February 11, 2019

Program Year 2018 Opening March 18th

The Department of Health Care Policy and Financing (the Department) is pleased to announce that the Colorado Medical Assistance Provider Incentive Repository (MAPIR) will be available and accepting Medicaid Eligible Professional, Eligible Hospital and Critical Access Hospital attestations for Program Year (PY) 2018 beginning March 18, 2019 and closing June 7, 2019. The Department is eager to have providers attest for PY 2018 and wants them to succeed in their attestation submissions.

The Department encourages participants to start preparing to make attesting as smooth as possible. Workbooks, overview sheets, checklists available and EP attestation schedule for PY 2018 are published on the [CORHIO website](#).

2018 Program Requirements

For PY 2018, participants have the option to select Modified Stage 2 Objectives or Stage 3 Objectives. If you are unsure as to what stages are available to you, to attest to Stage 3 you must have the correct Certified Electronic Health Record Technology (CEHRT) edition of 2015 edition or a combination of 2014 and 2015. Otherwise, the only other option available is to attest to the Modified Stage 2 Objectives. The overview sheets for [Modified Stage 2](#) and [Stage 3](#) Objectives are available on the CORHIO website for all participants.

PY 2018 Reporting and Clinical Quality Measures (CQMs) Requirements
For PY 2018, Eligible Professionals must demonstrate a continuous 90-day period between January 1, 2018 and December 31, 2018 of Meaningful Use data (reporting period).

PY 2018 CQMs will require a full calendar-year reporting and first-time meaningful users must report on a continuous 90-day CQM reporting period.

Eligible Professionals must report 6 [CQMs](#) however, these no longer need to cover 3 of the National Quality Strategy Domains. They do require the following:

- They must be related to the EPs scope of practice
- EPs are required to report on at least one outcome measure
- If no outcome measures are relevant to that EP, they must report on at least one high-priority measure
- If there are no outcome or high priority measures relevant to an EP's scope of practice, they must report on any six relevant measures.

New Document Required for Upload

A new document requirement for Program Year 2018 has been added to the checklist available on the [CORHIO website](#). The Remittance Advice required for upload into the MAPIR system will correspond with the continuous 90-day period participants select for their eligibility period. To find more information regarding Remittance Advice, please see the [EP Attestation Schedule](#).

Program Year 2017 Payments

All PY 2017 incentive payments are nearly complete. If you're expecting an incentive payment for PY 2017 but have not received it, please contact [medicaidEHR@corhio.org.](mailto:medicaidEHR@corhio.org)

Tips for Supporting Clinical Decision Support Measure

Clinical Decision Support (CDS) has two measures that must be supported by documentation to meet requirements for Meaningful Use.

Measure 1 – Implement 5 CDS interventions related to four or more CQMs at a relevant point in patient care for the entire reporting period. Absent 4 CQMs related to an EP's scope of practice or patient population, the CDS interventions must be related to high-priority health conditions.

Measure 2 – The EP has enabled and implemented the functionality for drug-drug and drug-allergy interaction checks for the entire reporting period.

Participants can use screen shots during their selected reporting period time stamped for supporting documentation for CDS. All participants should make sure to include all 5 CDS interventions using time stamped screenshots. But using just screenshots alone will not fully support the documentation. Contacting your vendor and gathering documentation showing the functionality for CDS is turned on and not just reporting will help support documentation for the CDS measures.

MAPIR Update

The MAPIR system will not prompt participants to submit a full calendar-year (CY) of CQM data. This will require all participants to upload two dashboard reports—one showing a continuous 90-day reporting period and the other showing full CY CQM data. Remember to indicate which dashboard report has full year CQM data and which will have the continuous 90-day reporting period.

For questions regarding program requirements, eligibility and Meaningful Use, contact:

Medicaid EHR Incentive Program Coordinator
Kelly Hernandez
(720) 285-3232
MedicaidEHR@corhio.org

Medicaid Program Point of Contact and Partnerships

The Department of Health Care Policy and Financing has partnered with CORHIO to provide program coordination and assist with provider communications and outreach regarding the Medicaid EHR Incentive Program. The Medicaid EHR Incentive Program Coordinator is the central point of contact for EPs, EHs, partners and other interested parties regarding requirements and processes. Inquiries concerning the Medicaid EHR Incentive Program can be sent to MedicaidEHR@corhio.org or by calling (720) 285-3232.