HRSA: Medicare and Medicaid EHR Incentive Programs FQHCs' FAQs

Eligibility Questions:

Q: Who qualifies as an Eligible Professional?
A: Please see http://www.cms.gov/EHRIncentivePrograms/15_Eligibility.asp#TopOfPage for more information on eligibility for both the Medicaid and the Medicare EHR Incentive Programs.

Q: Can each Eligible Professional in an FQHC apply separately for the Electronic Health Record (EHR) incentive payments and are FQHCs and Rural Health Clinic eligible for Electronic Health Record (EHR) incentive payments?
A: Yes, the incentive program is per professional. Each eligible professional applies for the incentive program individually and can then choose to assign their funds to the FQHC at which they work or to another qualified entity. The FQHC does not apply for the incentive payments—the program is designed to be an *incentive* program rather than a reimbursement program. FQHCs and RHCs are not eligible for EHR incentive payments, however, Eligible Professionals can voluntarily choose to reassign their incentive payment to the FQHC or RHC.

Q: Are Physician Assistants considered Eligible Professionals, if they are based in a FQHC?
A: If the FQHC where the Physician's Assistant is working is led by a Physician Assistant then the Physician Assistants are considered eligible professionals under the Medicaid EHR Incentive Program. A FQHC is considered so led by a Physician Assistant when: (1) When a PA is the primary provider in a clinic (for example, when there is a part-time physician and full-time PA, we would consider the PA as the primary provider); or (2) When a PA is a clinical or medical director at a clinical site of practice

Q: Will resident physicians be eligible to participate in the Medicare and Medicaid Electronic Health Record (EHR) Incentive Programs?
A: For the Medicaid EHR Incentive Program, all eligible professionals must meet their State's scope of practice rules to participate. For physicians, this typically includes education, licensure, and board certification. For the Medicare EHR Incentive Program, the incentives are based on Part B allowed charges on the Medicare Physician Fee Schedule. Unless a resident meets all scope of practice requirements and has Part B allowed charges, they would not qualify for the Medicare EHR incentives.

Incentive Payments:

Q: Why do incentive payments go to EPs and not their clinic?
A: The term "eligible professional" was statutorily defined. The EHR incentive program is meant to be an incentive program for the meaningful use of EHRs, not a reimbursement program. EPs may re-assign their incentive payments to their employer, but the re-assigning of their payments is voluntary. Please see http://www.nachc.com/client/documents/10.10%20EHR%20Incentive%20Contracting%20Issue%20Brief%20-%20FINAL.pdf for additional information.

Q: When will registration open up for the program?
A: Registration for the Medicaid EHR Incentive Program began January 3, 2011. However, each State decides their launch date. Please see http://www.cms.gov/apps/files/medicaid-HIT-sites/ for a map and listing of States' estimated launch date. Medicare's EHR Incentive Program launched provider registration on January 3rd as well and began provider attestation on April 18, 2011.

Q: If an Eligible Professional moves from one FQHC in year two to another FQHC in year three, how will the yearly funding be distributed?
A: Eligible Professionals must qualify for the program on an annual basis. Each year, the Eligible Professional may modify to which tax ID number they want their incentive payment made.

Other:

Q: Is the Provider Enrollment Chain and Ownership System (PECOS) updated so that EPs working in FQHCs can now go online and sign up?
A: Medicaid Eligible Professionals are not required to enroll in PECOS. Medicare Eligible Professionals, Eligible Hospitals and CAHs, and Medicaid hospitals are required to be enrolled in PECOS in order to receive an EHR Incentive Payment. Enrollment in PECOS is completed at PECOS Enrollment. Please see https://pecos.cms.hhs.gov/pecos/login.do for additional information. All eligible providers for both EHR incentive programs need a National Provider Identifier (NPI), and a web user account in the National Plan and Professional Enumeration System (NPPES). Please see registration user guide https://www.cms.gov/EHRIncentivePrograms/Downloads/EHRMedicaidEP_RegistrationUserGuide.pdf for additional information on how to get started.

Q: What is a certified EHR under the EHR Incentive Programs?
A: The Medicare and Medicaid EHR Incentive Programs require the use of certified EHR technology. Standards, implementation specifications, and certification criteria for EHR technology have been adopted by the Secretary of the Department of Health and Human Services. EHR technology must be tested and certified by an Office of the National Coordinator (ONC) Authorized Testing and Certification Body (ATCB) in order for a professional to qualify for EHR incentive payments.

- As of January 2011, seven States have already made millions in payments for Medicaid EHR incentives to providers who successfully adopted, implemented or upgraded to certified EHR technology. If the vendor has submitted their EHR technology to an ONC Authorized Testing and Certification Body (ATCB) and the ATCB has certified their EHR technology, then the product will comply with Meaningful Use Criteria.
- Please see http://onc-chpl.force.com/ehrcert for the Certified HIT Product List (CHPL).

Q: Can an Eligible Professional receive an EHR Incentive Payment if they are using an EHR that is not certified for Meaningful Use?
A. No.

Q: If an eligible professional designates an entity (e.g., their employer) to receive their incentive payment, is the payment reported to the IRS as paid to that entity, thus relieving the eligible professional of the obligation to pay taxes on the payment he/she has assigned to another?
A. Yes. All IRS rules for taxes apply to this program the same way as any other income. Please see http://questions.cms.hhs.gov/app/answers/detail/a_id/10138/kw/tax/session/L3NpZC9zQkM0empy aw%3D%3D for additional information.

Community Health Center Questions:

Q: When can the incentive money be expected after eligible professionals register and how do we find out the status of the meaningful use implementation specific to our State Medicaid program?
A. Each State's timeline will differ depending on their readiness. States must begin issuing payments within five months of their program launch, however some are paying much faster. Please see http://www.cms.gov/apps/files/medicaid-HIT-sites/ for a map and listing of States' estimated launch dates. As of April 2011, thirteen States have launched their Medicaid EHR Incentive Programs and seven are already making incentive payments.

Q: Are there any differences in Meaningful Use as far as dentists go?
A. Yes, some Meaningful Use objectives are not applicable to dentists, e.g. immunizations. Meaningful Use objectives can vary depending upon the Eligible Professional. Eligible professionals should consult the CMS final rule to determine which meaningful use objectives permit exclusions.

Q: If Eligible Professional's have to report on 20 of 25 MU objectives, can these 20 vary for Eligible Professionals across one health center?
A: Yes, Stage 1 of meaningful use is measured by individual eligible professional, not at the group practice level. Therefore, different eligible professionals may select different meaningful use measures within one health center.

Q: If a physician worked for the health center as her only employment in 2010 and then left the health center in 2010, is that person an eligible professional?
A. Eligibility is determined at the time the eligible professional is attesting to the program, based upon multiple criteria. Some of the criteria take the prior calendar year into account, while others are current. Please see
http://www.cms.gov/EHRIncentivePrograms/15_Eligibility.asp#TopOfPage for more information on eligibility for both the Medicaid and the Medicare EHR Incentive Programs.

Q: How do FQHCs make sure that the incentive payments go to the FQHC and not the professional? In our newer contracts, we have a provision that covers this, but we have some legacy contracts that don't address incentive payments from payers.
A. Eligible professionals may assign the incentive payment to the FQHC, if they choose. CMS cannot address employment contracts between professionals and the FQHC. Please see http://www.nachc.com/client/documents/10.10%20EHR%20Incentive%20Contracting%20Issue %20Brief%20-%20FINAL.pdf for additional information.

Q: Can an eligible professional be eligible if he/she works part-time at a FQHC?
A: Yes. Part-time versus full-time status is not considered in determining eligibility.   Please see http://www.cms.gov/EHRIncentivePrograms/15_Eligibility.asp#TopOfPage for more information on eligibility for both the Medicaid and the Medicare EHR Incentive Programs

Q: Who qualifies to receive compensation for implementation of Meaningful Use?
A. Please see http://www.cms.gov/EHRIncentivePrograms/30_Meaningful_Use.asp#TopOfPage for more information about who is eligible for the EHR incentives.

Q: Where can I find a concise timeline of Meaningful Use implementation?
A. The CMS EHR Incentive Program Website. Please see http://www.cms.gov/EHRIncentivePrograms/30_Meaningful_Use.asp#TopOfPage for more information.

Q: If I am a small FQHC, do I have to implement the same way that larger centers implement?
A. Yes, for eligible professionals to qualify for the EHR Incentive Program, you must adopt, implement, upgrade, or meaningfully use certified EHR technology. The rules are not different for eligible professionals in different size practices.

Q: Will CMS make each state Medicaid agency's HIT plan available to the public?
A. States should make the latest approved version available to the public on their State Medicaid agency website.

Primary Care Association (PCA) Questions:

Q: Will CMS make a public list of individuals or organizations that have implemented an EHR in each state?
A: Not for Medicaid, but CMS will publicly post the providers that receive a payment (and are therefore meaningful users of certified EHR technology) in the Medicare EHR Incentive Program, as required by law.

Project Officer Questions:

Q: Is there any technical assistance available for HRSA grantees that are just beginning the process of EHR adoption/implementation and wish to comply with meaningful use?
A. Yes, below is a list of resources:

- The EHR Incentive Program Website: is http://www.cms.gov/EHRIncentivePrograms/

- The Electronic Health Record (EHR) Information Center is open to assist the EHR Professional Community with inquiries. EHR Information Center Hours of Operation: 7:30 a.m. – 6:30 p.m. (Central Time) Monday through Friday, except federal holidays. 1-888-734-6433 (primary number) or 888-734-6563 (TTY number)

- **Regional Extension Centers (REC):** ONC has contracted with 62 Regional Extension Centers (REC) for 2 years to provide technical assistance on EHR adoption and implementation process. REC information can be found at: http://healthit.hhs.gov/rec

- **Primary Care Association (PCA):** are private, non-profit organizations that provide training and technical assistance to health centers and other safety-net providers, support the development of health centers in their state, and enhance the operations and performance of health centers. PCA information for your state/region can be found at: http://bphc.hrsa.gov/technicalassistance/partnerlinks/associations.html

- **Beacon Community Program:** ONC has funded the Beacon Community Program for communities to build and strengthen their health information technology infrastructure and exchange capabilities. There are 17 Beacon Communities in the U.S. and more information can be found at: http://healthit.hhs.gov/beacon

- **State Health Information Exchange Cooperative Agreement Program:** ONC has funded the State Health Information Exchange (HIE) Program to support state or state designated entities (SDEs) in establishing health information exchange (HIE) capability among healthcare providers and hospitals in their jurisdictions. State HIE information can be found at: http://statehieresources.org/state-plans

- **Health Center Controlled Networks (HCCNs):** Led by HRSA-funded health centers, HCCNs support the creation, development, and operation of networks of safety net providers to ensure access to health care for the medically underserved populations through the enhancement of health center operations, including health information technology. HCCN information can be found at: http://findanetwork.hrsa.gov/Search_OHIT.aspx and http://www.hrsa.gov/healthit/toolbox/HealthITAdoptiontoolbox/OpportunitiesCollaboration/controlnetworks.html

- Additional HRSA Grantee TA for HIT can be found at: http://www.hrsa.gov/healthit

- Please contact your HRSA Project Officer for additional information.

Q: What are resources (websites, regulating bodies, publications, etc.) that can provide information to health centers on the benefits of meaningful use as well as how best to achieve the standards?
A: The EHR Incentive Program Website has information on meaningful use at
http://www.cms.gov/EHRIncentivePrograms/30_Meaningful_Use.asp#TopOfPage . You can also find information on meaningful use in the Final Rule which can be found at the EHR Incentive Program Website under Related Links Outside of CMS
http://www.cms.gov/EHRIncentivePrograms/.

Q: Where can I find the actual language for the HITECH law and the CMS and ONC final rules?
A: A link to the HITECH Act and the CMS and ONC Final Rules can be found at the EHR Incentive Program website: http://www.cms.gov/EHRIncentivePrograms/ under "Related Links Outside of CMS".

Q: How will Eligible Professionals (EPs) apply for incentives under the Medicaid Electronic Health Record (EHR) Incentive Program?
A: EPs must complete the registration process by going to the following website:
 http://www.cms.gov/EHRIncentivePrograms/20_RegistrationandAttestation.asp#TopOfPage

Q: When must certified EHRs be implemented and meaningfully used?
A. Please visit http://www.cms.gov/EHRIncentivePrograms/35_Basics.asp#TopOfPage for more information.

Q: How much is available in the Medicaid EHR Incentive Program?
A. For calendar years 2011–2021, eligible professionals can receive up to $63,750 over 6 years under the Medicaid EHR incentive program. Please visit
http://www.cms.gov/EHRIncentivePrograms/35_Basics.asp#TopOfPage for more information.

Q: What will it cost a FQHC to implement certified EHR technology?
A. It depends entirely upon the certified EHR technology purchased, as well as the implementation and training costs. CMS estimated that the cost will be approximately $54,000 per eligible professional, based on a variety of studies.

ADDITIONAL QUESTIONS FROM OHITQ:

Q: Will CMS provide Meaningful Use measure data it collects to other entities within or external to the Department?
A. Yes, CMS will provide summary data as available.

Q: How will I know how the data from my FQHC participating Eligible Professionals compares to other FQHCs across the State, etc.?
A. We encourage FQHCs, primary care associations, etc. to partner with State Medicaid Agencies to develop this kind of on-going feedback loop.

Q: What if my health center does not adopt, implement, or upgrade in year one?
A. Eligible providers may adopt, implement, upgrade, or meaningfully use certified EHR technology in their first participation year. The last year to begin participation in the Medicaid EHR Incentive Program is 2016.

Q: My FQHC has specialists on site- can they be an eligible professional for Meaningful Use?
A. Yes, if they qualify based on all of the eligibility criteria. Please see http://www.cms.gov/EHRIncentivePrograms/15_Eligibility.asp#TopOfPage for more eligibility information.

Q. What are the key components of a State Medicaid HIT Plan that can vary according to the State with approval from CMS that I should be aware of for my health center?
A. The State Medicaid Health Information Technology Plan (SMHP) describes the State's current and future Health IT activities, as well as the path between, in support of the Medicaid EHR Incentive Program. There is a great deal of latitude for States in various aspects of the program, including but not limited to: patient volume methodologies, hospital-based eligible professional determinations, meaningful use, and payment disbursement. Please visit http://www.cms.gov/EHRIncentivePrograms/40_MedicaidStateInfo.asp#TopOfPage to see the SMHP template in the "Downloads" section.

QUESTIONS FROM HRSA'S OFFICE OF REGIONAL OPERATIONS (ORO)

Q: What is a Regional Extension Center?
A. A Regional Extension Center (REC) is an entity funded by the Office of the National Coordinator for Health Information Technology (ONC). The RECs will support and serve health care professionals to help them quickly become adept and meaningful users of electronic health records (EHRs). RECs are designed to make sure that primary care clinicians get the help they need to use EHRs. RECs will:

- Provide training and support services to assist doctors and other professionals in adopting EHRs
- Offer information and guidance to help with EHR implementation
- Give technical assistance as needed

The goal of the program is to provide outreach and support services to at least 100,000 priority primary care professionals within two years. Please visit http://healthit.hhs.gov/portal/server.pt?open=512&objID=1495&parentname=CommunityPage&parentid=58&mode=2&in_hi_userid=11113&cached=true for more information on RECs.

Q: Which Regional Extension Center do we contact for assistance?
A. The one closest to you. For a list of Regional Extension Centers and contact information please visit
http://healthit.hhs.gov/portal/server.pt?open=512&objID=1495&parentname=CommunityPage&parentid=58&mode=2&in_hi_userid=11113&cached=true .

Q: What happens to the EHR Incentive Payments if two or more independent FQHC organizations merge into a new FQHC business entity?
A. The EHR Incentive payments are not based upon the business model of the FQHC. It is based upon the Eligible Professional. The EHR Incentive Payment will be paid to the Eligible Professional unless the Eligible Professional reassigns the payment to the FQHC.