North Carolina Medicaid Electronic
Health Record Incentive Program

Eligible Hospital Attestation Guide for Meaningful Use
NC-MIPS 2.0

Issue 6.1
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The North Carolina Medicaid Electronic Health Record (EHR) Incentive Program is providing this attestation guide as a reference for Eligible Hospitals (EH).

For additional information, please visit the NC Medicaid EHR Incentive Program website, [https://dma.ncdhhs.gov/providers/programs-and-services/nc-medicaid-electronic-health-record-incentive-program](https://dma.ncdhhs.gov/providers/programs-and-services/nc-medicaid-electronic-health-record-incentive-program) or contact our help desk by email at NCMedicaid.HIT@dhhs.nc.gov.
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Using this Guide

Introduction

This guide helps an eligible hospital (EH) understand the information needed to attest for NC Medicaid EHR incentive payments on the NC Medicaid Incentive Payment System (NC-MIPS). Step-by-step guidance and screenshots are provided throughout the attestation guide to assist participants with their attestation.

The NC-MIPS Portal is available at https://ncmips.nctracks.nc.gov/. Please check the NC-MIPS Home Page for important program updates and announcements. For additional help, there is a link on each page of the Portal entitled Click for Page Help. When you click the link, a PDF version of this attestation guide will appear, showing the section of the guide that pertains to the Portal page in use.

For additional information, please visit the NC Medicaid EHR Incentive Program website, https://dma.ncdhhs.gov/providers/programs-and-services/nc-medicaid-electronic-health-record-incentive-program or contact our help desk by email at NCMedicaid.HIT@dhhs.nc.gov.

Website Resources

The links below contain additional information regarding program requirements, important program announcements and more.

- EHS may attest for incentive payments on the NC-MIPS Portal at https://ncmips.nctracks.nc.gov/.
- The NC Department of Health and Human Services (DHHS) administers this program. More information on this program can be found on the NC Medicaid EHR Incentive Program website at https://dma.ncdhhs.gov/providers/programs-and-services/nc-medicaid-electronic-health-record-incentive-program.
- Additional information on both the Medicare and Medicaid EHR Incentive programs is available from the Centers for Medicare & Medicaid Services’ (CMS) EHR Incentive Program website at www.cms.gov/Regulations- and-Guidance/Legislation/EHRIncentivePrograms/index.html?redirect=/EHRIncentivePrograms/.

Technical Assistance

We provide program resources on NC-MIPS, our incentive program website, and our frequently asked questions page. For any issues not covered in this guidance, please contact our help desk by email at NCMedicaid.HIT@dhhs.nc.gov.
EHR Incentive Program Overview

The North Carolina Medicaid EHR Incentive Program awards incentive payments to EHS that use certified EHR technology in their daily operations.

As part of the federally-funded Health Information Technology for Economic and Clinical Health (HITECH) Act of 2009, the goal of the program is to encourage EHS to adopt, implement, or upgrade (AIU) to a certified EHR technology, and then to demonstrate Meaningful Use (MU) of that technology. The program is expected to continue through 2021.

EH incentive payments are based on certain factors including annual growth rates and projected discharges. The EH incentive payment is calculated by starting with a base payment, then using a precise formula to adjust up or down, depending on specific hospital activity. The payment is then divided into three annual installments. The first installment is 50 percent, the second is 40 percent, and the third is 10 percent of the total payment amount.

The American Recovery and Reinvestment Act of 2009 specifies three main components of Meaningful Use:

1. The use of a certified EHR in a meaningful manner, such as e-prescribing.
2. The use of certified EHR technology for electronic exchange of health information to improve quality of health care.
3. The use of certified EHR technology to submit clinical quality and other measures.

Unsure of Eligibility?

To determine program eligibility, CMS has developed an online tool that can be accessed at http://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/Eligibility.html.

Per CMS’ Stage 1 Final Rule (pg. 44319) "for hospitals starting with fiscal year 2017 payments must be consecutive. This rule is required by section 1903(t)(5)(D) of the Act, which states that after 2016, no Medicaid incentive payment may be made to an eligible hospital unless “the provider has been provided payment * * * for the previous year.” As a result, Medicaid eligible hospitals must receive an incentive in FY 2016 to receive an incentive in FY 2017 and later years. Starting in FY 2016, incentive payments must be made every year in order to continue participation in the program. In no case may any Medicaid EP or eligible hospital receive an incentive after 2021. We have revised our regulations at § 495.4 to incorporate these statutory requirements.”
Before You Begin
You will need an NCID username and password to complete an attestation. If you do not have an NCID, please see the Sign In instructions for details on how to set up an account. Prior to completing a First Time Account Set Up please confirm your NCID username and password are valid by visiting http://ncid.nc.gov and successfully logging in.

The NC-MIPS Portal will save unfinished attestations for 30 days, during which time you will be able to return and complete your submission.

If at any point in the attestation process, you determine that the EH does not meet the eligibility requirements for participation in this program, you may cancel the attestation on the status page within the NC-MIPS Portal. The NC-MIPS Help Desk will ensure that you do not receive follow-up correspondence asking you to complete your attestation during that program year.

Attesting for Meaningful Use
Hospitals will attest for MU on QualityNet (QNET) at https://www.qualitynet.org/ prior to attesting with Medicaid.

NC-MIPS Portal
The NC-MIPS Portal consists of a set of interactive web pages where you can enter information and answer questions that will guide you through the attestation process. The navigation is controlled to help you supply the required information at each step along the way. Dialog boxes and messages help you enter the most appropriate information and provide tips when the system recognizes a problematic entry. Information that is required to proceed is marked with a red asterisk.

The NC-MIPS Portal is compatible with Internet Explorer 7 (or later), as well as Firefox 8 (or later).

You can access the NC-MIPS Portal online at https://ncmips.nctracks.nc.gov/. Once you are logged on, the Portal will take you through the attestation process, one page at a time. When attesting for the first time, users will be guided through the following pages:

- Welcome
- First Time Account Setup (First-time users only!)
- Status
- Demographics
- Contact Information
- Patient Volume
- Historical Cost Report Data
- Congratulations
NC-MIPS Portal Page Layout

To ensure consistent navigation, each page of the Portal has a similar look and feel.

The top left logo is a link to the North Carolina Health Information Technology (HIT) website. The top right logo is a link to the CMS website for the EHR Incentive Program.

For your convenience, the right side of the page contains five commonly used navigation tools:

- Sign In
- Page Help
Sign In
The EH should log onto the NC-MIPS Portal and create an NC-MIPS Account by clicking First Time Account Setup. If an EH already has an account with NC-MIPS, do NOT complete another First Time Account Setup.

The First Time Account Setup link takes the user to the First Time Account Setup page. Here the EP enters her/his unique NCID username and password along with other identifying information to create a unique provider record within NC-MIPS.

Page Help
The Click for Page Help link opens a PDF version of this attestation guide to the page that corresponds to the Portal page you are viewing. If you do not have Adobe to view the PDF, there is a link to download the free Adobe Reader software on the Additional Information area.

Trouble logging in?
This NC-MIPS attestation guide will walk you through each step of creating an account, updating an account, and logging in. Please carefully review the sections of this guide on First Time Account Set-up, NCID Username Update Tool, and NCID Username and Password. You can also review these five questions as they address the most common issues with logging in.

1. Did you register on CMS’ Registration & Attestation portal and indicate that you want to participate in the NC Medicaid EHR Incentive Program? You must register for the Medicaid EHR Incentive Program through CMS at https://ehrincentives.cms.gov/hitech/login.action
2. Do you have a unique NCID? If not, please visit www.ncid.nc.gov.
3. Have you completed the NC-MIPS ‘First Time Account Set-Up’ using the exact same NPI, Social Security Number, CMS confirmation number, and NCID/Username used during CMS registration?
4. Has the EH’s NCID username been updated since completing a First Time Account Setup? If so, use the NC-MIPS NCID Username Update Tool to update the EH’s NCID username in NC-MIPS.

If you are still experiencing issues, please send an email to NCMedicaid.HIT@dhhs.nc.gov. To better serve you, please include the following information: the hospital’s name, NPI, NCID username, CMS Registration ID, Program Year, a screenshot of the error message being received and a brief description of your issue.
Jump to...
Clicking Next will allow a user to follow the normal attestation process flow in the Portal. However, there may be occasions that a user wants to jump to a particular page. The Jump to area provides links to other pages so that a user can easily navigate the Portal.

NOTE: A user is only able to jump to the pages where data has been entered.

Additional Information
This area provides links to attestation guides and helpful web sites. The Eligible Hospital Attestation Guide link opens this Attestation Guide in a new browser tab. To download the free Adobe Reader software, click Download Adobe Acrobat to read guides link and it will take you to a free download.

To learn more about the NC Medicaid EHR Incentive Program, visit https://dma.ncdhhs.gov/providers/programs-and-services/nc-medicaid-electronic-health-record-incentive-program.

Contact Information
This area contains the phone number and email for the NC-MIPS Help Desk. please contact our help desk by email at NCMedicaid.HIT@dhhs.nc.gov if you have questions about the attestation process that cannot be answered using the available resources provided.

Footer
Found at the bottom of the page, the footer has a Contact us link to contact the NC-MIPS Help Desk. It also has a link to view the NC-MIPS Portal Disclaimer.

The version number is the release number of the NC-MIPS Portal software.

Navigation
The NC-MIPS Portal is designed to help a user navigate seamlessly through NC-MIPS. Once you have completed the information requested on a page, click Next to proceed to the next page. NOTE: If any required fields are left blank, a message will prompt the user to complete the missing fields.

To change previously entered information, click the Previous Button to navigate back to the previous page. The typical Portal page navigation is shown below.
EH Meaningful Use Attestation Guide

New EH

Account Setup → Welcome → Logout Action

Login

Provider Status → Demographics → Contact Information → Patient Volume

Print, Sign, Send → Electronic Submit → Congratulations

Historical Cost/Report Data
Welcome
The Welcome page is the first page that you see when you access the NC-MIPS Portal via https://ncmips.nctracks.nc.gov/.

There may be announcements at the top of the page alerting you to attestation deadlines or EHR Incentive Program updates.

If you are a first-time user:

- Click the **First Time Account Setup** link.
  
The **First Time Account Setup** page opens.

If you are a returning user:

- Enter your NCID Username and NCID Password (if the NCID username has been updated since completing the First Time Account Setup, please select the **NCID Username and Update** option in the Sign In box to update the NCID username).
- Click **Login**.
  
The **Status** page opens.
First Time Account Setup
The First Time Account Setup page is used for setting up a NC-MIPS account.

If you already have an NCID Username and Password:

1. Enter CMS Registration ID.
2. Enter the same NPI used during CMS registration.
3. Enter the same Last 4 digits of EH’s SSN/EIN/TIN used during CMS registration.
4. Enter EH’s NCID Username.
5. Enter EH’s NCID Password.
6. Click Next.
   The Status page opens.
If you do not have an NCID Username and Password:

1. Click on the link for https://ncid.nc.gov.
2. The NCID login website displays in a new browser tab.
3. Click on the Register! link.
4. Select the type of account from the drop down list.
5. Click Submit.
6. Enter information in the required fields.
7. Click Create Account.
8. A new NCID account is created with the Username and Password you entered.
10. Enter the same CMS Registration ID.
11. Enter the same NPI used during CMS registration.
12. Enter the same Last 4 digits of SSN/EIN used during CMS registration.
13. Enter EH’s NC MPN.
14. Enter EH’s NCID Username.
15. Enter EH’s NCID Password.
16. Click Next.
The Status page opens.
NCID Username Update Tool

If the EH’s NCID username has been updated since completing a First Time Account Setup, use the NC-MIPS NCID Username Update Tool to update the EH’s NCID username in NC-MIPS.

To update the EH’s NCID username in NC-MIPS

1. Enter EH’s CMS Registration ID. This number is always provided by CMS after an EH registers on CMS’ Registration & Attestation (R&A) System.
2. Enter the same NPI used during CMS registration.
3. Click the Update NCID Username button.
4. Enter the EH’s new NCID username
5. Click Save.

Then the Welcome page will open so the EH can sign in by entering the updated NCID Username and the EH’s NCID Password.
Status
The Status page shows a history of all the attestations that you have completed or have in progress.

The Status page shows the:

- **Program Year** – the calendar year for which the EH attested.
- **Payment Year** – the participation year (1 and beyond).
- **Status** – an automatically updated description of where EH is in the attestation validation process for a submitted attestation.

Users are able to track their attestation as it moves through the attestation validation process, by logging into NC-MIPS and visiting the Status page. Possible statuses are:

- **Ready to Attest** - the EH may begin attesting.
- **Attestation in process** – the EH is in the process of attesting.
- **Closed – no attestation submitted** – no attestation was submitted for that Program Year.
- **Validating** – after the attestation is submitted, it will go through a series of validation checks and approvals at the state and federal levels.
- **Canceled** – The EH cancels their ‘in-process’ attestation, thereby signaling EH would not like to participate in the Program for the current calendar year.
Withdrawn – EH wants to remove the submitted attestation from consideration. The EH can return to proceed with a withdrawn attestation until the close of the program year. Please note, when an attestation is withdrawn, previously entered information is saved in the system.

Paid – the attestation has been paid.

Attestation Denied – attestation resulted in a denial.

Activity Date – date of your last activity.

There are four buttons that may be available for each attestation:

Proceed – proceed to the attestation.

Cancel – before submitting the attestation, stop this attestation so that you will not receive additional communication about it. This is not a permanent action. You may return to the attestation after you decide to cancel.

Withdraw – after submitting the attestation, remove the attestation from consideration. The contact person will no longer be contacted about an attestation that was withdrawn. This is not a permanent action. The EH may return to the attestation after the attestation is withdrawn.

Re-Attest – The provider may re-attest with the Program at any point after being denied.

View/Print – view the attestation in a form that can be printed.

If you are a new user, you will see only one attestation for the current program year. To proceed with an attestation:

1. Click Proceed for the attestation you want to continue.
2. The Demographics page opens, and from here you can navigate through the attestation process.

If you want to cancel participation in a given year:

1. Click Cancel for that program year.
2. You will see a pop-up warning message: “Canceling participation will stop communications regarding activities for this program year. You can reinstate the attestation any time by clicking Proceed.”
3. If you want to cancel the program year, click OK. The status changes to “Cancelled.”
4. If you do not want to cancel the program year, click Cancel. The warning message box closes with no action performed.

If you want to view or print an attestation:

1. Click View/Print for the attestation you want to view or print.
2. A PDF version of the attestation opens for you to view.
3. If you want to print the attestation, use the window controls for printing.
The Status page will pre-populate the providers’ status based on their history of participation in the Program.

Once they reach the Status page, EHs will see one of the scenarios described below. These scenarios are not for the given program year.

Example 1: ‘Program Year’ 2015 has expired, and the EH is ready to attest for 2016. The Program Year 2015 row will be marked as “Closed-No Attestation Submitted,” and the Program Year 2016 row will be active.

Example 2: The Program Year 2014 row is marked as ‘paid,’ the Program Year 2015 row has expired, and the EH is ready to attest for Program Year 2016. The Program Year 2015 row will be marked as “Closed-No Attestation Submitted.”
**Example 3a:** Program Year 2016 and Program Year 2017 are both active; therefore, the EH can choose to attest for either Program Year 2016 or Program Year 2017.

**Status**

<table>
<thead>
<tr>
<th>Program Year</th>
<th>Payment Year</th>
<th>Current Status</th>
<th>Activity Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>2017</td>
<td>1</td>
<td>Ready to Attest</td>
<td></td>
</tr>
<tr>
<td>2016</td>
<td>1</td>
<td>Ready to Attest</td>
<td></td>
</tr>
</tbody>
</table>

**Example 3b:** When the EH chooses to attest for Program Year 2016, the Program Year 2017 row will be deleted and the Program Year 2016 row will auto-populate to read “Attestation in Process.”

**Status**

<table>
<thead>
<tr>
<th>Program Year</th>
<th>Payment Year</th>
<th>Current Status</th>
<th>Activity Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>2016</td>
<td>1</td>
<td>Attestation in Process</td>
<td></td>
</tr>
</tbody>
</table>
Example 3c: The EH chooses to attest for Program Year 2017. When they do, a pop-up message will appear.
“Please note that choosing to attest for program year 2017 will close the previous year 2016 attestation. Do you wish to continue?”

Example 3d: If the EH selects ‘OK’ to the pop-up message, the Program Year 2016 row will be marked as “Closed-No Attestation Submitted,” and the Program Year 2017 row will auto populate to read, “Attestation in Process.” Alternatively, the EH may choose to “Cancel” the pop-up message, which will keep them on the page.
**Example 4:** If the previous payment year (i.e., Program Year 2016) has been ‘Denied’ the EH will be provided with two options:

- Scenario 1: Re-attest for the denied attestation; or,
- Scenario 2: Attest for the current program year.

**Scenario 1:** Program Year 2016 has been denied; however, the EH is ready to attest for Program Year 2017. When the EH chooses to re-attest for a denied 2016 payment, a Program Year 2016 row will auto-populate and the Program Year 2017 row will be removed. The EH chooses to re-attest by selecting the “Re-attest” button. A second Program Year 2016 row will auto-populate to read, “Attestation in Process.”

**Scenario 2a:** EH chooses to attest for Program Year 2017. If the EH selects the “OK” button when the pop-up message displays, then the EH will start with a Program Year 2017 attestation. The Program Year 2016 row will remain labeled as, “Attestation Denied.”

“Please note that choosing to attest for program year 2017 will close the previous year 2016
attestation. Do you wish to continue?”

**Scenario 2b:** Alternatively, the EH can select the “Cancel” button on the pop-up message box, and they will remain on the same page.

**Example 5:** If the EH wants to withdraw their attestation to address an attestation discrepancy or withdraw participation in a given program year:

1. Click *Withdraw* for that program year.
2. There will be a pop-up warning message: “By withdrawing participation, your submitted attestation will no longer be processed for payment and communications will stop regarding activities for this program year. You can restart the attestation at any time by clicking “Proceed”. Click OK to confirm.”
3. To withdraw the attestation, click *OK*. The status changes to “Attestation in Process.”
4. If the EH does not wish to withdraw the attestation, click *Cancel*. The warning message box closes with no action performed.
5. To resubmit an attestation, or make changes to an attestation, click the *Proceed* button to go into the attestation.

When an attestation is withdrawn, previously entered data is saved in the system, so you can update incorrect fields without re-entering all information. Please note, withdrawing pauses the attestation, so the help desk will no longer contact you about the attestation and no actions, such as denial, will be processed. Withdrawing is not a permanent action; you may return to continue the attestation until the close of the program year.

When the pop-up appears, click *OK* to confirm that you want to withdraw.
Demographics

This page allows EHs to review pertinent information from the CMS Registration & Attestation system and NCTracks to ensure that the identifying information is accurate in both systems.

If there are discrepancies between the information on file with CMS or NCTracks, please visit CMS’ R&A System or NCTracks to update the information.

To check the demographic information:

1. Review the EH’s NPI and CCN numbers.
2. Check NCTracks and verify the information matches between CMS and NCTracks. If the CMS information does not match, or is incorrect, please update the information with CMS or NCTracks before continuing.
3. If the information matches and is correct, click the Yes button for “Does the information above from CMS match that which is on file with NCTracks?”
4. Click Next.

The Contact Information page opens.

Please note, it takes up to two business days for the CMS update to be reflected in NC-MIPS.
Contact Information

This page is where you will enter the contact information for the person you want us to contact if there are issues with your attestation. If additional information is needed to validate your attestation, we will contact the person listed on this page. Email requests to update the contact person are not accepted. To update the contact person, withdraw, re-attest and update the information on this page.

To enter the primary contact person’s information:

1. Enter the contact’s first name.
2. Enter the contact’s last name.
3. Enter the contact’s job title.
4. Enter the contact’s work address.
5. Enter the contact’s work city.
6. Enter the contact’s work state.
7. Enter the contact’s zip code.
8. Enter the contact’s email address.
9. Enter the contact’s phone number with area code (enter 10 numbers).
10. Click Next.

The Patient Volume page opens.
Patient Volume

The Patient Volume page will help determine if you meet the Medicaid patient volume requirement for the program. Here you will enter the Total Medicaid Inpatient Acute Care Discharges, Total Medicaid Emergency Department (ED) Visits, Total Inpatient Acute Care Discharges, and Total ED Visits for your selected 90-day patient volume reporting period.

To be eligible to participate in the program, EHs are required to have a minimum of 10% of total patient encounters attributed to Medicaid patients.

This percentage is calculated by dividing the sum of the Total Medicaid Acute Care Inpatient Discharges and Total Medicaid ED Visits by the sum of Total Acute Care Inpatient Discharges and Total ED Visits in a continuous 90-day period during the preceding federal fiscal year or in the most recent continuous 12-month period for which data are available prior to the payment year.
To enter patient volume information:

1. Select the date range. From the drop-down box, choose either 12 months preceding today or previous fiscal year.
2. Enter the Start Date of the continuous 90-day period from the previous federal fiscal year or the most recent continuous 12-month period for which data are available prior to the payment year, using the calendar tool or by typing the date.
3. Enter the End Date of the continuous 90-day period from the previous federal fiscal year or the most recent continuous 12-month period for which data are available prior to the payment year, using the calendar tool or by typing the date.
4. Enter the EH’s NPI.
5. Enter the number of Medicaid Inpatient Acute Care Discharges.
6. Enter the number of Medicaid Enrolled Zero Pay Encounters (Acute Care).
7. Enter the number of Medicaid ED Visits.
8. Enter the number of Medicaid Enrolled Zero Pay Encounters (ED).
9. Enter the number of Total Inpatient Acute Care Discharges.
10. Enter the number of Total ED Visits.
11. The Medicaid Patient Encounters (PV numerator) are calculated and displayed.
12. The Total Patient Encounters (Denominator) are calculated and displayed.
13. The Medicaid PV Percentage is calculated and displayed.
14. Click Next.

The [Historical Cost Report Data](#) page opens.
Historical Cost Report Data

On the Historical Cost Report Data page you will be asked to provide the number of total discharges (if you are using CMS 2552-10, Worksheet S-3, Part I, Line 14, Column 15) from the last four full years of your hospital’s Medicaid cost reports. Less than four years of cost report data will only be accepted if the data is unavailable as a result of a merger, divestiture, CHOW, etc.

To attest to your historical cost report data:

1. Optionally enter the Start Date for 3rd prior year.
2. Optionally enter the End Date for 3rd prior year.
3. Optionally enter the number of Discharges for 3rd prior year.
4. Optionally enter the Start Date for 2nd prior year.
5. Optionally enter the End Date for 2nd prior year.
6. Optionally enter the number of Discharges for 2nd prior year.
7. Enter the Start Date for 1\textsuperscript{st} prior year.
8. Enter the End Date for 1\textsuperscript{st} prior year.
9. Enter the number of Discharges for 1\textsuperscript{st} prior year.
10. Enter the Start Date for Current Year.
11. Enter the End Date for Current Year.
12. Enter the number of Discharges for Current Year.
13. Click \textbf{Next}.
The \textbf{Congratulations} page opens.
Congratulations

Congratulations! You have completed the attestation questions. Click Next to continue to the Electronic Submission page.

1. Click Next to move to the Electronic Submission page.

The Electronic Submission page opens.
Electronic Submission

The Electronic Submission page is used to submit your electronic attestation and formally attest to the accuracy of the reported information.

To attest to the accuracy of the attestation of the reported information:

1. Read all the statements on the page.
2. If you agree, check the box for “I have read the above statements and attest to my responses.”
3. Click Next.

The Print, Sign, Send page opens.
Print, Sign, Send

Use the Print, Sign, Send page to print the attestation. The printed attestation must be signed and dated by an authorized representative/official of the hospital and sent to the NC-MIPS Help Desk.

The attestation must be physically signed and dated. Electronic signatures and stamps are not permissible. The signed attestation should be sent to the NC-MIPS Help Desk at NCMedicaid.HIT@dhhs.nc.gov.
Attestation Statements in Program Year 2018

For EHs, the summary PDF will include this section covering the attestation statements below. The EH’s authorized representative must review the attestation statements. Their signature is acknowledgement that the statements are true, accurate and complete.

By signing below, the authorized representative attests that this eligible hospital or CAH:

1. Acknowledges the requirement to cooperate in good faith with ONC direct review its health information technology certified under the ONC Health IT Certification Program if a request to assist in ONC direct review is received; and

2. If requested, cooperated in good faith with ONC direct review of its health information technology certified under the ONC Health IT Certification Program as authorized by 45 CFR part 170, subpart E, to the extent that such technology meets (or can be used to meet) the definition of CEHRT, including by permitting timely access to such technology and demonstrating its capabilities as implemented and used by the eligible hospital or CAH in the field.

3. Did not knowingly and willfully take action (such as to disable functionality) to limit or restrict the compatibility or interoperability of certified EHR technology.

4. Implemented technologies, standards, policies, practices, and agreements reasonably calculated to ensure, to the greatest extent practicable and permitted by law, that the certified EHR technology was, at all relevant times—
   a. Connected in accordance with applicable law;
   b. Compliant with all standards applicable to the exchange of information, including the standards, implementation specifications, and certification criteria adopted at 45 CFR part 170;
   c. Implemented in a manner that allowed for timely access by patients to their electronic health information; and
   d. Implemented in a manner that allowed for the timely, secure, and trusted bi-directional exchange of structured electronic health information with other health care providers (as defined by 42 U.S.C. 300jj(3)), including unaffiliated providers, and with disparate certified EHR technology and vendors.

5. Responded in good faith and in a timely manner to requests to retrieve or exchange electronic health information, including from patients, health care providers (as defined by 42 U.S.C. 300jj(3)), and other persons, regardless of the requestor’s affiliation or technology vendor.
Next Steps

Be sure to email the signed attestation and any supporting documentation to the NC- MIPS Help Desk at NCMedicaid.HIT@dhhs.nc.gov within seven days of submitting the attestation through NC–MIPS. We cannot begin the validation process until we have received the email with the required documents.

EHs can return to the NC-MIPS Portal at https://ncmips.nctracks.nc.gov anytime to review the status of an attestation(s) on the Status Page. It typically takes 12 – 15 weeks to complete the validation process, however, it can be longer for attestations received during our high-volume peak time of March through April.

If we find issues while validating an attestation, we will conduct outreach via email if time allows. Then an EH will have up to 15 calendar days to address any issues. Attestations submitted within 30 days of the close of the tail period are not guaranteed to be reviewed prior to that deadline, so it is extremely important that EHs review their attestation before submitting.

The deadline to attest for the NC Medicaid EHR Incentive Program for Program Year 2018 is April 30, 2019. All Program Year 2018 attestations must be submitted through NC-MIPS. The information submitted on NC-MIPS must be complete and valid by April 30, 2019. We will not accept memorandums in lieu of accurate information submitted through NC-MIPS. NC-MIPS will close for Program Year 2018 on April 30, 2019 so no changes may be made to the attestation after this date. We guarantee to review the provider’s attestation, and conduct outreach if needed, if we receive the signed attestation and required documentation via email by February 28, 2019.

If the EH withdraws and re-attests, they must submit a new, updated signed attestation.

Typically speaking, payments are made via electronic funds transfer (EFT). If in the rare case a paper check is issued, the check will be sent to the address associated with the payee NPI that is on file with NCTracks. Please be sure the address on file with NCTracks is accurate.

Once the payment has been processed, the payment will be noted in the Financial Summary section of the Medicaid Remittance Advice.

Thank you for participating in the NC Medicaid EHR Incentive Program. We look forward to working with you to achieve meaningful use and improve patient care.