



# Preparing for 2015 Participation

- ✓ Confirm your Stage
- ✓ Check registration information
  - NPPES login information
  - Make sure e-mail address is correct
  - Verify that the Medicare Administrative Contractor (MAC) has the correct banking information and payee information (bank account and routing number, payee address, NPI and TIN)
  - Make sure to have an active and approved enrollment record in the Provider Enrollment, Chain and Ownership System (PECOS)
  - Identity and Access Management (I&A)
    - Make sure surrogate users are up-to-date



# Preparing for 2015 Participation

- ✓ Review the ONC Health IT Certification Program and the **Certified Health IT Products List (CHPL)**, which include real time information on what products are certified for what functionalities.
  
- ✓ Confirm **CMS EHR Certification ID**
  - ❑ During attestation EPs and eligible hospitals share their CMS EHR Certification ID with CMS
  - ❑ Detailed instructions on how to obtain a CMS EHR Certification ID are available on the [CHPL website](#)
  
- ✓ For more information and resources, visit the “Registration and Attestation” page on the EHR Incentive Programs website:  
<https://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/RegistrationandAttestation.html>



# Attestation & Payment Adjustments

EHR reporting period for payment adjustment year = any continuous 90-day period

## For EHR reporting period in 2015:

- ✓ Providers can attest to meaningful use for EHR reporting period in 2015 beginning **January 4, 2016**
- ✓ All Medicare providers must attest by **February 29, 2016**
- ✓ All providers must:
  - Use CEHRT certified to the 2014 Edition
  - Submit Clinical Quality Measures



# Alternate Exclusions & Specifications

- Providers scheduled to be in Stage 1 may opt to use the alternate exclusions and specifications, but they are *not required* to use them.
- The EHR Incentive Programs registration and attestation system will automatically identify those providers who are eligible for alternate exclusions and specifications.
- Upon attestation, these providers will be offered the option to attest to the Modified Stage 2 objective and measure, and the option to attest to the alternate specification or claim the alternate exclusion, if available.
- The provider may independently select the option available to them for each measure for which an alternate specification or exclusion may apply.



# Hardship Exceptions

- If a provider is unable to meet the requirements of meaningful use for an EHR reporting period in 2015 for reasons related to the timing of the publication of the final rule, a provider may apply for a hardship exception under the "extreme and uncontrollable" circumstances category.
- Each hardship exception application will be reviewed on a case-by-case basis, as required by law.
- In the past, CMS has considered these applications seriously and, in fact, has approved over 85% of hardship exemptions.

**To learn more, see FAQ# 12845:**

<https://questions.cms.gov/faq.php?faqId=12845&id=5005>



# CMS Help Desks

## **EHR Information Center Help Desk**

- (888) 734-6433 / TTY: (888) 734-6563
- Hours of operation: Monday-Friday 8:30 a.m. – 4:30 p.m. in all time zones (except on Federal holidays)

## **NPPES Help Desk**

- Visit <https://nppes.cms.hhs.gov/NPPES/Welcome.do>
- (800) 465-3203 - TTY (800) 692-2326

## **PECOS Help Desk**

- Visit <https://pecos.cms.hhs.gov/>
- (866)484-8049 / TTY (866)523-4759

## **Identification & Access Management System (I&A) Help Desk**

- PECOS External User Services (EUS) Help Desk Phone: 1-866-484-8049
- TTY 1-866-523-4759
- E-mail: [EUSSupport@cgi.com](mailto:EUSSupport@cgi.com)



# New Resources Available

- Additional information available on new 2015 Program Requirements page: [cms.gov/ehrincentiveprograms](http://cms.gov/ehrincentiveprograms)
- FAQs on rule available on FAQ site: <https://questions.cms.gov>