

10 Things You'll Need to do to Apply for the EHR Incentive Program

1. **National Provider Identified (NPI)** – You will need to have a National Plan and Provider Enumeration System (NPPES) web user account. If you don't have an NPI, visit CMS's site to apply for one. www.cms.gov
2. **Tax Identification Number (TIN)** – Need a TIN? Visit www.irs.gov.
3. Register at CMS's EHR Incentive Program Registration site --
<https://ehrincentives.cms.gov/hitech/login.action>.
4. Medical License – Locate information related to your medical license such as your license number and effective dates
5. You must have an active Alabama Medicaid Provider Number. To enroll or check the status of your enrollment, visit the enrollment site --
http://medicaid.alabama.gov/CONTENT/8.0_Contact/8.2.5_Provider_Enrollment.aspx.
6. Create a SLR account to register for the Alabama Medicaid EHR Incentive Program.
<https://al.araaincentive.com>
7. Identify an individual who will be the contact for your application – you'll need that person's name, phone and e-mail
8. Certified EHR info –
 - Identify and verify that your Certified EHR technology is on the list from ONC and obtain the certification number: <http://oncchpl.force.com/ehrcert?q=chpl>
 - Describe the method of attesting for AIU – adopt, implement or upgrade. Also, obtain documents supporting the purchase or upgrade of your certified EHR system and create or locate an electronic copy of the documentation supporting the purchase. Acceptable documentation includes: receipts for software from the EHR vendor; sales contracts, service/performance agreement, or upgrade agreement.
 - For Meaningful Use (MU) attestations, include documentation supporting purchase only if system is different from prior year.
9. Determine the Medicaid Patient volume you'll be reporting – Eligible Professionals must demonstrate 30% Medicaid patient volumes for a representative 90 day period (3 calendar months in Alabama) in the previous calendar year. Pediatricians may demonstrate a minimum of 20% patient volumes to qualify for a reduced incentive amount.

Patient volumes are based on unique patient encounter per day for the 90 day period. In certain circumstances (if you practice in an FQHC or RHC), you may also be able to count Medically Need patient volumes to help you meet the eligibility requirements.

Your patient volume information must come from an auditable data source, so you must be able to provide documentation that supports your volumes.

10. Ensure that you have access to a scanner or electronic faxing technology such as RightFax™.