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Disclaimer

The Centers for Medicare & Medicaid Services (CMS) is providing this material as an informational reference for physicians and non-physician practitioners-providers.

Although every reasonable effort has been made to assure the accuracy of the information within these pages at the time of posting, the Medicare and Medicaid program is constantly changing, and it is the responsibility of each physician, non-physician practitioner, supplier or provider to remain abreast of the Medicare and Medicaid program requirements.

Medicare and Medicaid regulations can be found on the CMS Web site at http://www.cms.gov
Step 1 – Getting Started

This is a step-by-step guide for the Medicaid Eligible Professionals (EPs) Electronic Health Record (EHR) Incentive Program. The page layout consists of the registration screen with written instructions to the right, as well as helpful tips. To get started, click on the link at the top of the page or type the website into your computer’s browser.

To determine your eligibility, click on the CMS website.
Step 1 - Continued
Carefully review the screen for important information.

Warning

(*) Red asterisk indicates a required field.

WARNING: Only authorized registered users have rights to access the Medicare & Medicaid EHR Incentive Program Registration & Attestation System.

Please verify the following statements:

- You are accessing a U.S. Government information system
- The U.S. Government maintains ownership and responsibility for its computer systems
- Users must adhere to U.S. Government Information Security Policies, Standards, and Procedures. (PDF, 96.6 KB)
- Usage of this system may be monitored, recorded, and audited
- Unauthorized use is prohibited and subject to criminal and civil penalties
- The use of the information system establishes consent to any and all monitoring and recording of activities

☐ *Check this box to indicate that you acknowledge that you are aware of the above statements

Select the Continue button to go to the LOGIN page or select the Previous button to go back to the WELCOME page

Eligible Professionals (EPs) may not be hospital based. This is defined as EPs seeing 90% or more of their Medicare covered services in:

- Hospital Inpatient setting (Place of service 21)
- Emergency Department setting (Place of service 23)
Step 2 – Login

Review the Login Instructions for Eligible Professionals.

**Login Instructions**

**Eligible Professionals (EPs)**
- If you are an EP, you must have an active National Provider Identifier (NPI) and have a National Plan and Provider Enumeration System (NPPES) web user account. Use your NPPES user ID and password to log into this system.
- If you are an EP who does not have an NPI and/or an NPPES web user account, navigate to NPPES to apply for an NPI and/or create an NPPES web user account.

**Eligible Hospitals**
- If you are an Eligible Hospital, you must have an active NPI. If you do not have an NPI, apply for an NPI in NPPES.
- Users working on behalf of an Eligible Professional(s) must have an Identity and Access Management system (I&A) web user account (User ID/Password) and be associated to the Eligible Professional’s NPI. If you are working on behalf of an Eligible Professional(s) and do not have an I&A web user account, Create a Login in the I&A System.

**Associated with both Eligible Professionals (EPs) and Eligible Hospitals**
- If you are an EP using your NPPES web user account, you may also be permitted to work on behalf of a hospital. Navigate to the I&A System and use your NPPES User ID and password to request to work on behalf of an organization.
- Users working on behalf of an Eligible Professional(s) must have an Identity and Access Management system (I&A) web user account (User ID/Password) and be associated to both an Eligible Professional NPI and an organization NPI. If you do not have an I&A web user account, Create a Login in the I&A System.

**Account Management**
- If you are an existing user and need to reset your password, visit the I&A System.
- If you are having issues with your User ID/Password and are unable to log in, please contact the EHR Incentive Program Information Center at 888-734-6433 / TTY: 888-734-6563.

For information about the CMS Identity and Access (I&A) System, refer to the I&A Quick Reference Guide. The guide includes information on how to:
- Create an account
- Retrieve and reset usernames and passwords
- Register to access CMS systems on behalf of an organization
- Add and manage staff within an organization
- Work in CMS systems on behalf of an individual or organization

To locate your NPI number, visit:
https://nppes.cms.hhs.gov/NPPES/NPIRegistryHome.do

User name and password are case sensitive

Contact the PECOS Help Desk if you cannot remember your password - (866) 484-8049/TTY (866)523-4759, https://pecos.cms.hhs.gov

TIPS

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Medicaid EHR Incentive Program User Guide – Page 5
Step 3 – Welcome
If your login was successful you will receive the “Welcome Screen”.

TIPS
The Welcome screen consists of four tabs to navigate through the registration and attestation process.

1. Home
2. Registration
3. Attestation
4. Status

Meaningful Use information:
https://www.cms.gov/EHRIncentivePrograms/30_Meaningful_Use.asp

STEPS
Click on the Registration tab to continue registering for the EHR Incentive Program

After you login, the system will alert you of your next step in the registration and attestation process, such as your registration needs to be completed, or that it is time to begin attestation.
Step 4 – Registration

**Registration Instructions**

Welcome to the Registration Page.

Depending on the current status of your registration, please select one of the following actions:

- **Register**
  - Register for the EHR Incentive Programs
  - Continue an incomplete registration

- **Modify**
  - Modify Existing Registration
  - Switch incentive programs (Medicare/Medicaid)
  - Switch Medicaid state

- **Cancel**
  - Discontinue participation in the Medicare & Medicaid EHR Incentive Programs

- **Reactivate**
  - Reactivate a previously canceled registration

- **Resubmit**
  - Resubmit a registration that was previously deemed ineligible

**Registration Selection**

Identify the desired registration and select the Action you would like to perform. Please note only one Action can be performed at a time on this page.

**Existing registration(s):**

<table>
<thead>
<tr>
<th>Name</th>
<th>Tax Identifier</th>
<th>National Provider Identifier (NPI)</th>
<th>Incentive Type</th>
<th>Registration Status</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jane Doe, MD</td>
<td>XXX-XX-3568 (SSN)</td>
<td>000000000000000</td>
<td>Medicaid</td>
<td>Active</td>
<td>Register</td>
</tr>
</tbody>
</table>

**STEPS**

Click on **Register** in the Action column to continue the registration process.

**TIPS**

“Resubmit”, “Modify”, “Cancel” and “Reactivate” are the available Action web links for returning users. Only one action can be performed at a time on this page. If the user selects the Action web link of “Register” or “Resubmit” they will be directed to the Topics for Registration screen.
Step 5 – Reason for this Registration

Review and follow the registration instructions below.

**Topics**

The data required for this registration is grouped into topics. In order to complete registration, you must complete ALL of the following topics. Select the TOPIC and provide the required information. The system will show when each TOPIC is completed.

1. EHR Incentive Program
2. Personal Information
3. Business Address & Phone

*TIPS*

Data required for this registration is grouped into three topics. All three must be **completed**

Progress bars will indicate the progress for each topic

When all topics are **completed** user can select Proceed with Submission
Step 6 – Incentive Program Questionnaire

Review and follow the Incentive Program Questionnaire instructions below.

**STEPS**

1. Select Medicaid State/Territory
2. Select your Eligible Professional Type.
3. Click Yes or No at “Do you have a certified EHR?” If yes, enter the EHR Certification Number.

**TIPS**

- States are launching their programs at different times, so your state may not yet be available. Click on the CMS website link for more information.
- Click on the CMS EHR Certification Number website to obtain your certified EHR number.
- Follow the instructions on the website to locate your CMS EHR Certification Number.
- You must enter your certification number when Attesting for the EHR Incentive Program. The number is not required for registration.

[CMS website link]
https://www.cms.gov/EHRIncentivePrograms/

[CMS EHR Certification Number website]
http://healthit.hhs.gov/CHPL
Step 7 – Personal Information

Follow the instructions below regarding your personal information.

**STEPS**

Select where your payment will go in the Payee TIN Type

Click **APPLY**

SSN Payee TIN Type indicates that the provider receives the payment

Enter the Group Name and Group Payee TIN and NPI Number

Click **Save & Continue**

**Identifiers**

(*) Red asterisk indicates a required field.

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

Social Security Number (SSN): XXX-XX-2444
National Provider Identifier (NPI): XXXXXXXXXXX

Payee Information

(*) Red asterisk indicates a required field.

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

*Payee TIN Type: [Select]
*Group Name: [Select]
Payee TIN: [Search]
*Payee NPI: [Search]

**TIPS**

Medicaid EPs can elect to have their payment go to another qualified entity by selecting Payee TIN Type of EIN, and this information will be sent to the State.

There are rules around reassignments governing this program, please see the CMS website for more information: http://www.cms.gov/EHRIncentivePrograms/
Step 7 – Personal Information for Groups
If a group will be receiving payments, follow the instructions below regarding your group information.

STEPS
If you are assigning payments to a practice or group, you will need to enter the group’s 10-digit NPI that will be receiving the payments.

Click Filter
Step 7 – Resolve Personal Information Errors
Resolve any errors with your personal information.

**STEPS**

If there are any errors with your personal information, the system will alert you and allow you to make revisions. Resolve any issues and continue.
Step 8 – Business Address and Phone

Be sure to complete all requested information.

Data on this page is pulled from the provider’s practice location stored in NPPES

Address and Phone number can be changed for purposes of this program, however it will not update your NPI record in NPPES

If this information is incorrect, please update your NPPES account as well

STEPS

Review the Business Address & Phone information and revise if applicable.

Enter your e-mail address and confirm the e-mail address.

Click Save & Continue

You will receive an e-mail confirmation once you have successfully completed your registration.
Step 9 – Registration Progress

Be sure to complete all the topics below.

**Reason for Registration**
You are an Eligible Professional registering in the incentive program. You have modified your registration information.

**Topics**
The data required for this registration is grouped into topics. In order to complete registration, you must complete ALL of the following topics. Select the TOPIC and provide the required information. The system will show when each TOPIC is completed.

1. **EHR Incentive Program**
   - Progress: 1 of 1
   - Completed

2. **Personal Information**
   - Progress: 1 of 1
   - Completed

3. **Business Address & Phone**
   - Progress: 1 of 1
   - Completed

**Note:** When all topics are marked as completed, select the **Proceed With Submission** button to submit your registration.

**Steps**
Click on **Proceed with Submission** to continue the registration process.

**TIP**
Progress bars indicate that the topics are completed.
**Step 10 – Verify Registration**

Be sure to verify all your personal information.

**Verify Registration**

Registration Information

<table>
<thead>
<tr>
<th>Registration ID: 1000041161</th>
<th>Business Address:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name: Jane Doe, MD</td>
<td>Any Street</td>
</tr>
<tr>
<td>TIN: XX-XX-3568 (SSN)</td>
<td>Cantonon, MA, 02021-2923</td>
</tr>
<tr>
<td>NPI: 000000000000</td>
<td>Phone #: (781) 000-0000</td>
</tr>
<tr>
<td></td>
<td>Ext #:</td>
</tr>
<tr>
<td></td>
<td>E-Mail : <a href="mailto:Jane.Doe@email.com">Jane.Doe@email.com</a></td>
</tr>
</tbody>
</table>

Incentive Program: Medicaid

Please review the summary below to ensure this is the correct registration information. If the summary below is correct, select the **Submit Registration** button at the bottom of this page.

**TIPS**

Click on Exit to go to the home page

Click on Help link for additional guidance for the registration and attestation process
Step 11 – Registration Disclaimer

Be sure to read the entire disclaimer.

Accept, Agree and Submit

I certify that the foregoing information is true, accurate, and complete. I understand that the Medicare/Medicaid EHR Incentive Program payment I requested will be paid from Federal funds, that by filing this registration I am submitting a claim for Federal funds, and that the use of any false claims, statements, or documents, or the concealment of a material fact used to obtain a Medicare/Medicaid EHR Incentive Program payment, may be prosecuted under applicable Federal or State criminal laws and may also be subject to civil penalties.

USER WORKING ON BEHALF OF A PROVIDER: I certify that I am registering on behalf of a provider who has given me authority to act as his/her agent. I understand that both the provider and I can be held personally responsible for all information entered. I understand that a user registering on behalf of a provider must have an Identity and Access Management System web user account associated with the provider for whom he/she is registering.

I hereby agree to keep such records as are necessary to demonstrate that I met all Medicare/Medicaid EHR Incentive Program requirements and to furnish those records to the Medicaid State Agency, Department of Health and Human Services, or contractor acting on their behalf.

No Medicare/Medicaid EHR Incentive Program payment may be paid unless this registration form is completed and accepted as required by existing law and regulations (42 CFR 495.10).

NOTICE: Anyone who misrepresents or falsifies essential information to receive payment from Federal funds requested by this form may upon conviction be subject to fine and imprisonment under applicable Federal laws.

ROUTINE USE(S): Information from this Medicare/Medicaid EHR Incentive Program registration form and subsequently submitted information and documents may be given to the Internal Revenue Service, private collection agencies, and consumer reporting agencies in connection with recoupment of any overpayment made and to Congressional Committees in response to inquiries made at the request of the person to whom a record pertains. Appropriate disclosures may be made to other federal, state, local, foreign government agencies, private business entities, and individual providers of care, on matters relating to entitlement, fraud, program abuse, program integrity, and civil and criminal litigation related to the operation of the Medicare/Medicaid EHR Incentive Program.

DISCLOSURES: This program is an incentives program. Therefore, while submission of information for this program is voluntary, failure to provide necessary information will result in delay in an incentive payment or may result in denial of a Medicare/Medicaid EHR Incentive Program payment. Failure to furnish subsequently requested information or documents to support this registration will result in the issuance of an overpayment demand letter followed by recoupment proceedings.

It is mandatory that you tell us if you believe you have been overpaid under the Medicare/Medicaid EHR Incentive Program. The Patient Protection and Affordable Care Act, Section 6402, Section 1123(b), provides penalties for withholding this information.

If Disagree is chosen, the user is directed to the Registration Instructions Page. To restart the process, click MODIFY in the Action column of the Registration Instructions Page.
Step 12 – Submission Receipt (Successful Submission)

Confirm that your registration was completed successfully.

**STEPS**

You must contact your State to complete your registration.

Continue your registration using the State’s Medicaid EHR registration tool.

Click on “find your State here” to complete the Medicaid registration.

**TIPS**

Wait 24 hours to contact your State to finish the registration, to allow for processing.

Print a copy of the receipt for your records.
Step 13 – Status Summary

Review all current and previous information related to your account.

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**TIP**

Click Select in the Action Column to view detail.
Step 13 – Status Information

Review the details of your registration process.

The following outlines the most recent events associated with your participation in the EHR Incentive Program.

For additional information on your registration, attestation(s), and payment(s), please select the appropriate tab.

Registration Information

Status Information

Information displayed includes:

- The registration status reason
- Fiscal Intermediary (FI)/Carrier/Medicare Administrative Contractor (MAC)
- Validation performed on registration

Registration status will read “Medicaid: Pending State Validation” until the registration process is completed by the State.

Other registration statuses are Cancelled, Issue Pending, In Progress, Rejected, and locked for payment.

The status reason is listed under the blue header in the center of the screen.
Have Questions?
There are many resources available to you.

Resources
Contact the EHR Information Center Help Desk for Questions concerning registration, (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)


TIP
EHR Incentive Program; visit https://www.cms.gov/EHRIncentivePrograms/
## Acronym Translation

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>CMS</td>
<td>Centers for Medicaid &amp; Medicaid Services</td>
</tr>
<tr>
<td>DMF</td>
<td>Social Security Death Master File</td>
</tr>
<tr>
<td>EH</td>
<td>Eligible Hospital</td>
</tr>
<tr>
<td>EHR</td>
<td>Electronic Health Record</td>
</tr>
<tr>
<td>EIN</td>
<td>Employer’s Identification Number</td>
</tr>
<tr>
<td>EIPIC</td>
<td>EHR Incentive Program Information Center</td>
</tr>
<tr>
<td>EP</td>
<td>Eligible Professional</td>
</tr>
<tr>
<td>FI</td>
<td>Fiscal Intermediary</td>
</tr>
<tr>
<td>FQHC</td>
<td>Federally Qualified Health Center</td>
</tr>
<tr>
<td>I&amp;A</td>
<td>Identification &amp; Authentication System</td>
</tr>
<tr>
<td>IDR</td>
<td>Integrated Data Repository</td>
</tr>
<tr>
<td>LBN</td>
<td>Legal Business Name</td>
</tr>
<tr>
<td>MAC</td>
<td>Medicaid Administrative Contractor</td>
</tr>
<tr>
<td>MAO</td>
<td>Medicaid Advantage Organization</td>
</tr>
<tr>
<td>NPI</td>
<td>National Provider Identifier</td>
</tr>
<tr>
<td>NPPES</td>
<td>National Plan and Provider Enumeration System</td>
</tr>
<tr>
<td>NLR</td>
<td>National Level Repository</td>
</tr>
<tr>
<td>OIG</td>
<td>Office of the Inspector General</td>
</tr>
<tr>
<td>RHC</td>
<td>Rural Health Center</td>
</tr>
<tr>
<td>SSN</td>
<td>Social Security Number</td>
</tr>
<tr>
<td>TIN</td>
<td>Tax Identification Number</td>
</tr>
</tbody>
</table>