



Iowa Department of Human Services

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INFORMATIONAL LETTER NO. 1335

DATE: December 20, 2013

TO: Iowa Medicaid Hospitals, Physicians, Dentists, Rural Health Clinics, Clinics, Maternal Health Centers, Ambulatory Surgical Centers, Certified Nurse Midwives, Birthing Centers, Federally Qualified Health Centers, Advanced Registered Nurse Practitioners, Behavioral Health, and Community Mental Health

ISSUED BY: Iowa Department of Human Services, Iowa Medicaid Enterprise (IME)

SUBJECT: Electronic Health Record (EHR) Incentive Payment Program and Meaningful Use Attestation Updates -- Patient Volume Methodology

EFFECTIVE: Immediately

The IME Electronic Health Record (EHR) Incentive Payment Program uses Medicaid patient volume to determine eligibility for the EHR Incentive Payment Program. The IME elected to change the patient volume methodology to allow providers to include zero-paid and unbilled encounters in their attestation for Medicaid Patient Volume. Eligible providers can now use the following Medicaid encounter types when attesting to adoption and meaningful use of EHRs:

- Medicaid as Primary/Secondary insurance
- Zero-paid encounters
- Unbilled encounters
- Magellan encounters
- Meridian encounters
- Medicare crossover encounters
- Out-of-state encounters
- MediPASS encounters

Providers are still required to provide proof of patient volume. If using zero-paid encounters, unbilled encounters, Magellan encounters, Meridian encounters, or Medicare crossover encounters, providers will need to include a list of Medicaid member ID numbers, dates of service, and indicate if the service is billed or unbilled.

Eligible providers (EPs) may continue to use the patient panel methodology in addition to the method outlined above. To use the panel method, eligible providers may count any Medicaid member assigned to the panel in the last 12 months when at least one Medicaid encounter took place with the member in the 24-months prior to the 90-day reporting period but not

seen during the 90-day reporting period. With this method, providers still need to provide proof of patient volume.

Eligible providers (EPs) who practice predominantly in Federally Qualified Health Centers (FQHC) or Rural Health Centers (RHC) may continue using the needy individual definition. Eligible providers may include the following encounter types when attesting:

- Medicaid encounters
- Healthy and Well Kids in Iowa (*hawk-i*)/Children's Health Insurance Program (CHIP) encounters
- Uncompensated encounters
- No cost, reduced cost, or sliding fee scale encounters

If multiple encounters occur on the same day with the same provider, those encounters count as one encounter for the purpose of this definition. With this method, providers still need to provide proof of patient volume.

Eligible hospitals (EHs) will continue to use the methodology which includes all acute care/inpatient visits and emergency room or department (ER/ED) visits as the total Medicaid population. If an ER/ED visit results in hospitalization, please count that encounter as an inpatient visit. As with providers, EHs need to include proof of patient volume when they attest for an EHR incentive payment.

As a reminder, patient volume only requires a continuous 90-day reporting period. EPs will select a continuous 90-day period in the previous calendar year. EPs must meet the 30 percent patient volume threshold (20 percent for pediatricians) to be eligible for an incentive payment. To determine if a provider meets this threshold, EPs must divide: 1) the total Medicaid patient encounters in the 90-day period by 2) the total patient encounters in the same 90-day period. Total patient encounters are defined as all patients seen by that provider regardless of insurance type.

EHs will select a continuous 90-day period in the previous Federal Fiscal Year (FFY). For program year 2014, hospitals will select a hospital fiscal year that ended in FFY13 (e.g., October 1, 2012 to September 30, 2013). Hospitals will need to meet 10 percent patient volume threshold to be eligible for an incentive payment.

If you have questions about this or the EHR Incentive Program, please contact the IME EHR Incentive Staff at imeincentives@dhs.state.ia.us or 515-974-3123.