Meaningful Use Quick Start Guide for Dental Providers

June 2012

Overview
The Medicare and Medicaid EHR Incentive Programs provide a financial incentive for achieving “Meaningful Use,” (MU) which is the use of certified EHR technology to achieve health and efficiency goals. Dentists considered “Eligible Professionals” (EPs) under the Medicaid program can qualify for up to $63,750 over the six years they participate in the program. Although it is possible none of the core quality measures and alternative core quality measures, and additional quality measures are within a dentist’s scope of practice, dentists can STILL meet attestation for Meaningful Use and receive incentive payments.*

Step 1: Verify eligibility & patient volume.
Eligible oral health professionals under the Medicaid EHR Incentive Program include:

- Dentist (DDS or DMD)

According to CMS rules, EPs are eligible for Medicaid incentives if, over at least 90 days in the previous year, 30% of their encounters came from Medicaid. CMS rules stipulate that encounters may be calculated in one of two ways: 1) the EP’s number of Medicaid patient encounters divided by the EP’s total number of patient encounters; or 2) the number of Medicaid enrollees on the panel assigned to that EP divided by the total number of patients assigned to the EP (as in the case of managed care of health home arrangements).

Step 2: Get registered. You can register before having a system installed.
Visit the "Medicaid State Information" page to see if your state is participating in the Medicaid EHR incentive program. If your state is already participating, register now for the Medicaid EHR Incentive Program. Note that EPs must register for the incentive program both with CMS in addition to registering with their respective states. If your state has not yet begun participating in the Medicaid EHR incentive program, you may wish to register now for the Medicare EHR incentive program, provided you are eligible for both programs. Refer to the Medicare checklist for more information.

During the registration process, EPs will be required to enter their National Provider Identification Number (NPI) and indicate to what taxpayer ID number they want their incentive dollars to be reassigned. Since EHR incentive payments go directly to Eligible Professionals by default, the registration process should be discussed and the handling of EHR incentive payments specifically addressed by administrative staff. In many cases, the incentive payments
are used to offset the costs of adopting technology and therefore, are reassigned to the Health Center. The National Association of Community Health Centers has provided sample language for employment contracts/agreements which helps to ensure no misunderstandings arise between the employer and employee.

Providers are encouraged to register for the Medicaid EHR Incentive Program as soon as possible to avoid payment delays. Please note that not all states have launched a Medicaid EHR Incentive Program yet, and you should verify your state’s status before proceeding.

**Step 3:** Verify that your Electronic Health Record and/or Dental Record is fully certified.

In order to receive incentive payments, ensure the EHR and/or EDR technology you are using or are considering purchasing has been certified by the Office of the National Coordinator for Health Information Technology. Visit the [Certified Health IT Product List](#) to verify whether or not the version of the EHR and/or EDR you are using or plan to use is certified. The Office of the National Coordinator has confirmed that dentists can use an uncertified product to feed information into a certified EHR product, and that as long as the MU information is being captured by the certified EHR Product, this will count towards achieving Meaningful Use.

**Step 4:** Get qualified.

To receive EHR incentive payments in the first year under the Medicaid EHR Incentive Program, you must do at least one of the following:

- Adopt certified EHR technology; or
- Implement certified EHR technology you have already purchased; or
- Upgrade your current EHR technology to the newly certified version; or
- Demonstrate “Meaningful Use” of certified EHR technology for a 90-day period. Visit your state’s Medicaid agency website at the [Meaningful Use page](#) to learn about Meaningful Use objectives and measures.

Note: Stage 1 Meaningful Use criteria outlines a total of 25 Meaningful Use objectives including documenting patient gender, race, preferred language, height, weight, smoking status, and blood pressure into EHRs. To qualify for an incentive payment, 20 of 25 identified objectives must be met: all 15 required core objectives, and 5 from a list of 10 menu set objectives. EPs are also required to report on 6 total clinical quality measures: 3 required core measures (substituting alternate core measures where necessary) and 3 additional measures (selected from a set of 38 clinical quality measures. Although not ideal, the majority of objectives are feasible for dentists.
Step 5: **Attest for incentive payments.**
In order to get your EHR incentive payment, you must attest (legally state) through your state’s Medicaid agency website that you have met all of the eligibility criteria, including having adopted, implemented, upgraded, or meaningfully used certified EHR technology. Visit your state’s Medicaid agency website for more information.

Step 6: **Receive payments.**
View the Medicaid EHR Incentive Payment Schedule for EPs [here](#).

Payment and Registration Update
In June 2012, CMS announced that more than 100,000 health care providers have been paid under the Medicare and Medicaid Electronic Health Record (EHR) Incentive Programs and many dentists are taking advantage of the incentives as evidenced by the figures below.

<table>
<thead>
<tr>
<th>Active Registrations</th>
<th>5,395</th>
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<tbody>
<tr>
<td><strong>Number of Medicaid Eligible Dentists (Program-to-Date)</strong></td>
<td></td>
</tr>
<tr>
<td>Medicaid Incentive Payments</td>
<td></td>
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<tr>
<td><strong>Number of Dentists Paid to Date</strong></td>
<td>2,243</td>
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<tr>
<td><strong>Amount Paid – 2011 Program Year</strong></td>
<td>$38,207,500</td>
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<tr>
<td><strong>Amount Paid – 2012 Program Year</strong></td>
<td>$9,273,500</td>
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<tr>
<td><strong>Total Amount Paid</strong></td>
<td>$47,481,000</td>
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Source: [May 2012 EHR Incentive Program Payment and Registration Report](#)

*Important Note on the Applicability of Clinical Measures & the National Quality Forum*

While there are virtually no oral health measures for dentists in the clinical measure group for Stage 1, many national organizations including NNHOA, NQF, and NACHC are actively working in conjunction with CMS to make the program more applicable to safety-net dental providers.

In fact, the National Quality Form (NQF) recently embarked on a project that will address the need for oral health performance measures that are applicable to oral health safety-net dental programs, CHIPRA, the Medicare and Medicaid core measures set, and for use by other implementers. An environmental scan was first conducted to identify existing measures from various sources and identify where measure gaps exist in priority areas, defined by the HHS Oral Health Initiative, Health People 2020, and HRSA’s strategic priorities. An expert panel was then convened to prioritize the measure concepts or preliminary measures that could be targeted for further development and testing. The results of these efforts are being formulated into a formal report which should be available sometime this summer. Please check NQF’s [website](#) for the latest updates.