

Medicaid Readiness Assessment Checklist for Eligible Hospitals (EHs)

This checklist will ensure you have all the information collected for the Medicaid EHR Incentive Program registration and attestation processes.

Step F1: CMS Registration - <https://ehrincentives.cms.gov>

Complete this step prior to registering with AHCCCS. The following information is needed:

<input type="checkbox"/>	CMS Certification Number (Hospitals only) (CCN)
<input type="checkbox"/>	National Provider Identifier (NPI) – Source: https://nppes.cms.hhs.gov/NPPES/Welcome.do
<input type="checkbox"/>	National Plan and Provider Enumeration System (NPPES) Web Account Log in ID and password – Source: https://nppes.cms.hhs.gov/NPPES/Welcome.do
<input type="checkbox"/>	Provider Enrollment, Chain and Ownership System (PECOS) record – Source: http://www.cms.gov/EHRIncentivePrograms/Downloads/Medicare_EP_PECOS_Notification_61110.pdf
<input type="checkbox"/>	CMS Identity & Access Management User ID & Password (I&A) – Source: https://nppes.cms.hhs.gov/NPPES/IASecurityCheck.do
<input type="checkbox"/>	EHR Certification Number – Source: http://onc-chpl.force.com/ehrcert
<input type="checkbox"/>	Payee Tax Identification Number (TIN)
<input type="checkbox"/>	EHR Incentive Program (recommended to select “Both Medicare and Medicaid”)
<input type="checkbox"/>	State (Medicaid EHR State)
<input type="checkbox"/>	Email address (use the same email address here and when registering with AHCCCS)

Step S1: AHCCCS Registration - <https://www.azepip.gov> (Available July 25, 2011)

Once you complete Step F1/ CMS Registration, proceed to the AHCCCS EHR Electronic Provider Incentive Payment (ePIP) System to register. Allow 24-48 hours after registering with CMS before registering with AHCCCS. The following information is needed:

<input type="checkbox"/>	AHCCCS Provider ID
<input type="checkbox"/>	CMS Certification Number (Hospitals only) (CCN) (Identified in Step F1)
<input type="checkbox"/>	National Provider Identifier (NPI) (Identified in Step F1)
<input type="checkbox"/>	CMS Registration ID (Obtained in Step F1)
<input type="checkbox"/>	EHR Certification Number (Identified in Step F1)
<input type="checkbox"/>	National Provider Identifier (NPI) (Identified in Step F1)
<input type="checkbox"/>	Payee Tax Identification Number (TIN)

Step S2: AHCCCS A/I/U (Adopt/Implement/Upgrade) Attestation - <https://www.azepip.gov> (Available September 1, 2011)

To attest to A/I/U of a certified EHR system for receipt of your incentive payment, the following information is needed:*

<input type="checkbox"/>	EHR Certification Number (Identified in Step F1)
<input type="checkbox"/>	ePIP Web Account Log in ID and Password (Obtained in Step S1)
<input type="checkbox"/>	CMS Certification Number (Hospitals only) (CCN) (Identified in Step F1)
<input type="checkbox"/>	Medicaid Emergency Department Discharges
<input type="checkbox"/>	Medicaid Inpatient Discharges
<input type="checkbox"/>	Medicaid Inpatient Bed-days
<input type="checkbox"/>	Patient Volume Reporting Period
<input type="checkbox"/>	Provider Type
<input type="checkbox"/>	Total Charity Care Charges
<input type="checkbox"/>	Total Emergency Department Discharges
<input type="checkbox"/>	Total Hospital Charges
<input type="checkbox"/>	Total Inpatient Days
<input type="checkbox"/>	Total Inpatient Discharges
<input type="checkbox"/>	Total Inpatient Bed Days

**Important Note: Please see the Medicaid EHR Reference Guide for Eligible Hospitals prepared by AHCCCS for complete details about each requirement outlined above for Step S2.*

A collaboration of: