UTAH MEDICAID REGISTRATION AND ATTESTATION CHECKLIST FOR ELIGIBLE HOSPITALS (EHs) (Dually Eligible)

Below are the step by step instructions on how to complete the registration process. Print Step by Step Instructions or Print Provider User Manual

There are two factors that determine the EHR reporting period for hospitals eligible for both the Medicare and Medicaid EHR Incentive Programs:

* Whether the hospital is attesting to Medicaid only; Medicaid first, then Medicare in the same fiscal year; Medicaid first, then Medicare in a later fiscal year; or Medicare and Medicaid simultaneously/Medicare first, then Medicaid in a later fiscal year.

* The payment year for which the hospital is attesting. (first, second, third etc.) To see a table (where having adopted, implemented, or upgraded to certified EHR technology for Medicaid is abbreviated as AIU and meaningful use is abbreviated as MU), CLICK HERE.

Contact a Utah Medicaid EHR Incentive Program Manager at (801) 538-6929 if you have questions or would like to set up a meeting to discuss the Utah Medicaid EHR Incentive Program registration and attestation process.

EHs – Payment Year 1 – Adopt, Implement or Upgrade

If this is your first year with the EHR Incentive Program you are required to begin by registering at the national level with the CMS registration and attestation system.

Eligible hospitals and Critical Access Hospitals (CAHs) that qualify can receive incentive payments under both the Medicare and Medicaid EHR Incentive Programs. Hospitals that are eligible for EHR incentive payments under both Medicare and Medicaid should select “Both Medicare and Medicaid” during the registration process, even if they plan to apply only for a Medicaid EHR incentive payment in the first year of participation by adopting, implementing, or upgrading certified EHR technology. Dually eligible hospitals can then attest through CMS for their Medicare EHR incentive payment at a later date, if they so desire. It is important for a dually eligible hospital to select “Both Medicare and Medicaid” from the start of registration in order to maintain this option.

1. You will need to register for a PECOS ID to complete your CMS EHR Incentive Program registration.

2. Locate the National Provider Identifier (NPI) and Tax ID (TIN).

3. Register at the CMS level.

4. Verify EHR is on ONC list and obtain CHPL certification ID number.

5. You must have an active Utah Medicaid contract number and current provider enrollment forms (Provider Enrollment and Disclosure of Ownership) on file. To enroll or check the status of your enrollment, visit the provider enrollment website.

6. Identify Hospital eligibility details: demographics, EHR certification number and contact information.

7. Identify a 90 day period to demonstrate 10% Medicaid Pt. Volume from the previous Federal Fiscal Year.

8. Identify Hospital eligibility details; Medicaid patient volume, growth rate, Medicaid share, and total share. Your patient volume information must come from an auditable data source such as your hospital Cost Report. Locate the three most recent years of the Hospital’s cost report data. The State can accept other auditable data sources beyond the Medicare cost report to calculate Medicaid aggregate EHR hospital incentive amounts, however, the period used must be a period of 12 months.

9. For best results, we recommend using Google Chrome to access the system

10. Attest at the State level.

Please refer to the Utah Provider User Manual for information regarding EHs – Payment Year 2 - Stage 1 Meaningful Use

Submit one of the following public health measures to the Department of Health in preparation for Stage 1 MU:

Public Health Reporting for Meaningful Use

Important Notes:

When the Stage 2 Meaningful Use regulations are put in place (10/1/2013 for eligible hospitals, 1/1/2014 for eligible providers) some other changes will accompany this:

- When a provider has met 90 days of Stage 1 MU, the next participation year is also considered Stage 1 MU. Two Stage 1 attestations must be submitted prior to moving to Stage 2.
- Some Stage 2 regulations affect Stage 1 MU. **YOUR SYSTEM MUST BE CERTIFIED TO THE 2014 STANDARD TO RECEIVE A 2014 PROGRAM YEAR INCENTIVE, even for Stage 1 payments.** (This does not affect providers or hospitals whose program year 2013 incentives are paid in calendar year 2014.) Please consult your vendor or use the ONC's website to determine if your system is ready for the 2014 changes. For further clarification regarding Stage 1 changes that will be in effect in 2014, click HERE.
- 90 days of 2014 MU data must be achieved before a provider may submit a MU attestation for 2014. The earliest date a provider is able to attest is 4/1/2014.
- EHR reporting period change **for program year 2014 only**: regardless of what stage of meaningful use, in 2014 all providers and hospitals will report on 90 days of meaningful use. The state of Utah has decided to allow reporting on any 90 days, and will not restrict participants to reporting on the calendar quarters.

Please Note: This information is provided for Medicaid practitioners interested in applying for the Medicaid EHR Incentive Program. If you are a Medicare practitioner looking for information on the Medicare EHR Incentive Program, please visit www.cms.gov/EHRIncentivePrograms for more information.