



STATE OF MARYLAND
DHMH

Maryland Department of Health and Mental Hygiene

201 W. Preston Street • Baltimore, Maryland 21201

Martin O'Malley, Governor – Anthony G. Brown, Lt. Governor – Joshua M. Sharfstein, M.D., Secretary

December 18, 2012

Maryland Electronic Health Record Incentive Program Registrant:

From **Wednesday, December 19th through Thursday, December 20th**, Maryland's EHR Incentive Program Registration and Attestation System, eMIPP, will be unavailable. During this time, Maryland will be updating eMIPP to allow for Meaningful Use attestations. On Friday, December 21st, Maryland will allow all eligible providers and hospitals to register and attest for either adopt, implement, or upgrade (AIU) or for meeting Stage 1 Meaningful Use.

Guidance for Participating in Year 2 of Maryland's EHR Incentive Program

As you prepare for registration and attestation, either for your first or second year, please be aware of the following items:

1. On Friday, December 21st, every provider who has already participated in Year 1 of Medicaid's EHR Incentive Program will be notified via e-mail that they have been automatically enrolled for Year 2 in the Maryland Medicaid EHR Incentive Program. This means that you will not need to return to CMS to register to participate with the State for Year 2. Although you have been automatically enrolled, you will still need to [log into eMIPP](#) and attest with the State.

Providers who have not registered with the State but have successfully enrolled with CMS for participation in the Medicaid EHR Incentive Program, will receive a welcome e-mail with instructions for completing State registration and attestation.

2. Maryland has extended the deadline for registration and attestation for eligible providers until March 31, 2013. This means that if eligible providers successfully register with Maryland before March 31, 2013, they will receive an incentive payment for calendar year 2012.

If you are entering patient volume information between January 1, 2013 and March 31, 2013 and you would like to participate in the EHR Incentive Program for calendar year 2012, you

must choose a 90-day period in calendar year 2011. In addition, for providers participating in Stage 1 Meaningful Use, your 90-day reporting period must be within calendar year 2012.

3. Please read Maryland's updated [User Guide](#) before attempting to register and attest with the State. The User Guide is available at the bottom of our [homepage](#).
4. To demonstrate Stage 1 of Meaningful Use, eligible professionals and hospitals must meet a specified number of "core" and "menu" set objectives defined by CMS. Within the "menu" set objectives, eligible professionals and hospitals must choose at least one Public Health objective. The Public Health measure requires that a single test be performed, and if successful, that transmission should continue if Public Health is ready to continue receipt. It is not necessary for the test to succeed in order to meet the Stage 1 Meaningful Use Public Health measure.

Maryland is accepting all public health test files for the purposes of providers and hospitals meeting Stage 1 of "Meaningful Use." Thus, providers and hospitals cannot claim an exclusion.

Due to the volume of providers attempting to test with the State, Maryland will allow providers to select "Yes" to meeting a public health objective if the provider has either:

- (1) Successfully tested with the State and received either an e-mail or a letter confirming the test; **OR**
- (2) Followed all of the instructions detailed under the subheading "Public Health Objectives" at the bottom of our ["Meaningful Use" instructional webpage](#) to signal your intent to test with the State. Please do not overlook the final step in signaling your intent to test with the State: completing our [Meaningful Use Public Health Measure Survey](#).

As long as a provider or hospital follows ALL of the instructions listed, **specifically completing the Meaningful Use Public Health Measure Survey**, Medicaid will consider you contingently compliant with meeting a public health measure. However, if, when Medicaid contacts you for testing and you cannot submit a public health test file in a reasonable amount of time, the State will consider you non-compliant with the measure and will reject your Meaningful Use attestation.

5. Hospitals will have until December 31, 2012 to submit for Federal Fiscal Year 2012 incentives. For hospitals trying to attest with the State for their second year only, please submit your attestations to the State. We will follow up with you in January to discuss your incentive payment. For all other hospitals, please continue to notify the State via our email (dhmh.MarylandEHR@maryland.gov) of your intent to either begin participation or to continue your participation in the Maryland Medicaid EHR Incentive Program.

Immediate Changes to Maryland’s EHR Incentive Program as a Result of Stage 2 Federal Rule Making

On September 4, 2012, the Centers for Medicare and Medicaid Services (CMS) released the Final Rule for Stage 2 of the Electronic Health Record (EHR) Incentive Program. In the [Final Rule](#), CMS specified the criteria for Stage 2 of Meaningful Use as well as made changes, or provided States with options to modify, their EHR Incentive Program. This update provides information to Eligible Providers and Eligible Hospitals about changes that will be available to providers beginning on January 1, 2013. Maryland Medicaid will be working with CMS in the upcoming months to make required changes to the Program and to explore additional options afforded to the State under the Final Rule.

The following changes will be made available to Eligible Providers participating in the Maryland Medicaid EHR Incentive Program beginning on January 1, 2013. These changes will apply to providers participating in Adopt, Implement, or Upgrade (AIU), Stage 1, Stage 2, and all future stages.

Program Area	Before January 1, 2013	On January 1, 2013 and Beyond
Definition of a Medicaid Encounter	Services rendered on any one day to an individual where Medical Assistance <i>paid</i> for part or all of the service or their premiums, co-payments and/or cost-sharing.	Services rendered on any one day to an individual <i>enrolled</i> in a Medical Assistance program. Zero-paid encounters can now be included in the patient volume calculations.
Children’s Health Insurance Program (CHIP) encounters	Only encounters rendered in a Federally Qualified Health Center (FQHC) or Rural Health Center (RHC) could count CHIP encounters towards their patient volume.	All providers can count CHIP encounters towards their patient volume. This means the standard CHIP deduction is waived.

Thank you for your patience and your commitment to improving the quality of health care in Maryland.

Regards,

EHR Incentive Program Team

Website: <http://mmcp.dhmf.maryland.gov/ehr/SitePages/Home.aspx>

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