July 8, 2020

Program Year 2019 Success
Congratulations to the 38 participants who completed the final payment year 6 in the Medicaid EHR Incentive Program! Overall, 498 participants have successfully attested to Program Year (PY) 2019. The Department of Health Care Policy and Financing (the Department) has paid over $4,000,000 in incentive payments.

Pre-Payment Audits
Currently, some participants are being contacted regarding pre-payment audits from Myers and Stauffer LC (MSLC). To ensure participants and auditors are communicating successfully, it is important to read emails from MSLC in their entirety, including subject lines, so you are aware of what documentation the email is referencing.

When responding to MSLC, remember to be clear and concise. Please check clutter and junk email boxes for communications that could affect your recoupment of incentive payments. It is important to respond in a timely manner to Myers and Stauffer, but if you need clarification or an extension to a deadline, please reach out as soon as possible, directly to coloradoehr@mslc.com, not the Medicaid EHR Incentive Program Coordinator.

Preparing for Future Program Years
Now that PY 2019 has concluded, it is time to focus on preparing for the next two consecutive program years, 2020 and 2021. Although the Department has not announced the dates for opening and closing for PY 2020 and PY 2021, here are some tips to help you understand requirements and begin preparation.

- Participants must attest with 2015 edition Certified Electronic Health Record Technology.

- Participants who skipped program years in the past are still eligible to attest but must meet requirements.

- The Centers for Medicare and Medicaid Services (CMS) has released guidance on the allowance of telehealth encounters for the eligible professional for electronic Clinical Quality Measures (eCQMs).

Here is a quick overview of requirements and tips for PY 2020 and need to know for PY 2021.

PY 2020 Requirements
Participants will attest to the following sets of measures:
1. Objectives and Measures - participants will report on stage 3 measures for any consecutive 90 days in calendar year 2020. The last reporting period for Program Year 2020 is October 3 - December 31, 2020.

2. eCQM participants will report on these measures for any consecutive 90 days in calendar year 2020.The eCQM reporting period is a minimum and participants are encouraged to report on a longer period if possible.
Participants are required to report on any six eCQMs related to their scope of practice. At least one measure reported must be an outcome measure, if any are relevant. If no outcome measures are relevant, at least one measure must be a high-priority

measure. If there are no outcome or high-priority measures relevant to the scope of practice, you must report on any six relevant measures.

Changes to eCQMs for PY 2020
Here are the eCQMs that were **removed** from the list of available eCQMs for Program Year 2019:

• CMS 52 HIV/AIDS: Pneumocystis Jiroveci Pneumonia (PCP) Prophylaxis

• CMS 82 Maternal Depression Screening

• CMS 132 Cataracts: Complications within 30 Days Following Cataract Surgery Requiring Additional Surgical Procedures

• CMS 160 Depression Utilization of the PHQ-9 Tool

Below is a **newly** added eCQM for Program Year 2020:

• CMS 771 International Prostate Symptom Score (IPSS) or American Urological Association-Symptom Index (AUA-SI) Change 6-12 Months After Diagnosis of Benign Prostatic Hyperplasia

All participants should review their Certified Electronic Health Record Technology (CEHRT) to verify which eCQMs are available in their system.

The list of available eCQMs for Eligible Professionals in the Medicaid EHR Incentive Program has aligned with the list of eCQMs for Eligible Clinicians participating in the Medicare Quality Payment Program (MIPS). To review the list of eCQMs please follow this link.

PY 2021 Requirements
The Meaningful Use reporting period and eCQM reporting periods for PY 2021 will be a minimum of any continuous 90-day period within the 2021 Calendar Year (CY). Because all Medicaid EHR Incentive Program payments (also known as Promoting Interoperability Programs) are mandated to occur by December 31, 2021, the end date for reporting periods in calendar year 2021 **must** fall before October 31, 2021. Participants will need to adjust their reporting period accordingly.

Participants may conduct a security risk analysis (SRA) at any time during CY 2021, even if conducted after submitting the attestation. Any participant who has not completed an SRA for CY 2021 by the time they attest to PY 2021 will be required to attest to a completed SRA by December 31, 2021. This allows for maximum flexibility for participants to attest and meet the SRA requirements for PY 2021. Remember, all Medicaid EHR Incentive Program payments must be issued by December 31, 2021.

Resources
Look for new updated PY 2020 and PY 2021 documents and webinars to be published on the CORHIO website soon. Keep in mind required documents change for each program year and past workbooks are not applicable for future program years. Check your inbox for email alerts when PY 2020 information and documents are published.

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.