



***Payment Year 2014 Attestation has officially closed for Eligible Professionals.
The deadline was March 31, 2015.***

NPRM COMMENT PERIODS NOW OPEN

CMS and ONC invite the public to submit comments on the recently released notices of proposed rulemaking (NPRMs), affecting the future functioning of the EHR Incentive Programs.

Comments on these two rules are due May 29:

- [Stage 3 of Meaningful Use NPRM](#) – Specifies the Stage 3 requirements for eligible professionals, eligible hospitals, and critical access hospitals in the EHR Incentive Programs.
- [EHR Technology Certified to the 2015 Edition NPRM](#) – Outlines the certification and standards to help providers meet the proposed Stage 3 requirements with EHR technology certified to the 2015 Edition.

Comments on this rule are due June 15:

- [Modification to Meaningful Use in 2015-2017 NPRM](#) – Proposes revised requirements for eligible professionals, eligible hospitals, and critical access hospitals participating in the EHR Incentive Programs in years 2015 through 2017. This is the rule which will allow for a 90-day MU period in 2015.

The public can submit comments in several ways, including via electronic submission or mail:

1. Electronically: You may submit electronic comments to <http://www.regulations.gov>. Follow the "Submit a comment" instructions.
2. By regular mail
3. By express or overnight mail
4. By hand or courier

For more information on the **Stage 3 and 2015 Edition certification criteria proposed rules**, review the [press release](#) and [fact sheet](#).

For more information on the **Modification to MU in 2015-2015 proposed rules**, review the [fact sheet](#).

After these rules have been finalized and given an effective date, both CMS and TennCare will provide information on the impact to providers these rules will have. Remember, at the moment these are **proposed rules**. They can be changed prior to being finalized and effective.

Can't Log In?  Lost Password?  Locked Out? 

Normally, all you need to enter TennCare's Provider Incentive Payment Program (PIPP) system and attest for the EHR Incentive is the user name and password for your account. But what if you can't get in?

If you can't remember the user name or password: First, check with another co-worker who knows or knows how to find the information. We always recommend more than one person in your practice have or have access to your User ID, password, and the answers to the security questions. In the event an employee leaves, someone else will know how to access the portal. If necessary, you can change the information in the future.

If the designated co-worker isn't available, try recovering your User ID or resetting your password from the links provided on the PIPP Log-in page. You must know the answers to the security questions associated with the account to accomplish either task.

If you are unable to reset the password on your own, email to TennCare.EHRIncentive@tn.gov the provider's name and NPI, and explain you need to have the password reset. We will send you a temporary password you can use to get in the system (assuming you know the answers to the security questions). Once in PIPP, you can set up a new password only your office will know. (We cannot see your password or your responses to the security questions.)

Any time you set up a new PIPP password, remember it must be 7 to 10 characters, and contain

- at least one non-alphanumeric character (! @ # % *)
- at least one upper case character
- at least one lower case character, and
- must NOT have any spaces.

If you are locked out by the system: You cannot unlock a PIPP User Account by creating a new password. Email TennCare.EHRIncentive@tn.gov with the provider's name and NPI, and explain what happened. We will unlock your account for you and notify you once it has been done.

If you do not have the answers to the security questions: Recovering a User ID or resetting a password will not get you into PIPP if you do not have or cannot remember the answers to the security questions. At this point, the current User Account will need to be deleted so that you can set up a new User Account with a new User ID, password, and security question answers. Email TennCare.EHRIncentive@tn.gov with the provider's name and NPI, and explain you do not have the answers to the security questions. We will then delete the current User Account, and you can return to PIPP to set up the new one.

To set up the new User Account, select the "Provider Web Registration" link on the home page of the PIPP portal. You will need to know your CMS Registration Number (the number you were given when you enrolled on the CMS R&A web site), the provider's individual NPI (not the NPI of the group), and the Tax ID (For EPs, this is the Social Security Number (SSN)). You will then be taken to the page that requests you establish a User

Name, password, and answers to three security questions. Once this page is completed, select “Save” to create the new account. You will then receive another email which will allow you to activate the account you just created.



REQUIRED FORMS

One page of the EHR attestation is called “Required Forms.” As the name implies, these are forms we must have in order to process and pay, if approved, your EHR attestation incentive payment. The forms are found under the ‘Required Forms’ link on the left side of the page. These forms are as follows:

- **W-9:** The link for this form takes you to the IRS web site to obtain the actual form. The Tennessee Department of Finance and Administration (F&A) has informed us that they will no longer accept the *substitute W-9*. **F&A has also informed us that this form must be signed and dated within 90 days of the submission of your attestation. Each line of the W-9 must be completed** as appropriate.
- **ACH:** The Automated Clearing House form enables us to make your EHR Incentive Payment to you electronically – which is the only way this payment is made. **F&A has also informed us that this form must be signed and dated within 90 days of the submission of your attestation. Each line of the ACH must be completed** as appropriate.
- **Voided Check, Deposit Slip, or Bank Letter:** One of these three items is required. There is a page you can use to either attach and copy your check or deposit slip, or use as a cover sheet for the bank letter.
- **Signature Page:** This must be signed and dated annually by the provider, within 90 days of the submission of your attestation. The most current Signature Page (and it does change) is available through that link.
- **Nurse Practitioner’s Page:** The NP page is for Nurse Practitioners only. As TennCare allows NPs to submit claims under a doctor’s NPI, a proctor, or the group/clinic, this helps us locate all the claims to support meeting the Medicaid patient volume requirement.
- **Physician’s Assistant Page:** This page is required of PAs who practice in an FQHC/RHC led by a PA. This is the CMS-eligibility requirement of PAs, and we must know at what clinic the PA works and who the lead PA is.

The first four pages are required of every provider, must be submitted EACH year for which you attest, must be uploaded individually, and must be signed and dated within 90 days of the submission of your attestation. Some providers upload these documents as a single document. PIPP is looking for four documents and will not allow you to proceed with less than four. The NP and PA pages are specific to those providers and PIPP does not look for those.

Our return reason for these forms is “<Form> is missing or incomplete.” Yes, you attached the form, but in our review, we discovered that it was not fully completed or accurately. Or it is out of date. Unfortunately, form responses are not always accurate or complete. So before you get all upset because we were so dumb that we

did not see the form, please take time to review it and make sure it is complete and timely dated. If you still can't determine the problem, email us and we'll be happy to assist you.

EHR Documentation

One of our highest attestation return reasons is the lack of sufficient EHR documentation. In order to participate in the EHR Incentive Program, providers must be able to show that they have adopted, Implemented, or upgraded (AIU) their EHR technology to be capable of meeting meaningful use requirements. 42 CFR § 495.302 define AIU as:

- ❖ Acquire, purchase, or secure access to certified EHR technology capable of meeting meaningful use requirements;
- ❖ Install or commence utilization of certified EHR technology capable of meeting meaningful use requirements; or
- ❖ Expand the available functionality of certified EHR technology capable of meeting meaningful use requirements at the practice site, including staffing, maintenance, and training, or upgrade from existing EHR technology to certified EHR technology per the ONC EHR certification criteria.

CMS has instructed the states that evidence of the above must be collected and reviewed prior to making the EHR Incentive Payment **EACH** year of the program.

On our EHR Questions page of the PIPP portal, and in the User Manual which is accessible on each attestation page, we have listed the items that are acceptable as documentation for this purpose. CMS has instructed us that we must see proof of a legal and/or financial obligation on your behalf to having certified EHR technology (CEHRT). So, what are we looking for?

- The page(s) of your contract or lease agreement that clearly identifies your CEHRT, the vendor and the provider, **AND** the executed, dated signature page, signed by both the vendor **and** the provider.
- If your current contract or lease agreement requires the vendor to provide you with appropriate updates or upgrades to your system to qualify it as a CEHRT, we need to see executed upgrade agreements for which a cost and timeframe are stated, **AND** identifies your CEHRT.
- A copy of your monthly or annual vendor's invoice clearly identifying your CEHRT **AND** proof of payment
- A copy of your purchase order identifying the vendor and CEHRT being acquired, **AND** proof of payment
- If you are using one of the free CEHRTs, such as Practice Fusion, the documentation requires are a signed letter or the vendor's letterhead **AND** a copy of the User Agreement.

We **cannot** accept:

- A screenshot of the CHPL website
- A screenshot of the CEHRT on your computer

- Requests for proposals or bids by vendors
- A letter or statement from your vendor stating that you have a CEHRT

As stated above, CMS requires that we see a legal and/or financial obligation to a CEHRT by the provider. If upon post-pay audit it is determined that the document is insufficient, your EHR Incentive Payment will be recouped.



Contact Information

As always, anytime you have a question or need assistance, please feel free to contact us. We will get back to you as quickly as possible.

↳ Please be sure to include the provider's name and NPI when contacting us. ↩

- ◆ For questions relating to **Meaningful Use (MU)**, send an email to EHRMeaningfuluse.TennCare@tn.gov
- ◆ For **all other questions**, send an email to TennCare.EHRIncentive@tn.gov
- ◆ The **CMS Help Desk** can be reached at 1-888-734-6433.
- ◆ **TennCare Medicaid EHR Incentive Program web site:** http://www.tn.gov/tenncare/ehr_intro.shtml
- ◆ **PowerPoint Presentations** on different subject areas are available here:
http://www.tn.gov/tenncare/ehr_page6.shtml

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