

Health Care Professionals

How to Apply for the MaineCare Medicaid Incentive Payment Program (Meaningful Use)

STEP 1. Register on-line with CMS: (link to CMS) → <http://www.cms.gov/EHRIncentivePrograms>

Information you will Need

1. Click "Registration"
2. Click "Register for the Medicare or Medicaid E H R Incentive Payment Programs"
3. Click "Continue"
Check box in front of the statement "Check this box to indicate you acknowledge that you are aware of the above statements"
4. Select the Continue button to go to the LOGIN page"
5. **National Plan and Provider Enumeration System (NPPES) User ID and Password.**
associated with the professional you are registering for the payment. If they do not have or remember their user ID and Password they can call the following number and/or visit the following link to get it. **(This must be done by the professional themselves)** The professional will immediately receive their user name and password and this can be given to a person that is registering on their behalf.
6. Enter the following information for the professional you are registering:
National Provider Identifier **(NPI) of the professional**
7. The Professional's Tax Identification Number (SSN)
8. Professional's Business Name
9. Address of the Physical Location of the Practice
10. Type of Professional (Physician, Nurse Practitioner, Dentist, Pediatrician, Physician Assistant at an FQHC/RHC led by a Physician Assistant)

Tips and Links

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Lower left corner of page

Column on the left

****You will need to enter the NPPES user name and password associated with the professional you are registering for the payment. If they do not have or remember their user ID and Password they can call the following number and/or visit the following link to get it. (This must be done by the professional themselves)** The professional will immediately receive their user name and password and this can be given to a person that is registering on their behalf.

Link: <https://nppes.cms.hhs.gov/NPPES/IASecurityCheck.do>

Number: 1-866-484-8049

A professional may have several "practice" locations. List the address associated with the providers assigned practice. There is a drop down for the types of professionals that are eligible for the program. **Choose one**

11. The telephone number that MaineCare can call to contact the professional or the person that is registering on behalf of the professional.

This number should be a contact MaineCare can call if we have any questions. This is usually the person doing the registrations for the professional.

12. Email address of the professional or individual completing the registration.

The email address that MaineCare will use to contact the professional or the individual who is acting on behalf of the professional. Again, this should be the person completing the registration/application.

13. You will need to answer "yes" or "no" to a question that asks if you have a certified Electronic Health Record.

If you have an E H R, you should check **yes** and type in the Certified EHR ID number (if you have it). This is a point where most errors are made. The registration site states that this step is optional but it is necessary that this information is put in to apply in Maine. **(If you check no, you will need return to the registration site and enter the Certified EHR ID #information before you can get a payment)**. To avoid returning and having to update each record it is best to have your Certified Registration ID before completing the registration. See the next steps to obtain your Certified Registration ID.

When you check "yes" you will see a link to the Office of the National Coordinator (ONC) list of certified E H R's.

- A. Click the link to go to the site.
- B. Click "Ambulatory Practice Type"
- C. The middle box is labeled: "Search by Name or CHPL Product Number:
Select search type:

<http://onc-chpl.force.com/ehrcert>

Found at the left side-bottom of page

Select one of the search choices: Vendor Name, Product Name or CHPL Product Number; then, put the information regarding your EHR in the "Search for" box.

Example: Your product name is Centricity--type Centricity into the search for box and click the Search button.

- D. You will see a list of EHR products that match your search criteria.
- E. Identify your EHR product
- F. Click "**add to cart**"-found on the right side of screen This will choose your product so you can next generate the Certified EHR ID number
- G. The next screen will have a gray box on the right with a clickable tab that states: **Get CMS EHR Certification ID**. Click this tab and the next screen will show: **Your CMS EHR Certification ID is: xxxxxxxxxxxxxxxx**
- H. Write down this number and while on the page highlight the number so that you can "copy" it.
- I. Just below the certification number you will see a clickable link (**Medicare and Medicaid EHR Incentive Program**) - (**in very small print**) that takes you back to the CMS registration site. You **must click** on that link to return to your registration. This is a very important step because it unlocks your registration to accept the CMS EHR Certification ID number that you will type (or "paste") in. If you close the site window and try to go back to the registration data via another window the generated EHR Certification ID number will not be saved into your registration.
- J. When you have returned to the registration page you can then "paste" or type the CMS certification ID number in the box that asks for the number. (If you close the window by accident and need to return to your registration you should start the registration from the beginning. You will now have the EHR Certified ID number and that can be entered at the very beginning of the registration. Again, it states "optional" but it is not).

14. You will be asked to choose the State where you are applying. Use the drop down menu and choose "Maine."
Maine was added to the drop down menu on October 3, 2011.

15. After you choose "Maine" from the drop-down menu, you will see a screen asking you to complete the payee information. If you are assigning your payment to another entity, provide the payee's Tax Identification number, Payee's National Provider Identification (NPI), the Payee's Business name and payment address.

If you cannot edit the payee NPI (**as shown in the left side block below**) you must select "**Group Reassignment**" under ***Please Select the payee TIN type for your EHR Registration (shown in the right block below)** to unlock the field and enter your designated payee name, TIN and NPI.
The NPI you enter **must** be the NPI that receives Medicaid payments.

Example of Payee NPI field being locked:

Payee Information

(*) Red asterisk indicates a required field.

Please note, the tax identification number (TIN) captured below will receive the EHR incentive payment.

*Please select the payee TIN type for your EHR Registration.

My Billing TIN

The following entity will receive the EHR Incentive Payment:

*Billing TIN Type:

SSN EIN

*Billing TIN:

*Legal Name:

Payee NPI:

Please select the **Previous** button to go back a page. Select the **Return to Registration Progress** button to view your progress through the registration topics. Please note that any changes that you have made on this page will not be saved. Select the **Save & Continue** button to save your entry and proceed.

Example of Payee NPI field unlocked:

Payee Information

(*) Red asterisk indicates a required field.

Please note, the tax identification number (TIN) captured below will receive the EHR incentive payment.

*Please select the payee TIN type for your EHR Registration.

Group Reassignment

The following entity will receive the EHR Incentive Payment:

*Group Name:

*Payee TIN:

*Payee NPI:

Please select the **Previous** button to go back a page. Select the **Return to Registration Progress** button to view your progress through the registration topics. Please note that any changes that you have made on this page will not be saved. Select the **Save & Continue** button to save your entry and proceed.

16. Consent/Agreement

Check the box confirming the information provided is true, accurate and you agree to abide by federal and State laws for the incentive payment program.

17. Continue to submit until you receive a screen with Registration Approved

Registration has been approved and you will see the registration

EMAIL: YOU DO NOT NEED TO TAKE ANY FURTHER ACTION AT THIS POINT. CMS will automatically send your registration information to MaineCare Services and MaineCare will automatically send you an email. You are now ready for Step 2-Applying with the State of Maine.