

### Incentive Payments

- The aggregate incentive amount to be paid over a three-year period is a one-time upfront calculation based on the CMS Final Program Rule.
- Payments will be distributed over a three-year period:
  - 50% of the aggregate incentive amount will be paid in participation year 1 for AIU
  - 40% of the aggregate incentive amount will be paid in participation year 2 for Meaningful Use
  - 10% of the aggregate incentive amount will be paid in participation year 3 for Meaningful Use
- Program spans 2011-2021, but hospitals must initiate payment by FFY 2016
- Participation years can be on a non-consecutive, annual basis prior to FFY 2016

### Payment Calculation

- The aggregate incentive amount is the total amount that the hospital could receive in Medicaid payments over a theoretical four years of the program. It is the product of two factors: 1) the overall Electronic Health Records (EHR) program amount multiplied by 2) the Medicaid share of discharges.
- Please visit the CMS website for details on how the hospital incentive payment is calculated:  
[http://www.cms.gov/MLNProducts/downloads/Medicaid\\_Hosp\\_Incentive\\_Payments\\_Tip\\_Sheets.pdf](http://www.cms.gov/MLNProducts/downloads/Medicaid_Hosp_Incentive_Payments_Tip_Sheets.pdf)

### Eligible Hospitals

- Acute Care, including Critical Access, and Cancer Hospitals – Medicaid Provider Type 201
  - Average patient stay 25 days or less
  - Claim Control Number (CCN) falls between 0001-0879 or between 1300-1399
  - Must meet 10% Medicaid patient volume
  - Must attest to AIU in payment year 1, except for dually eligible hospitals that meet Medicare Meaningful Use
- Separately Certified Children’s Hospitals – None in NM

### Adopt, Implement, Upgrade (AIU) Year 1

Hospitals can attest to adoption, implementation or upgrade of a certified EHR system, provide a CMS certification number (from the ONC website—see Important Links) of that technology for the first payment year, and provide one of the following documents:

- EHR Vendor invoice
- EHR Sales contract
- EHR Service/training contract

EHRs may attest to Meaningful Use in their first payment year, and must do so if attesting first in the Medicare EHR Program.

### Meaningful Use Years 2-3

Providers must attest to Meaningful Use of certified EHR technology. See the Meaningful Use page on the CMS website <http://www.cms.gov/EHRIncentivePrograms/>.

### Patient Volume Requirements

10% Medicaid patient volume for all patient encounters over a continuous 90-day period in the preceding federal fiscal year **OR** in the 12 months preceding the attestation date.

### Medicaid Encounters

Services rendered to an individual per inpatient discharge or services rendered in an emergency department on any one day to an individual where:

- Medicaid paid for all or part of the services, or paid for all or part of the premiums, co-pays, or other cost sharing
- Medicaid denied claims (zero paid) for any reason other than the patient is not enrolled in Medicaid
- May include SCI & CHIP encounters
- **Multiple services rendered by one EP to one individual on one day count as ONE encounter**

### Registration

Eligible Hospitals will need:

- National Provider Identification Number (NPI)
- Tax Identification Number (TIN)
- Provider Enrollment, Chain and Ownership System Number (PECOS)
- Hospitals that are eligible for EHR incentive payments under both Medicare and Medicaid should select **“Both Medicare and Medicaid”** during registration at [CMS Registration and Attestation system](#).
  - Hospitals that register only for the Medicaid program (or only the Medicare program) will not be able to manually change their registration (i.e., change to “Both Medicare and Medicaid” or from one program to the other) after a payment is initiated and this may cause significant delays in receiving a Medicare EHR incentive payment

### Important Links

Determine if you meet the eligibility requirements. Visit the CMS website at <http://www.cms.gov/EHRIncentivePrograms/>  
Get information on certified EHR systems by visiting <http://onc-chpl.force.com/ehrcert>

To get started on registration, visit the New Mexico Provider Outreach Page at <http://nm.arraincentive.com/default.aspx>

For complete program information and to view the Final Rule, visit <http://edocket.access.gpo.gov/2010/pdf/2010-17207.pdf>

### Additional Resources

For questions on the registration process, please call 1-800-299-7304.

### Important Date: December 29, 2013

To receive an incentive payment for FFY 2013, last day for Eligible Hospitals to attest is December 29, 2013.