Missouri Medicaid EHR Incentive Program:
Program Year 2019 Summary

Here are the major changes for Program Year 2019 based on the latest Centers for Medicare and Medicaid Services (CMS) Rules –

- o All participants in the Medicaid Promoting Interoperability Program are required to use 2015 Edition Certified Electronic Health Record Technology (CEHRT). The 2015 Edition CEHRT **did not** have to be implemented on January 1, 2019. However, the functionality must be in place by the first day of the EHR reporting period and the product must be certified to the 2015 Edition criteria by the last day of the EHR reporting period.
- o For Meaningful Use (MU) measures, participants must report on Stage 3 MU measures and will use any continuous 90-day EHR reporting period between January 1 and December 31, 2019.
- o Meaningful Use objectives and measures for Stage 3 remain at eight (8) for Eligible Professionals (EP). The threshold for stage 3 Objective 6, Measure 1 (View, Download, Transmit) and measure 2 (Secure Messaging) was set at 5% for the remainder of the Medicaid Promoting Interoperability Program. In addition, the requirement that only EPs in urgent care settings can use the syndromic surveillance measure to meet the Objective 8 (Public Health) was removed.

- o For Program Year 2019 only – Objective 5 Measure 1 Application Program Interface (API) Measure 1: For more than 80 percent of all unique patients seen by the EP: (1) The patient (or the patient-authorized representative) is provided timely access to view online, download, and transmit his or her health information; and, (2) The provider ensures the patient's health information is available for the patient (or patient-authorized representative) to access using any application of their choice that is configured to meet the technical specifications of the API in the provider's CEHRT.
  - o CMS will allow states to give EPs flexibility on meeting the second part of this measure. States may allow EPs to meet this measure if they (1) have enabled an API during the calendar year of the reporting period, (2) make data available via that API for 80% of the patients seen during their reporting period, (3) provide those patients with detailed instructions on how to authenticate their access through the API and provide the patient with supplemental information on available applications that leverage the API, and (4) maintain availability of the API, i.e., it can't be turned on for one day and then disabled.
- o CQM selections remain the same, EPs select 6 measures without regard to domain. No changes were made to reporting period requirements – first time Meaningful Users have a 90-day reporting period; all others have a full year reporting period.

Required Documents for volume, CEHRT, and payment:

- o DCN report – to demonstrate that professionals meet the Medicaid volume threshold, attach a report that lists the DCNs (Department Client Number), dates of service and charge amounts (optional) for each professional's Medicaid patients. A description of the DCN report with examples is available, including for the group proxy method and an alternative for those unable to provide DCNs.

- o EHR Contract and/or Vendor letter – to demonstrate the EHR system in use is a certified product, attach the EHR contract with terms and conditions, effective dates, product name and version, and signatures for both the vendor and provider organizations. Redacted versions are acceptable, as long as required information is included. If the clinic has upgraded its system since the original contract, include an EHR vendor letter with the version/system of certified EHR in use, installation date, ONC Certification Number, and/or CHPL number (CC#).

- o Direct Deposit Form – to receive electronic payments, include a direct deposit form (must be signed and dated in the current program year or calendar year) and voided check or bank letter for the account. If the bank account is the same as used in the previous year, indicate that on the direct deposit form. If the banking information has changed, complete a new direct deposit form and submit a new voided check or bank letter.

- o Attestation agreement – to complete the attestation, each professional must print, review, check the appropriate encounter box, sign and date the attestation agreement which summarizes information submitted in their SLR attestation.

- o Federal Document – to assure that payee name and address is correct for the 1099 form, include one of the following documents: CP 575 or 147C Letter; 941 Employer's Quarterly Federal Tax Return; 8109 Tax Coupon; or letter from the IRS with the Federal TIN and legal name. A W-9 form is not acceptable**.**

Required Documents for Meaningful Use:

- o A summary report of all Meaningful Use objectives generated from the CEHRT system in use for the EHR reporting period selected for 2019.

- o A summary report of all CQMs generated from the CEHRT system in use for the EHR reporting period selected for 2019.

- o A security risk analysis summary report that demonstrates an analysis was conducted or a review of the original analysis was done and additional steps were taken to reduce identified risks during the program year 2019.

  - o Please ensure the report has the date (must be dated in 2019) when the analysis or review was conducted and the clinic/practice name is listed on the report.

  - o The review or analysis must be conducted in calendar year 2019.

- o A letter from DHSS confirming "active engagement" with the State Public Health Agency, as reflected by registration of intent, testing and validation, successful ongoing reporting, or

requirements for an exclusion for public health reporting during 2019. Contact Public Health at https://health.mo.gov/atoz/mophie/ or MOPHIE@health.mo.gov or call 573-751-6127.

Resources are posted on the CMS website to help eligible professionals successfully participate in the Medicaid Electronic Health Record (EHR) Incentive Programs in 2019:

- CMS Promoting Interoperability 2019 Program Requirements can be found here
- EPs can access the 2019 Stage 3 Program requirements here.