



Happy New Year!

We're back with one of those irregular, regular (or vice-versa) E-blast newsletters we've promised you. The new year brings many changes and new opportunities.

Computers, for whatever reason, do not like January 1st. Ours is no different. We have run into a snag with using information from 2010-2011-2012. Our programmers are working diligently to get this problem corrected so that we can proceed with processing your attestations. We anticipate the problem being corrected this week.

What's New in 2012?

Meaningful Use (MU) for TennCare Medicaid providers, that's what! Both EPs and EHs participating in the TennCare Medicaid EHR Incentive Program and who are in the second payment year (more below) now must demonstrate MU of their certified EHR system when attesting. For EPs, CMS requires 90 consecutive days of MU data from 2012 when a provider is attesting in the second payment year. That means that if you began using your certified EHR system on January 1, the earliest that you can attest for your second EHR incentive payment is April.

MU data for EHs are based on fiscal year, which quite honestly gets a little confusing. There is a paragraph below providing more information about fiscal years and a link to CMS for a further explanation. The MU data for the second and third years comes from a consecutive 90-day period in the current Federal Fiscal Year (FFY), which runs October 1 of one year through September 30 of the following year. This means that for EHs now in their second payment year, they can begin attesting for MU.

Please remember – the consecutive 90-day Medicaid paid encounter data information is always from the previous calendar year per CMS guidelines, 2011 for those attesting in 2012.

Meaningful Use

The TennCare Quality Unit is responsible for monitoring MU for the EHR incentive program. More information about MU will be provided soon. In the meantime, CMS has a web site that should answer most of your questions. Go to the [CMS Meaningful Use Calculator](#) for additional information.

Calendar Year – Fiscal Year – Payment Year

In 2010 and 2011, we talked about the first year of the EHR Incentive Program, Calendar Year, and Fiscal Year, which was a fairly simple discussion. Now that 2012 has begun, a little clarification is needed.

EPs & EHs who **did not** attest to AIU in 2011 and do so in 2012 will be in their **first payment year**. EPs & EHs who attested to AIU in 2011 will now be in their **second payment year** (meeting MU requirements). Providers in their **first payment year** will have to meet the same requirements as those who attested to AIU in 2011, but are not required to meet MU requirements in the first payment year. This is true regardless of which calendar year a provider enrolls in the EHR Incentive Program.

Go to this CMS web site for more information

https://questions.cms.hhs.gov/app/answers/detail/a_id/10826/kw/What%20is%20the%20fiscal%20year%20for%20hospitals

Refresher – TennCare Medicaid EHR Incentive Program

The EHR Incentive Program began in 2011 and concludes in 2021. Incentive payments for EPs are made over a 6-year period. The incentive payment period for EHs is 3 years, with payments being 50% in the first year, 30% in the second year, and 20% in the third year. (The EH incentive payment is determined based on information submitted in the first payment year.)

Now that the calendar has turned, the term “year” takes on a slightly different meaning. Any eligible provider (professional or hospital) may begin the process to qualify for and receive an EHR incentive payment anytime between 2011 and 2016. Providers, who attested in 2011, are now considered to be in their second payment year.

A provider who attests for the **first** time in any year **after** 2011 will be in their first payment year. For example, a provider who attests in February 2012 is in his first payment year. (This is unlike a provider who attested in 2011 and is now in his second payment year.) It is possible for members of a Group Practice/Clinic to be in **different** payment years.

Example: The members of the Smokey Mountain Group all attested in 2011 except for Dr. Byrnes (let's give Smith & Jones a break), who did not join the group until January 2012. Those who attested in 2011 are now in their **second** payment year and **must meet** the MU requirements. Dr. Byrnes is in his **first** payment year, and only has to meet the same **AIU** requirements the others met in 2011. The Patient Volume requirements remain the same throughout the program – 30% (or 20% for pediatricians) paid Medicaid encounters for a 90-day period in the previous calendar year. This means that Dr. Byrnes will complete his 6-year EHR incentive program a year after the remainder of the Group.

More information about the EHR Incentive Program and Attestation can be found on our web site (in the process of being updated) and that of CMS.

TennCare: <http://www.tn.gov/tenncare/hitech.html>

CMS: <http://www.cms.gov/EHRIncentivePrograms/>

Problems with the PIPP Portal

Many people have had problems establishing their User Accounts and then activating the account once the User ID and password has been established. A while back, we drafted the language in the box below as an email response and hope you find it helpful if you are having problems.

We have come to realize that the instructions on how to create a User Account for the PIPP portal and how to access the portal are not as clear as they could have been. If these instructions do not resolve your problem, please email us again and we will further check to see what is occurring.

To create a User Account, go to <https://pipp.tenncare.tn.gov>

Click on “Provider Web Registration” on the left side of the page, and:

- Enter the **provider's CMS registration number** given at the time registration on the CMS Registration & Attestation System web site was completed.
- Enter the **individual** provider's NPI, **NOT** the Payee NPI.
- Enter the **individual** provider's Tax ID number that was used when registering on the CMS Registration & Attestation System web site. This is usually the provider's SSN. This is **NOT** the Group's TIN or EIN.

You will then be asked to establish a User ID, a password, and to answer three security questions. Once you submit this information, you will receive a second email.

This email is a confirmation of the establishment of your User Account, provides your User ID, and a link to the PIPP portal (you actually click on the word “here”). It is through this link and this link **ONLY** that you can access the portal. **Go to the “Log In” on the right side of the page**, enter your User ID & password when requested, and you should be ready to go.

Part of the problem is that both of these pages look identical, but the way they function is different. You must follow these steps in order for the PIPP portal to work properly. Again, if this does not resolve your problem, please let us know.

Always keep in mind – registration and attestation is based on the **individual** provider. The only time any type of group data is used is when you are attesting as a group and using the group encounter data as a proxy for individual encounter data. As described above when establishing a User Account, use the individual provider’s CMS Registration Number, NPI, and Social Security Number. Do not use the Group/Payee NPI nor the Group Tax Number when establishing a User Account.

In addition, you will use the “Provider Web Registration” link one time per provider (and yes, you have to establish a User Account for **each** provider in a group). Once you have established and activated your User Account, you will only use the “Log In” link on the right side to enter the PIPP portal.

We are working diligently with our external partner to make changes that we hope will make the process more transparent and easier to use.

Contact Us

As always, if you have a question or need more information -

The [CMS EHR web page](#) is the definitive place for the latest EHR Incentive Program information. It is also the beginning point to register for participation in the incentive program.

On the [TennCare Medicaid HITECH](#) page is a lot of information, and additional links, about the EHR Incentive Program.

We have a Frequently Asked Questions ([FAQ](#)) page that you should find helpful.

Send us an email and we will respond as quickly as possible. TennCare.EHRIncentive@tn.gov