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## *Most Nurses Won't Go Back*

The following excerpt was taken from EHRIntelligence.com<sup>1</sup> on May 12, 2015. The article was written by Vera Gruessner on May 7, 2015, and is titled “Most Nurses Won’t Go Back After EHR Systems Implantation.”

In celebration of National Nurses Week starting on May 6 and ending on May 12, HIMSS Analytics **conducted a survey** alongside **Allscripts** that polled nurses on their experience and feedback around EHR systems implementation. The majority of those polled claim that EHR technology improves patient safety, collaboration among physicians, and simplifies the process of searching for specific data.

The survey found that 71 percent of polled nurses would not consider going back to paper-based medical records while 72 percent stated that EHR systems implementation led to fewer medication errors and enhanced patient safety.

Reduced errors and patient safety are a couple of the focal points for the push in the use of CEHRT. Why were nurses chosen for the study?

Bruning<sup>2</sup> also mentioned the reasons why the nursing profession was chosen as the key segment to poll in the Allscripts and HIMMS Analytics survey.

“Nursing is the nation’s largest healthcare profession. In the US, there’s more than 3 million registered nurses. Across the board, they’re the primary providers of direct patient care. People forget that when you come into the hospital, you don’t get 24/7 physician care, but you get 24/7 nursing care,” Bruning explained. “With the PCP challenges we’re having in the states, we’re seeing more advanced practice nurses being the primary care provider especially in rural settings. Those numbers are continuing to grow. Therefore, the experience of nurses and their opinions is extremely valuable in shaping technology that improves patient care.”

The remainder of the article can be read here: <https://ehrintelligence.com/2015/05/07/most-nurses-wont-go-back-after-ehr-systems-implementation/>. (Note: While this article contains a hyperlink to information about Allscripts, in no way should this be taken as an endorsement of Allscripts by the Bureau of TennCare. TennCare is neutral on the choice of vendors and products selected by providers.)

<sup>1</sup> EHRIntelligence.com is published by Xtelligent Media, LLC

<sup>2</sup> Kerry Bruning, RN, BSN, MBA, Director of Marketing for Sunrise Business Unit at Allscripts



## Medicare Eligible Professionals: Take Action by July 1 to Avoid 2016 Medicare Payment Adjustment

Payment adjustments for eligible professionals that did not successfully participate in the Medicare EHR Incentive Program in 2014 will begin on January 1, 2016. Medicare eligible professionals can avoid the 2016 payment adjustment by taking action by July 1 and applying for a 2016 hardship exception.

The hardship exception applications and [instructions](#) for an [individual](#) and for [multiple](#) Medicare eligible professionals are available on the [EHR Incentive Programs website](#), and outline the specific types of circumstances that CMS considers to be barriers to achieving meaningful use, and how to apply.

To file a hardship exception, you must:

- Show proof of a circumstance beyond your control.
- Explicitly outline how the circumstance significantly impaired your ability to meet meaningful use.

Supporting documentation must also be provided for certain hardship exception categories. CMS will review applications to determine whether or not a hardship exception should be granted.

You do not need to submit a hardship application if you:

- are a newly practicing eligible professional
- 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), and certain observation services using Place of Service 22; or

- Eligible professionals with certain PECOS specialties (05-Anesthesiology, 22-Pathology, 30-Diagnostic Radiology, 36-Nuclear Medicine, 94-Interventional Radiology)

CMS will use Medicare data to determine your eligibility to be automatically granted a hardship exception.

### **Apply by July 1**

As a reminder, the application must be submitted electronically or postmarked no later than **11:59 p.m. ET on July 1, 2015** to be considered.

If approved, the exception is valid for the 2016 payment adjustment only. If you intend to claim a hardship exception for a subsequent payment adjustment year, a new application must be submitted for the appropriate year.

In addition, providers who are not considered eligible professionals under the Medicare program are not subject to payment adjustments and do not need to submit an application. Those types of providers include:

- Medicaid only
- No claims to Medicare
- Hospital-based

### **Want more information about the EHR Incentive Programs?**

Visit the [EHR Incentive Programs website](#) for the latest news and updates on the programs.

**Note:** *The Hardship Application and process is handled entirely by CMS. TennCare has no connection to this program.*

## **2014 MU Attestation Year Coming To an End**

Due to the increased volume of attestations during the first quarter of 2015, the meaningful use pre-payment evaluation process has taken longer than usual. If you receive a return notice, please look for a **return by date** in the letter. Please try to return on or before this date. Quality Oversight would like to close out payment year 2014 by the end of June 2015. If you wish to schedule a technical assistance call to discuss the return issues, send an email with the provider name and NPI to [ehrmeaningfuluse.tennCare@tn.gov](mailto:ehrmeaningfuluse.tennCare@tn.gov) and request a call. Calls are scheduled for a time that is agreeable for both Quality Oversight and the provider.

If your meaningful use attestation has been returned due to a Stage 1 MU menu 9, immunization measure issue, when you re-attest you can provide information for Stage 1 immunization registry testing that was achieved in

2013 or 2014 to meet the 2014 requirements for this measure. However testing performed in 2015 **cannot be accepted** for payment year 2014 meaningful use attestations.

Exclusions can *only be claimed* when the measure specified criteria apply to the provider's scope of practice. **Exclusions cannot be claimed when a threshold or measure is not met.** When claiming exclusions, read the criteria carefully to assure you meet the specific criteria for the measure.

All meaningful use measures must be met to receive payment. Issues identified during the pre-payment evaluation that cannot be resolved will result in denial for meaningful use payment for the payment year. There are no Medicaid penalties for skipping years of meaningful use. However, if you are a provider that bills **Medicare**, you must demonstrate meaningful use to avoid **Medicare** payment adjustments. Please visit the CMS EHR Incentive Payment Adjusts & Hardship Exception page on the Internet at [http://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/PaymentAdj\\_Hardship.html](http://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/PaymentAdj_Hardship.html) for more information concerning Medicare payment adjustments and hardship exceptions.

If you should have any questions or would like to schedule a technical assistance call, please send a request to the TennCare EHR mailbox: [ehrmeaningfuluse.tennCare@tn.gov](mailto:ehrmeaningfuluse.tennCare@tn.gov).

## ONC – CHPL 4.0

The Office of the National Coordinator for Health IT (ONC) Certified HIT Product List (CHPL – pronounced 'Chapel') is the "authoritative, comprehensive listing" of CEHRT approved for use by providers participating in the EHR Incentive Program. Once CHERTs have been submitted and successfully tested and certified by an ONC-Authorized Certification Bodies (ONC-ACBs), it is placed on the CHPL list for use by providers. This is where providers obtain the CMS Certification Number for their CEHRT, which is required for attestation purposes.

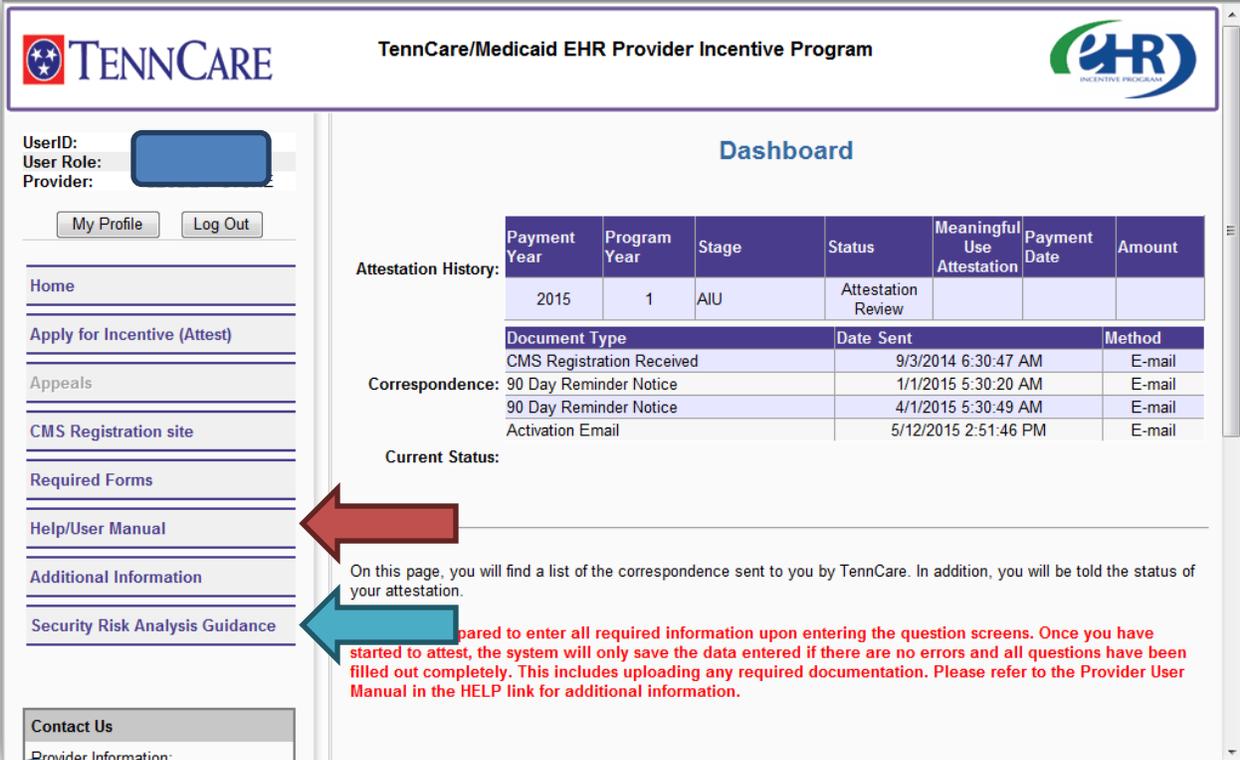
The CHPL web site has recently undergone an update (Version 4.0), designed to provide a more streamlined user interface and experience. This link - <http://www.healthit.gov/sites/default/files/policy/chpl40sidebysidecomparison52015.pdf> – will take you to an overview and explanation on how to use this revised web site. We highly recommend that you review this document before using CHPL. ONC makes the following statements at the end of this document.

Once the ID is generated a user can email or print the number for their records and safe keeping. The number is not saved in CHPL, so if a user needs to re-create the number for any reason all of the previously selected products must be selected again to generate the CMS EHR Certification ID again.

## Little Known Resources

There are a couple of resources of which we wanted to remind you. The first is PowerPoint Presentations which are primarily for first time attesters. It takes you step-by-step through the registration and attestation process. There are also a couple of presentations relating to attesting for meaningful use (MU). You can access these presentations through this link: [http://www.tn.gov/tenncare/ehr\\_page6.shtml](http://www.tn.gov/tenncare/ehr_page6.shtml).

Another resource for providers is found on **EACH** page of the PIPP portal, once you have logged into the portal. This appears on the left-side of the screen as “Help/User Manual” (red arrow). This is a manual that should answer most any question you may have about attesting, whether for AIU or MU. Of course, we are always available to answer your questions via email (see Contact Information at the end), but most likely you can find your answer in the User Manual.



**TennCare/Medicaid EHR Provider Incentive Program**

**Dashboard**

UserID:   
 User Role:   
 Provider:

Home

Apply for Incentive (Attest)

Appeals

CMS Registration site

Required Forms

Help/User Manual

Additional Information

Security Risk Analysis Guidance

Contact Us

Provider Information

Payment Year	Program Year	Stage	Status	Meaningful Use Attestation	Payment Date	Amount
2015	1	AIU	Attestation Review			

Document Type	Date Sent	Method
CMS Registration Received	9/3/2014 6:30:47 AM	E-mail
90 Day Reminder Notice	1/1/2015 5:30:20 AM	E-mail
90 Day Reminder Notice	4/1/2015 5:30:49 AM	E-mail
Activation Email	5/12/2015 2:51:46 PM	E-mail

**Current Status:**

On this page, you will find a list of the correspondence sent to you by TennCare. In addition, you will be told the status of your attestation.

**Prepared to enter all required information upon entering the question screens. Once you have started to attest, the system will only save the data entered if there are no errors and all questions have been filled out completely. This includes uploading any required documentation. Please refer to the Provider User Manual in the HELP link for additional information.**

One new resource for providers who are attesting for MU is a Security Risk Analysis (SRA) Guidance link (teal arrow). Each year, in which you attest, you are required to perform a SRA. Just because you have an ONC-certified EHR System, does not relieve you of the requirement of an annual SRA. The information here will assist you in the performing of this task.

 **Coming Up**

As both CMS and TennCare have reminded you, there are currently three rules out for public review and comment. These proposed rules are

- ❖ Medicare & Medicaid Programs; EHR Incentive Programs – Modifications to Meaningful Use in 2015 Through 2017; Posted April 15, 2015; Comments due June 15, 2015; *80 FR 20346*
- ❖ Medicare & Medicaid Programs; EHR Incentive Program – Stage 3; Posted March 30, 2015; Comments due May 29, 2015; *80 FR 16732*
- ❖ Medicare & Medicaid Programs; 2015 Edition Health Information Technology Certification Criteria, 2015 Edition Base EHR Definition, and ONC Health IT Certification Program Modifications; Posted March 30, 2015; Comments due May 29, 2015; *80 FR 16807*

This is your opportunity to speak up about the EHR Incentive Program and make comments about the proposed changes and others you would like to see.

Obviously these proposed rules will have an impact on the EHR Incentive Program in the coming months. When CMS issues the final rules, we will be reviewing those and provide you with an update on the impact each will have on your participation in the EHR Incentive Program.

One item we know now is that those who are scheduled to attest to the second year of MU or beyond **will not** be able to submit their attestations until January 1, 2016. Although CMS has announced that the MU attestation period for 2015 will be 90 days, neither CMS nor TennCare will accept those attestations until January. This will allow CMS & TennCare to get all of the changes incorporated into our systems.

**NOTE:** If you are attesting to AIU or first year MU, you can still submit your attestations during the 2015 calendar year. Only those beyond the first year of MU attestation cannot submit until January.



## 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](mailto:EHRMeaningfuluse.TennCare@tn.gov)
- ❖ For **all other questions**, send an email to [TennCare.EHRIncentive@tn.gov](mailto: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](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](http://www.tn.gov/tenncare/ehr_page6.shtml)

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(no subject) and **unsubscribe MedicaidHIT**

You will receive an email confirming your removal.

**To view previous** TennCare E-Newsletters, go to [http://www.tn.gov/tenncare/ehr\\_newsletters.shtml](http://www.tn.gov/tenncare/ehr_newsletters.shtml)