

Provider Newsletter



Maximum Medicaid EHR Incentive Payment Still Available

While the Illinois Department of Healthcare and Family Services (HFS) deadline to register and attest for the Electronic Health Record (EHR) Provider Incentive Payment (PIP) Program in program year 2011 has passed, eligible professionals who wish to participate can still receive the maximum incentive payment.

In fact, eligible professionals can begin the program as late as 2016 and still receive the maximum amount of \$63,750 over six years prior to the program's final year in 2021. An eligible professional is a physician, nurse practitioner, certified nurse-midwife or a dentist. HFS has also received approval to include optometrists as an eligible provider for this program. A physician assistant can qualify as an eligible professional if the physician assistant works at a Federally Qualified Health Center (FQHC) or Rural Health Center (RHC) that is led by a physician assistant and meets the program requirements.

The HFS deadline to register and/or attest for program year 2011 was March 31, 2012. For the Medicaid incentive payment program, it is not necessary for eligible professionals to attest to the meaningful use criteria in their first year of incentive program. Instead, eligible professionals must attest to either having adopted, implemented or upgraded certified EHR technology.

The Illinois Health Information Technology Regional Extension Center (ILHITREC) and the Chicago Health Information Technology Regional Extension Center (CHITREC) were established to help medical practices achieve meaningful use of EHR. CHITREC and ILHITREC have put together teams of

experts who can help providers meet meaningful use requirements related to the selection, implementation and use of EHR, and improve the quality and efficiency of care for their patients.

A federal grant funds the Regional Extension Centers which in turn offer subsidized services to providers who qualify. ILHITREC director Roger Holloway estimated the value of ILHITREC's services to be \$5,000 per provider.

Holloway said that the purchasing and implementing of EHR is not only a significant financial investment, but a radical change in how a practice operates. Achieving meaningful use requires that providers and staff make some fundamental shifts in workflows.

"If you're signing up just for the incentive money, stop now," said Holloway, who said ILHITREC has assisted more than 1,300 providers.

"This will change the way (providers) practice healthcare, particularly primary care."

In March, HFS paid more than \$24 million in Medicaid EHR incentive payments representing payments to more than 450 eligible providers. HFS is currently performing a mandatory pre-payment audit on approximately 1,878 attestations submitted for payment year 2011.

HFS is accepting attestations for the first payment (for adopt/implement/upgrade) for program year 2012 and will continue to accept attestations for program year 2012 through March 31, 2013. HFS is working on the attestation application for the second payment for Stage 1 meaningful use criteria. This application is expected to be

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completed and ready for use prior to the end of 2012. The specifications for the meaningful use measures are found at the following federal Centers for Medicare & Medicaid Services (CMS) Web site: www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/MeaningfulUse.html.

Illinois Health Connect (IHC) and HFS encourage all providers interested in registering and attesting for the incentive program to review the resources available on www.hfs.illinois.gov/ehr. Providers can read a summary of the incentive program, review a frequently asked questions document, use an eligibility wizard, see the list of certified EHR technology, determine how to calculate their patient volume, as well as access the CMS Web Site to get started with registration.

There are six steps in the HFS Path to Payment. **Step one** is to register for the Medicaid EHR Incentive Program Registration and Attestation System at <https://ehrincentives.cms.gov/hitech/login.action>. In **step two**, HFS will receive registration from CMS. HFS will then contact the provider via E-Mail for **step three** with one of three responses: 1) instructions for accessing MEDI and attestation; 2) prerequisites have not been met; 3) provider not eligible.

To meet the prerequisites, the provider must be enrolled with HFS, be active with HFS, and have a provider/payee combination that is valid.

In order to use MEDI (www.myhfs.illinois.gov) to complete attestation, the user will need to be registered as a MEDI administrator or registered as an employee for the provider in question. Providers can only have two active MEDI administrators but can have an unlimited number of employees who are authorized to attest for this program on the provider's behalf. If you need assistance with MEDI registration, please contact your IHC Provider Services Representative or the IHC Provider Services Help Desk at 1-877-912-1999, extension 3.

Once HFS has sent attestation instructions, **step four** is using MEDI to attest. If requested, **step five** is the provider sending additional documentation to HFS. **Step six** is payment notification. HFS will notify each provider of payment via E-Mail.

Providers can voluntarily reassign their entire incentive payment to their employer. Providers cannot have it reassigned to any other entity as only one tax identification number can be assigned for payment.

EHR Provider Resources

www.cms.gov/EHRIncentivePrograms

Providers can register for the Medicaid EHR Incentive Program, read an overview of the incentive program, see a list of certified EHR technology, get answers to frequently asked questions, and more.

www.hfs.illinois.gov/ehr

Has summary of HFS Provider Incentive Payment Program, eligibility wizard, FAQ, list of certified EHR technology, links to CMS and Regional Extension Centers. Contact HFS via E-Mail at hfs.ehrincentive@illinois.gov for further information.

www.ilhitrec.org

The Illinois Health Information Technology Regional Extension Center (ILHITREC) helps Illinois physicians who are not located in city of Chicago receive subsidized services to achieve meaningful use of EHR. For more information, contact ILHITREC via E-Mail at info@ilhitrec.org or phone at 815-753-1136. Providers can fill out online form to determine if they qualify for subsidized services.

www.chitrec.org

The Chicago Health Information Technology Regional Extension Center helps primary care providers in the city of Chicago become meaningful users of EHR. For more information, contact CHITREC via E-Mail at info@chitrec.org or phone at 312-503-2986. Providers can fill out online form to determine if they qualify for subsidized services.

www.illinoishealthconnect.com

ILHITREC and CHITREC hosted a webinar titled *A Practical Approach to Achieving Meaningful Use* on January 25, 2012. You can view the presentation materials on the Provider Education Webinar page of the IHC Web Site.



Quality Corner: Outreach Spotlight

Illinois Health Connect offers Quality Tools such as the IHC Panel Roster, Claims History, Webinars, the semi-annual Provider Profiles and the annual Bonus Payment for High Performance. If you would like assistance with these Quality Tools, please contact your Quality Assurance Nurse to schedule an appointment. The Quality Tools can help medical homes make clinical improvements as the following success story attests.

Who: Dr. Antoni Banas is a pediatrician located in Bourbonnais who provides a medical home for nearly 800 Illinois Health Connect clients. Dr. Banas has been enrolled as a Primary Care Provider with IHC since 2006.

What: Dr Banas ranks in the top 10th percentile for IHC medical homes in five quality of care indicators, according to his most recent Provider Profile, and scored highly in all three age groups for objective developmental screening on the 2010 IHC Bonus Payment for High Performance.

How: Cheri Brattin heads up the client outreach effort for Dr. Banas using the IHC Panel Roster as a starting point. “My roster is the number one thing I use,” she said. Ms. Brattin sends birthday cards to each client who has a birthday the following month, inviting them to schedule well child visits. She then follows up with a second round of cards and, if necessary, letters as a third round of outreach to remind parents that Dr. Banas is their PCP and encouraging parents to schedule an appointment. Additionally, Ms. Brattin

employs a color-coding system to determine what outreach is necessary each month using yellow for clients who are due, orange for clients who are up-to-date and blue for clients on their roster who have never been in to see Dr. Banas.

If you would like to learn how to sort your IHC Panel Roster to see which clients are due for services such as well-child visits, developmental screenings, lead screenings, vision screenings, PAP smears, mammograms and date of last PCP visit, contact your QAN or Provider Services Representative.

IHC hosted a recent Webinar titled “Using the IHC Panel Roster to Maximize Care,” which can be viewed at <http://www.illinoishealthconnect.com/provider/providereducation/providereducation.aspx>.

“My roster is the number one thing I use.”

Cheri Brattin



Medical Card Update

The Illinois Department of Healthcare and Family Services (HFS) had planned to begin issuing durable medical cards to clients in 2012.

However, HFS has decided to continue using paper medical cards. Several options for changes to the mailing frequency of the paper medical cards are being

considered. HFS will continue to keep providers updated.

It continues to be vitally important for providers to check each client’s eligibility and PCP assignment via MEDI prior to providing services.

Provider News and Notes

HFS Announces 2012 IHC Bonus Benchmarks

The Illinois Department of Healthcare and Family Services (HFS) announced that the six bonus measures for the Illinois Health Connect Bonus Payment for High Performance program will remain the same for 2012. IHC Primary Care Providers (PCPs) are eligible to receive annual incentive payments of \$25 for each patient that received the measured service if a PCP meets or exceeds the 2012 benchmark percentage for a particular measured service.

Visit www.illinoishealthconnect.com/provider/QualityTools/bonuspayment.aspx for more information, or call your Quality Assurance Nurse, Provider Services Representative or the IHC Provider Services Help Desk at 877-912-1999, extension 3.

IHC Web Site Updates

Check out www.illinoishealthconnect.com to see the recently redesigned IHC Web site.

www.illinoishealthconnect.com is now divided into three sections: *Providers*, *Clients* and *Stakeholders*. Click on *Providers*

to access IHC provider support materials. In addition to the IHC Provider Handbook, other features include: IHC Quality Tools, Webinars, Provider Notices, Provider Forms and IHC videos. A new feature on the *Providers* section is the "Bulletin Board" page where you can find HFS and IHC updates along with other helpful resources. If you have comments or suggestions on how IHC can make more improvements, please use the "Web site Feedback" link at the top of the page.

IHC Provider Portal Updates

The IHC Provider Portal was recently updated with new features such as a link for *Provider Affiliations*, which lists the cross-coverage and care sharing relationships for enrolled PCPs. The affiliations can be viewed in both PDF and CSV formats. Enhancements were made to the *Location of Service* page, adding new information such as provider FTE and contact numbers for your Provider Services Representative and Quality Assurance Nurse. The font sizes of the portal menu and the navigation menu were also increased to improve readability. The Provider Portal can be accessed via the secure MEDI Web site (www.myhfs.illinois.gov).

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Visit the Illinois Health Connect website for information on upcoming events.
This newsletter is available on the Illinois Health Connect website:
www.illinoishealthconnect.com

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