

Presented by: Deb Anderson, CPHIMS
HIT Consultant and Business Relationship Manager
EHR Incentive Program Registration
CONNECTING THE DOTS!







HTS, a department of Mountain Pacific Quality
Health Foundation

Welcome

- Thank you for spending your valuable time with us today.
- This webinar will be recorded for your convenience.
- A copy of today's presentation and the webinar recording will be available on our website. A link to these resources will be emailed to you following the webinar.
- All phones will be muted during the presentation and unmuted during the Q&A session. Computer users can use the chat box to ask questions which will be answered at the end of the presentation.
- We would greatly appreciate your providing us feedback by completing the survey at the end of the webinar today.



- Mountain-Pacific holds the Centers for Medicare & Medicaid Services (CMS) Quality Innovation Network-Quality Improvement Organization (QIN-QIO) contract for the states of Montana, Wyoming, Alaska and Hawaii, providing quality improvement assistance.
- HTS, a department of MPQH, has assisted 1480 providers and 50 Critical Access Hospitals to reach Meaningful Use. We also assist healthcare facilities with utilizing Health Information Technology (HIT) to improve health care, quality, efficiency and outcomes.

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Session Presenter

Deb Anderson, CPHIMS, Health Technology Services Business Relationship Manager



Webinar Objectives

- Identify which providers should register for the EHR Incentive Program
- Identify how to access the CMS Identity and Access Management System
- Understand the PECOS Checklist for Registration
- Identify where and how to Register providers
- Understand the State Level Registry for Medicaid eligible hospitals and providers

Webinar Agenda

- Eligible Providers
- 2015 Meaningful Use changes
- EHR Incentive Registration
 - Identity and Access (I&A) Management System
 - PECOS Checklist
 - CMS Registration
 - Wyoming State Level Registry
 - Montana State Level Registry
- Q&A
- Resource links and contact information

Eligible Professionals



Eligible professionals under the Medicare EHR Incentive Program include:	Eligible professionals under the Medicaid EHR Incentive Program include:
Doctor of medicine or osteopathy	Physicians (primarily doctors of medicine and doctors of osteopathy)
Doctor of dental surgery or dental medicine	Nurse practitioner
Doctor of podiatry	Certified nurse-midwife
Doctor of optometry	Dentist
Chiropractor	Physician assistant who furnishes services in a Federally Qualified Health Center of Rural Health Clinic that is led by a physician assistant.

Provider MU Exceptions

Some providers will automatically be granted a hardship exception. CMS will use Medicare data on these providers to determine their hardship exception.

The following providers do not need to submit a hardship application:

- New providers to the profession in their first year
- Eligible professionals who are hospital-based: a provider is considered hospital-based if he or she provides more than 90% of their covered professional services in either an inpatient (Place of Service 21) or emergency department (Place of Service 23) of a hospital
- Eligible professionals in which 90% of their claims include Place of Service 21, Place of Service 23 and certain observation services using Place of Service 22.
- Eligible professionals with certain PECOS specialties (05-Anesthesiology, 22-Pathology, 30-Diagnostic Radiology, 36-Nuclear Medicine, 94-Interventional Radiology) 6 months prior to the first day of the payment adjustments. Eligible professionals should verify that their PECOS specialty is up to date.

Payment Adjustments



- In the American Recovery and Reinvestment Act of 2009 (ARRA), Congress mandated that payment adjustments should be applied to Medicare eligible professionals, eligible hospitals, and critical access hospitals (CAH) that are not meaningful users of Certified Electronic Health Record (EHR) Technology under the Medicare EHR Incentive Program.
- If a provider is eligible to participate in the Medicare EHR Incentive Program, they must demonstrate meaningful use in either the Medicare EHR Incentive Program or in the Medicaid EHR Incentive Program, to avoid a payment adjustment. Medicaid providers who are only eligible to participate in the Medicaid EHR Incentive Program are not subject to these payment adjustments.
- Medicare eligible professionals will receive payment adjustments starting on January 1, 2015.

2015 Objectives (Modified Stage 2)

- Protect Patient Health Information
- 2 Clinical Decision Support
- 3 CPOE
- Electronic Prescribing (eRx)
- 5 Health Information Exchange
- 6 Patient Specific Education
- Medication Reconciliation
- 8 Patient Electronic Access (VDT)
- 9 Secure Messaging (EPs only)
- 10 Public Health and Clinical Data Registry Reporting

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Updated MU Terminology

- CMS Final Rule encompasses EHR Incentive Programs in 2015 through 2017 called "Modified Stage 2" and Stage 3 in 2018
- No longer the Stage/Year Concept
 - 2015–2017 is Modified Stage 2
- Further information is available on the CMS website https://www.cms.gov/Regulations-and- Guidance/Legislation/EHRIncentivePrograms/2015 ProgramRequirements.html

Registration Steps

- Identity and Access Management System
- PECOS Checklist
- CMS EHR Registration (NLR)
- Accessing Medicaid State Level Registries (SLR)

CMS Identity and Access Management System (I&A)





Authorized users are able to sign in to the Identity & Access Management System. If you are a new user you must first register.

Sign In	One account to access multiple systems		
indicates required field(s) User ID:	Create one account with the Identity & Access Management System to manage access to PECOS and EHR incentive programs, manage staff, and authorize others to access your		
Password:	information. Create Account Now		
Sign In	Use this system to register for Medicare or update your current enrollment information.		
Porgot Password Retrieve Forgotten User ID	Register to receive EHR incentive payments for eligible professional and hospitals that adopt,		
? Enter your PIN	implement and upgrade or demonstrate meaningful use with certified EHR technology.		

https://nppes.cms.hhs.gov/IAWeb/login.do

I&A Online Resources



Quick Reference Guide Overview of features and tools to manage your account.



Video: How to Create an Account

Video on how to create an account if you are an individual provider, an Authorized or Delegated Official for your organization or to work on behalf of providers.



Video: How to register as an Authorized Official for your Organization

Video on how to register with CMS as an Authorized or Delegated Official.



Frequently Asked Questions

Answers to common questions about registration, who should register, and how to manage your account.



Video: Setting Up Staff Video on how to add

Video on how to add credentialing staff to your Healthcare Organization or 3rd Party Organization.



Video: Connections?

Video on how a Healthcare or 3rd Party Organization can request to work on behalf of a Provider as a Surrogate.

What is I&A

What is the Identity & Access Management System (I&A)

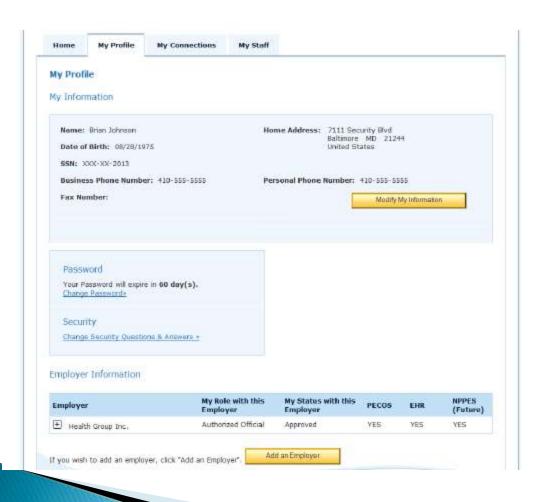
- The I&A System is where users register for usernames and passwords to access:
 - PECOS
 - NPPES
 - Electronic Health Records (EHR) Incentive Program
- The I&A System works behind the scenes, and controls what users are able to access in those systems.
- Choosing to approve others to work on your behalf in these systems is <u>not</u> required, and has no impact to claims payments.

FAQ - Can eligible professionals (EPs) allow another person to register or attest for them?

YES – Users registering or attesting on behalf of an EP must have an Identity and Access Management System (I&A) web user account (User ID/Password) and be associated to the EP's NPI. If you are working on behalf of an EP(s) and do not have an I&A web user account, please visit https://nppes.cms.hhs.gov/NPPES/IASecurityCheck.do to create one.

Keywords: FAQ10565

Enhancements to I&A – Simple Registration & Approvals



- Streamlined new user registration, process.
- Allow Authorized and Delegated Officials of enrolled organizations to be automatically approved without submitting documentation to EUS for verification.
- Allow for 3rd Party
 Organizations (Billing
 Company, Credentialing
 Specialists, Office staff) to
 register and create their own
 account.

Existing Users

- Any Authorized Official, Staff End User, or Individual Provider who previously accessed PECOS, NPPES, or EHR already has an account.
- Existing usernames and passwords previously used to access PECOS, EHR and NPPES have been converted, and can still be used.
- Users have access to the same systems and information that existed prior to the I&A updates

Access set PER SYSTEM

Employer	My Role with this Employer	My Status with this Employer	PECOS	EHR	NPPES (Future)
Health Group Inc.	Authorized Official	Approved	YES	YES	YES

Important Definitions

Organizational Provider

 An Organization that provides medical items and/or services to Medicare beneficiaries (e.g. DMEPOS Supplier, Physician Group Practice, Hospital, etc...) Must have or be eligible for a Type 2 NPI in NPPES.

3rd Party Organization

 A third-party organization (e.g. billing agency, credentialing consultant, or other staffing company) that has business relationships with Individual Providers or Organizational Providers to work on their behalf.

Surrogate

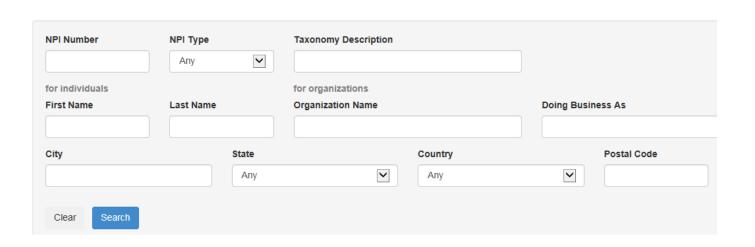
- An employee (eg. Staff, AO or DO) of an Individual Provider or Organizational Provider or 3rd Party Organization that is authorized to access, view, and modify information within CMS computer systems on behalf of their employer; OR
- An Organizational Provider that has a business relationship with an Individual Provider to access, view, and modify information within CMS computer systems on their behalf; OR
- A Third-Party Organization that has a business relationship with an Individual Provider or Organizational Provider to access, view, and modify information within CMS computer systems on their behalf.

Do you know your Authorized Official?

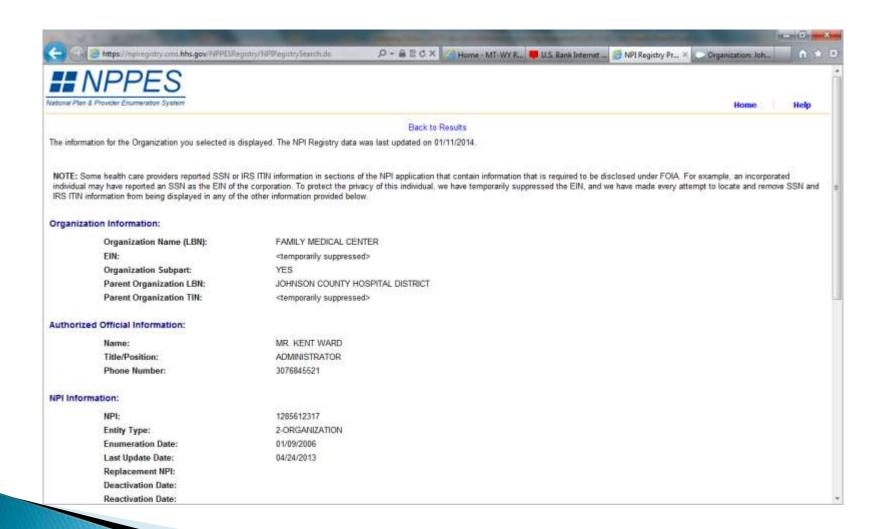


- NPI Registry Search Home
 - https://npiregistry.cms.hhs.gov/

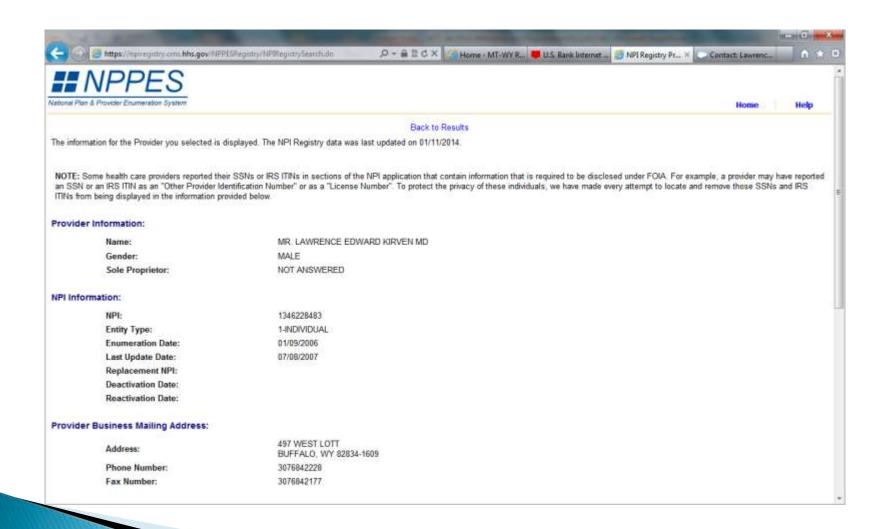
Search NPI Records



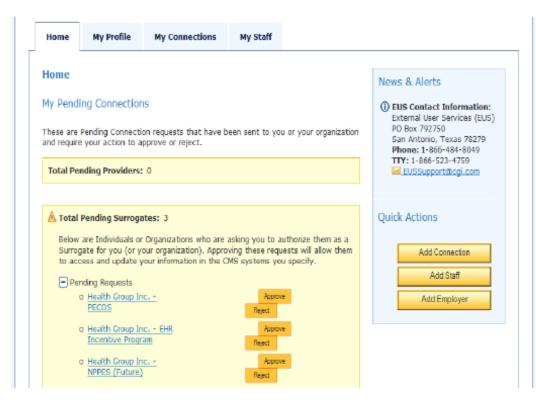
Group NPI



Individual Provider NPI



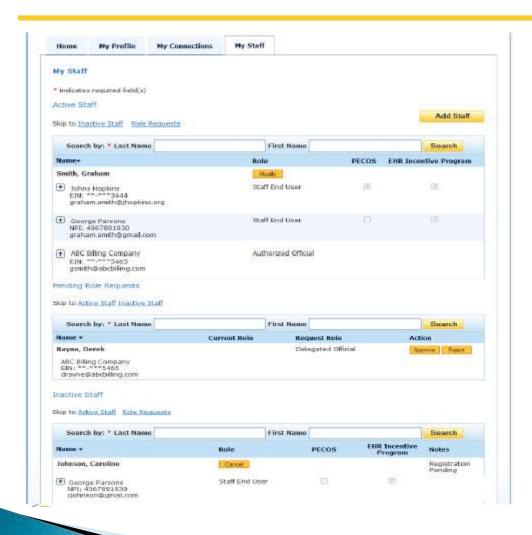
Enhancements to I&A - Connections



- Continued Ability for Providers to allow Groups to Attest on behalf of Providers in EHR
- New ability for Individual and Organizational Providers to establish connections, allowing others to work on their behalf in PECOS
- Email Notifications to all users when new Connections are created.

<u>IMPORTANT NOTE:</u> Approving a Connection (Surrogate) to work on your behalf DOES NOT give that user authority to sign Medicare enrollment applications in PECOS. All enrollment applications are still required to be signed by the Individual Provider or appropriate Official of the Organizational Provider.

Enhancements to I&A - Staff Management



- Create one connection to allow access for all staff.
- Authorized and Delegated Officials can invite and manage what staff can access.

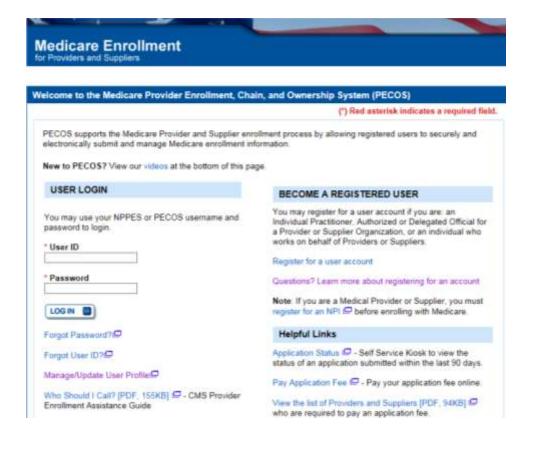
Links to PECOS and EHR



Resources

- I&A Home Page: https://nppes.cms.hhs.gov/IAWeb/login.do
 - Login
 - Quick Reference Guides
 - FAQs
 - Video Tutorials
- For question related to contact the External User Services
 (EUS) Help Desk at 1-866-484-8049 or <u>EUSSupport@cgi.com</u>

Medicare Provider Enrollment, Chain, and Ownership System (PECOS)



PECOS Checklist

- Make sure to have an ACTIVE enrollment record in the Provider Enrollment, Chain and Ownership System (PECOS)
- Verify that the Medicare Administrative Contractor (MAC) has the correct banking information and payee information including:
 - Bank account number
 - Bank routing number
 - Payee Address
 - Payee National Provider Identifier (NPI) and Payee Tax Identification Number (TIN) combinations
- https://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/Downloads/Registration_Attestation_PECO Checklist_09_25_12.pdf

CMS Registration

https://ehrincentives.cms.gov/hitech/login.action

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 support 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.

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.

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 🗗.

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.

EHR System Announcements

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

System Announcements Effective December 15, 2015:

- EHR Program Announcement Visit the Registration Tab to ensure your information is accurate, such as the Payee selection and email address. The EHR incentive program communicates to you using the email address on file on the Personal Information page of the Registration & Attestation website.
- EHR Program Announcement The CMS final rule for the Medicare and Medicaid EHR Incentive Programs went on display on Tuesday October 6, 2015. It includes modifications to meaningful use for 2015 through 2017 (Modified Stage 2) and Stage 3. Attestation will be open JAN 4 through FEB 29, 2016. For more information on the rule visit: https://www.cms.gov/Regulations-and-guidance/Legislation/EHRIncentivePrograms/index.html
- EHR Program Announcement The Attestation System will open on January 4, 2016 for Eligible Professionals, Eligible Hospitals, and Critical Access Hospitals to attest for Medicare Electronic Health Record Incentive Program for Program Year 2015.

Continue			
Web Policies & Importa	ant Links 🖵 Depa	rtment of Health & Human Services 🖵	CMS/
CMS.gov 🖵	Accessibility 🗁	File Formats and Plugins 🖵	CONTRES Sur MEDICARE & MEDICARD SERVICES

Registration Checklist

- Valid I&A login
- Tax ID (TIN OR SSN)
- NPI
- Incentive type (Medicare/Medicaid/both)
- Eligible Provider Type
- Payee Information (NPI)
- Business Address, Zip +4, Phone number
- Email address for confirmation email
- Optional EHR Certification Number

CMS Registration Login

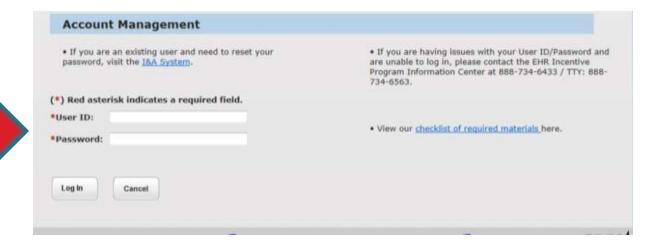
Login Instructions

Eligible Professionals (EPs)

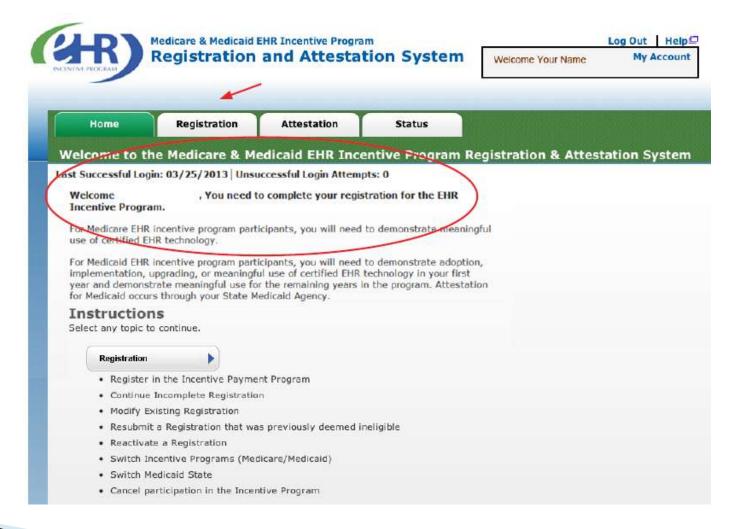
- If you are an EP, you must have an active National Provider Identifier (NPI) and have a National Plan and Provider Enumeration System (NPPES) web user account. Use your NPPES user ID and password to log into this system.
- If you are an EP who does not have an NPI and/or an NPPES web user account, navigate to NPPES □ to apply for an NPI and/or create an NPPES web user account.

 Users working on behalf of an Eligible Professional(s) must have an Identity and Access Management system (I&A) web user account (User ID/Password) and be associated to the Eligible Professional's NPI. If you are working on behalf of an Eligible Professional(s) and do not have an I&A web user account, Create a Login in the I&A System.

Login at the bottom of the page.

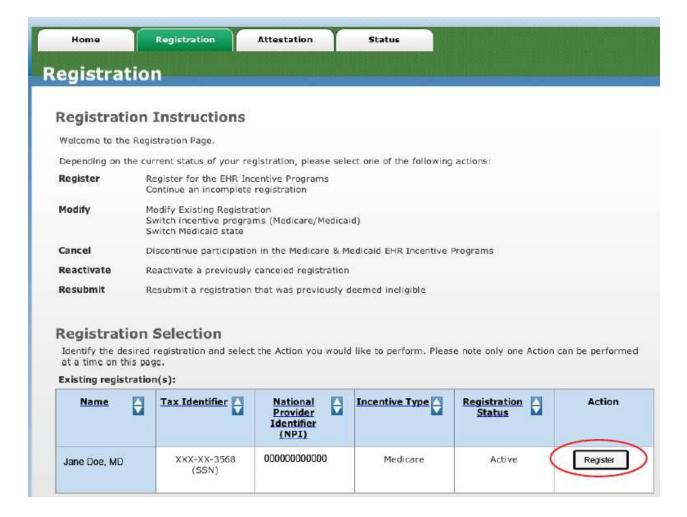


CMS Welcome Screen



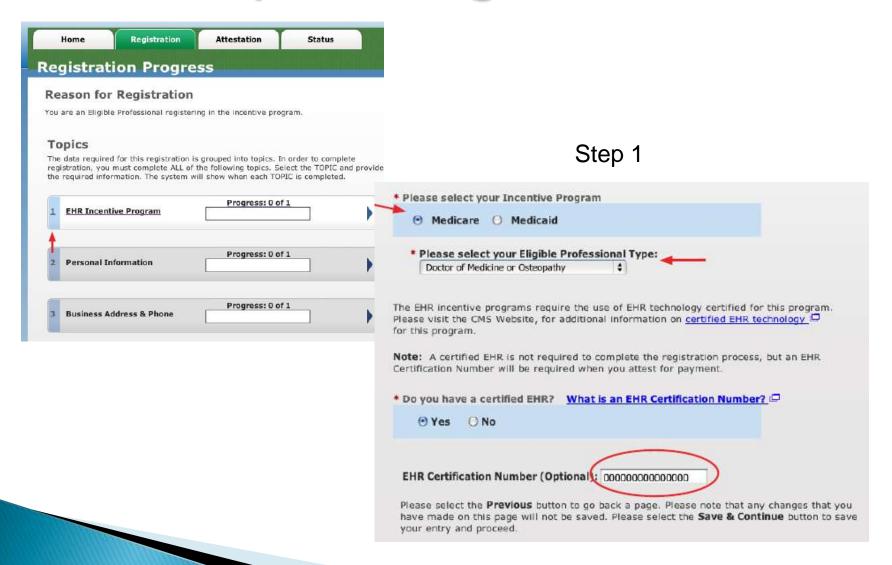
Select the Registration Tab

CMS Registration

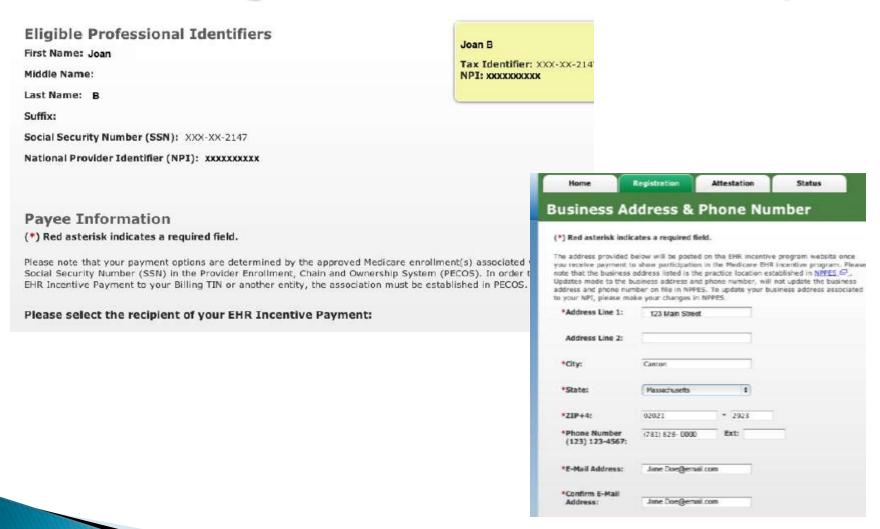


Click the Register button of the appropriate EP

CMS Steps to Register



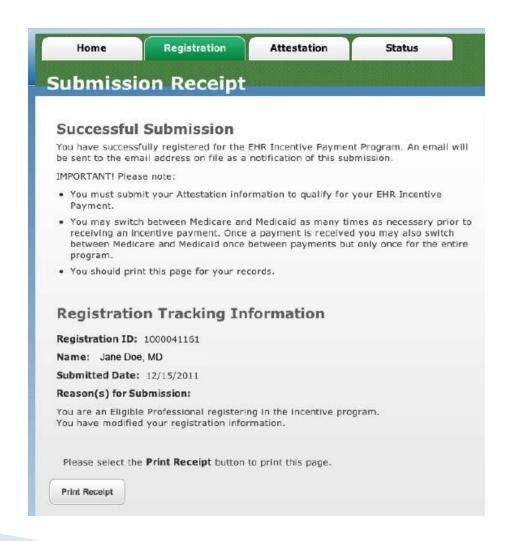
CMS Registration - Next steps



CMS Registration - Next steps



CMS Registration ID





CMS Failed or Pending status

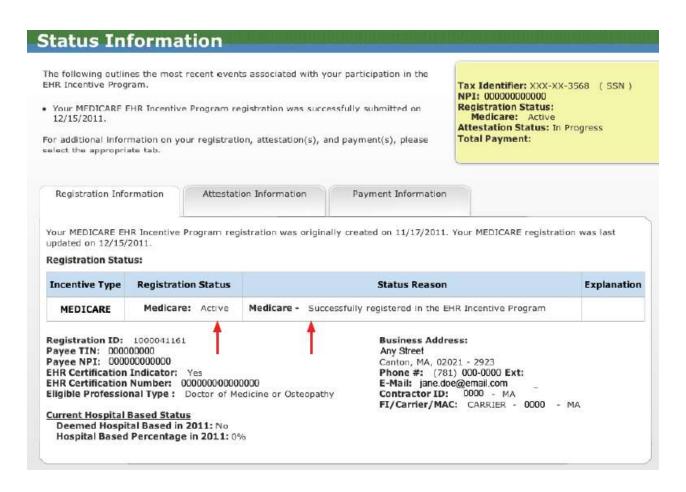
Reason(s) for Rejected status:

 Death Master File (DMF) (Medicare/Medicaid) validation failed – The provider's Legal Name and Social Security Number are on the Social Security Administration's DMF. Contact Social Security office, (800) 772-1213 / TTY (800)325-0778.

Reason(s) for Issue Pending status:

- NPI Status in NPPES is in a Deactivated status. Contact the NPPES Help Desk for assistance. Visit; https://nppes.cms.hhs.gov/NPPES/Welcome.do (800) 465-3203 / TTY (800) 692-2326
- Enrollment Status in PECOS The Medicare enrollment in PECOS associated with this registration is not in an Approved status. Contact PECOS for help. Visit; https://pecos.cms.hhs.gov/, (866)484-8049 / TTY (866)523-4759
- OIG Exclusions in PECOS OIG Exclusions are associated with this provider's Medicare enrollment in PECOS. Contact PECOS for help. Visit; https://pecos.cms.hhs.gov/, (866)484-8049 / TTY (866) 523-4759
- Hospital-based Professional You have been identified as a Hospital-based Eligible Professional in the CMS National Level Repository (NLR). A Hospital-based Professional is defined as one who furnishes ninety percent (90%) or more of his/ her allowed services in an inpatient hospital setting. This year you are not eligible to participate in the EHR incentive program.

CMS Status Information Tab



Medicare EPs are now finished with registration!

CMS National Level Registry (NLR) to Medicaid State Level Registry (SLR)

Wyoming and Montana

CMS National Level Registry - Registration information



Registration and MU Data downloads from NLR to SLR

WY Medicaid SLR Access



https://wyslr.health.wyo.gov/

Montana Medicaid Site



MT Medicaid Site: http://mt.arraincentive.com/

Are your dots connected now?

- Eligible Professional with valid PECOS enrollment
- Avoid Payment Adjustments by being a Meaningful User
- I&A Access to EHR Incentive Program
- CMS Registration using the I&A access
- State Level Registry access for those who are Medicaid eligible

Questions



Upcoming HTS Webinars

- ▶ MU 2015 Steps to Attestation in January
- Check our website for additional webinars or join our mailing list for direct invitations.

Contact Info

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Resource Links

- 2015 MU Changes can be found at <u>https://www.cms.gov/Regulations-and-</u> <u>Guidance/Legislation/EHRIncentivePrograms/2015</u> <u>ProgramRequirements.html</u>
- CMS Identity & Access Management System https://nppes.cms.hhs.gov/IAWeb/login.do
- CMS EHR Registration and Attestation System https://ehrincentives.cms.gov/hitech/login.action
- Medicare Provider Enrollment, Chain, and Ownership System (PECOS) https://pecos.cms.hhs.gov/pecos/login.do#headingLv1