, and more!

To All Vermont Medicaid EHR Incentive Program participants:

**HARDSHIP EXEMPTION FOR PROVIDERS NOT MEETING MU IN 2016**

The deadline for Eligible Professionals (EPs) to submit Hardship forms for the 2018 payment adjustment, **based on the 2016 EHR reporting period** for Meaningful Use is **July 1, 2017**. To learn if you may be subject to Medicare Payment Adjustments, review the information at the [CMS Payment Adjustments & Hardship Information website](#). Providers may apply for a hardship exemption, if they meet certain criteria. You can download the [Instructions](#) and [Application Form](#) to see if you meet the specific criteria for a hardship exemption.

**UPDATED PUBLIC HEALTH DOCUMENTATION AID UPDATED FOR PY2017 MODIFIED-MU2**

The Public Health Documentation Aid contains screenshots of the three Public Health Meaningful Use Measures as they appear within the MAPIR attestation environment, keyed with spaces to provide additional information for the measures met or the exclusions qualified for. The Documentation Aid, when emailed or uploaded at the time of attestation along with the supporting documentation, will facilitate the application review process, and will also help provide the information that would be requested in the event of an audit:

[Program Year 2017 EPs Attesting to Modified MU Stage 2](#)

**UPDATED VERMONT MEDICAID EHRIP AUDIT TIPSHEET**

The VT EHRIP Audit Team has updated their helpful [Eligible Professional Audit Tip Sheet](#) based on their activities and experience with reviewing provider records. Remember, the best time to prepare for an audit is during the attestation process. Download and consult this guidance as you prepare and submit your EHRIP attestation.

Process	Tip
<b>Audit Documentation</b>	<ul style="list-style-type: none"> <li>Eligible professionals (EPs) should retain relevant supporting documentation (in either paper or electronic format) used in the completion of your EHR Incentive Program application.</li> <li>Documentation should be retained for six years post-attestation.</li> </ul>
<b>Audit Selection</b>	<ul style="list-style-type: none"> <li>A random sample of auditees is pulled for each program year.</li> <li>More than one provider from a group may be selected for audit.</li> </ul>
<b>Audit Notifications</b>	<ul style="list-style-type: none"> <li>Once selected, auditees will be notified via email and certified mail.</li> </ul>
<b>Information Request</b>	<ul style="list-style-type: none"> <li>Notification from the Auditor will include a document request list that will be used to validate program eligibility, patient volume, and Meaningful Use (MU) requirements. Requests will vary, but may include the following:               <ul style="list-style-type: none"> <li>A patient-level detail volume report. The report should support the numbers in your attestation (numerator and denominator).</li> </ul> </li> </ul>

**REMINDER: LAPSED MEDICAID ENROLLMENT CANCELS ANY ACTIVE MAPIR APPLICATION**

If an Eligible Professional’s Vermont Medicaid enrollment lapses at any time after an application is started and **BEFORE A PAYMENT IS RECEIVED**, the application will be automatically cancelled in the MAPIR system. All saved data for the application will be eliminated. The attestation must then be restarted from the beginning in MAPIR if the EP is able to be fully re-enrolled in Vermont Medicaid. If a MAPIR application of one of your providers is cancelled, please contact us right away: [ahs.dvhaEHRIP@vermont.gov](mailto:ahs.dvhaEHRIP@vermont.gov)

**THE BLUEPRINT VERMONT CLINICAL REGISTRY IS A SPECIALIZED REGISTRY**

Eligible Professionals at practices participating in the Vermont Blueprint for Health may use their engagement with Blueprint’s Vermont Clinical Registry to meet the Specialized Registry reporting option for the Public Health Objective. A significant number of Blueprint practices send their data through VITL’s Health Information Exchange where it then flows to the Vermont Clinical Registry. If you have any questions about whether you qualify for registering, onboarding or reporting to this registry for meeting the measure, please contact the EHRIP Team at [ahs.dvhaEHRIP@vermont.gov](mailto:ahs.dvhaEHRIP@vermont.gov).

### MEANINGFUL USE STAGE 3

Stage 3 of Meaningful Use is an option for the first time in 2017 for those providers who have upgraded their Certified EHR Systems to the 2015 Edition, or are using a combination of 2014 and 2015 CEHRT. Providers attesting with the Vermont Medicaid EHR Incentive Program in Program Year 2017 who will be meeting Stage 3 criteria will wait to start their attestations in January 2018. We will alert our program participants when MAPIR upgrades are complete and Stage 3 screens are configured with the correct options. More information about Stage 3 criteria can be found at the CMS Website: [MU3 Guidance for Medicaid EHRIP](#).

### MEETING MU IN 2017 TO AVOID CALENDAR YEAR 2018 PAYMENT ADJUSTMENTS

Many thanks to our fellow MAPIR State colleagues in the [Pennsylvania Medical Assistance Electronic Health Record Incentive Program](#) for this Q&A explaining the timeframe for attesting to Meaningful Use in order to avoid Payment Adjustments:

**Q—Your communication indicates that program year 2017 will have payment adjustments applied in payment year 2018. We thought that payment adjustments were on a two-year delay from Program Year to payment year, so Program Year 2017 would impact 2019 payment adjustments. Please clarify if payment adjustments are on a one- or two-year delay?**

**A—**This issue is very confusing indeed and we hope not to confuse you further but here goes. CMS established an alternative for providers attesting to MU for the first time in 2016 and beyond and our message only applies to those providers. You are correct that, traditionally, meeting MU in 2016 would allow providers to avoid payment adjustments in 2018 (the two year delay).

This time, however, those attesting to MU for the **first** time in 2016 will avoid payment adjustments in 2017. Further, if you are attesting to MU for program year 2017, for the **VERY** first time, you will avoid payment adjustments in 2018. So, all providers attesting to MU for the second time and beyond, in program year 2016, would still avoid the payment adjustment on a two year delay or 2018.

Also consider this, Adopt, Implement or Upgrade (AIU) does not count toward MU...so if a provider attested to AIU in program year 2016, then program year 2017 would be the provider's first year to attest to MU and that would allow the provider to avoid 2018 payment adjustments. Keep in mind that AIU is no longer available.

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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](mailto: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**

**Medicaid Operations Administrator | EHR Incentive Program | Department of Vermont Health Access**

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