

NEO HealthConnect Answers

April 2011

Attestation Has Begun!

Monday, April 18, was the first day Eligible Providers were able to attest to Meaningful Use on the CMS website. Reports of successful attestation have been released by hospital systems in Mansfield, Ohio, Newport News, Virginia and in Texas. Additionally, a family physician in Warwick, Rhode Island reported successful attestation on Monday. We anticipate successful attestations will take place in the NEO HealthConnect region in the very near future.

Preparing for Attestation

In an effort to assist practices and hospitals in successfully navigating the Medicare EHR Incentive Program, CMS has made several resources available:

- A new [attestation page](#) on the CMS EHR website, where participants in the Medicare EHR Incentive Program can find important information on attestation.
- The [Meaningful Use Attestation Calculator](#) allows EPs and eligible hospitals to check whether they have met meaningful use guidelines before they attest in the system. The calculator prints a copy of each EP's or eligible hospital's specific measure summary.
- The [Eligible Professional User Guide](#) and the [Eligible Hospital and Critical Access Hospital User Guide](#) provide step-by-step guidance for EPs and eligible hospitals on navigating the attestation system.

Additional resources will be coming soon:

- Attestation Worksheets for EPs and eligible hospitals allow users to fill out their meaningful use measure values, so they have a quick reference tool to use while attesting.
- Attestation Video Webinars will provide a video version of the user guides for EPs, eligible hospitals and CAHs. The videos show EP and eligible hospital representatives completing the attestation process.

If you are not ready to attest, follow these steps to participate in the programs:

- Make sure you're eligible for the EHR Incentive Programs. View eligibility guidelines at the [Eligibility Page](#) and select the program in which you want to participate.

- Get registered. Registration is open for EPs, eligible hospitals, and CAHs. Visit the [Registration Page](#) for more details.
- Use certified EHR technology. To receive incentive payments, make sure the EHR technology you're using or are considering buying has been certified by the Office of the National Coordinator for Health Information Technology. Visit the [Certified EHR Technology Page](#) for details.
- Be a Meaningful User. You have to successfully demonstrate "meaningful use" for a consecutive 90-day period in your first year of participation (and for a full year in each subsequent years) to receive EHR incentive payments. Visit the [Meaningful Use Page](#) to learn about meaningful use objectives and measures.
- Attest for incentive payments. To get your EHR incentive payment, you must attest through Medicare's secure website that you've demonstrated meaningful use with certified EHR technology.

IMPORTANT E-Prescribing Penalty Reminder

June 30, 2011: Claims-based reporting of 10 e-prescriptions required to avoid a 1% penalty on ALL 2012 Medicare billed charges.

December 31, 2011: Claims-based reporting of 25 e-prescriptions required to avoid a 1.5% penalty on ALL 2013 Medicare billed charges.

In the Final Rule published November 29, 2010, CMS announced that providers who fail to adopt and report the use of their e-prescribing system will be subject to a -1% payment adjustment (i.e., penalty) on their Medicare Part B Physician Fee Schedule (PFS) covered professional services for 2012. In order to avoid this payment adjustment, providers must report on their Medicare claims that they have completed e-prescriptions for a minimum of 10 patient encounters by June 30, 2011. Furthermore, to avoid the -1.5% payment adjustment for 2013, providers must report e-prescriptions for a minimum of 25 patient encounters by December 31, 2011. Claims-based reporting of eRx is required for providers to be exempt from the eRx payment adjustment. Achieving Meaningful Use as part of successful participation in the Medicare or Medicaid EHR Incentives programs does not exempt providers from the eRx payment adjustment.

If an eligible professional or selected group practice wishes to request an exemption to the eRx Incentive Program and the payment adjustment, there are two "hardship codes" that can be reported via claims should one of the following situations apply:

G8642 - The eligible professional practices in a rural area without sufficient high speed internet access and requests a hardship exemption from the application of the payment adjustment under section 1848(a)(5)(A) of the Social Security Act.

G8643 - The eligible professional practices in an area without sufficient available pharmacies for electronic prescribing and requests a hardship exemption from the application of the payment adjustment under section 1848(a)(5)(A) of the Social Security Act.

Additionally, Code G8644 can be used when the eligible professional does not have prescribing privileges. When this code is reported via claims, the eligible professional may not be considered for a payment adjustment.

For additional information or e-prescribing resources, please contact NEO HealthConnect at 330-599-4595.

Free REC Services Update

As of April 21, NEO HealthConnect has only 137 slots remaining for free REC Services. Fourteen of those positions have been committed to practices and contracts will be finalized shortly. If you or any of your colleagues are pursuing EHR adoption or need assistance with meaningful use requirements, please contact NEO HealthConnect at 330-599-4595.

NEO HealthConnect, Inc.
241 West Federal Street
Youngstown, Ohio 44503
(330) 599-4595

About NEO HealthConnect, Inc.

NEO HealthConnect is a sub-recipient of the Ohio Health Information Partnership (OHIP). OHIP is funded through the Office of the National Coordinator, Department of Health & Human Services, grant number 90RC0012/01.