



From: Siciliano, Lorraine
Sent: Friday, February 09, 2018 9:49 AM
To: Siciliano, Lorraine
Subject: VT Medicaid EHRIP Update 02/09/18: CMS Payment Adjustment Reconsideration Deadline Extended; Start Your PY2017 Applications; Updated FAQs

To All Vermont Medicaid EHR Incentive Program participants:

CMS PAYMENT ADJUSTMENT NOTICES: CMS RECONSIDERATION DEADLINE EXTENDED TO 2/19/18!

We have been hearing from a number of you receiving CMS notifications that one or more of your providers are subject to Medicare Payment Adjustments in Calendar Year 2018. In some cases, there is confusion as to why providers would have Payment Adjustments applied to them, as those providers did receive a Medicaid EHR Incentive Payment for Program Year 2016. Remember, **only meeting Meaningful Use in PY2016** would hold a provider harmless from Calendar Year 2018 Medicare Payment Adjustments. If a provider received a Medicaid EHRIP payment for Adopt/Implement/Upgrade, they remain subject to Payment Adjustments. However, if you do not have access to a provider's Meaningful Use history, or believe the Payment Adjustment notification was issued in error, the Vermont Medicaid EHRIP Team can assist with researching that information. Send an email with the provider's name and NPI to ahs.dvhaEHRIP@vermont.gov. **The submission deadline for Eligible Professional and Critical Access Hospital reconsideration applications has been extended to February 19th, 2018.** Find out how to submit a reconsideration to CMS here:

- [CMS Payment Adjustments & Hardship Information](#)
- [2018 Eligible Professional \(EP\) Payment Adjustment Reconsideration Instructions](#)
- [2018 Eligible Professional \(EP\) Payment Adjustment Reconsideration Application](#)

PLEASE NOTE: The **Medicare** EHR Incentive Program has ended. If providers remain eligible for payments in the **Medicaid** EHRIP, they may ALSO be required to report to the Medicare Quality Payment Program (QPP) initiatives for Program Year 2017 in order to avoid Medicare Payment Adjustments in Calendar Year 2019. Going forward, an eligible provider can receive an incentive payment from the Medicaid EHRIP, but in order to avoid Medicare Payment Adjustments on their Medicare billing, they will need to comply with MACRA/MIPS reporting requirements. **Meeting Meaningful Use in the Medicaid EHRIP only will NOT hold providers harmless from Medicare Payment Adjustments any longer.** Not all providers are subject to Payment Adjustments or required to report to the QPP. You can check a provider's reporting requirement status here: <https://qpp.cms.gov/>

DON'T WAIT...START YOUR PY2017 APPLICATIONS NOW, SUBMIT BY THE DEADLINE 3/31/18

The deadline for all 2017 Modified-MU2 EHRIP applications is **March 31, 2018**. [Contact the EHRIP Team](#) for information on when to submit Stage 3 applications. If you experience any issues when navigating the MAPIR screens, they could take some time to resolve, so don't wait until the last minute to discover any technical difficulties.

UPDATED FAQs

Check out the latest questions and answers posted on our [FAQs](#) webpage:

- Do I need to update the CEHRT ID on the R&A Verification screen in MAPIR?
- When entering a provider's 90-day patient volume, but MAPIR is not accepting the start date. The error message indicates "*The date you have specified is invalid.*" What am I doing wrong?

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

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

802.363.4652 | Lorraine.siciliano@vermont.gov

NOB 1 South, 280 State Drive, Waterbury VT 05671-1010

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