

## Medicaid Readiness Assessment Checklist for Eligible Professionals (EPs)

This checklist will ensure you have all of 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 (available July 1, 2011). The following information is needed:

<input type="checkbox"/>	National Provider Identifier (NPI) – Source: <a href="https://nppes.cms.hhs.gov/NPPES/Welcome.do">https://nppes.cms.hhs.gov/NPPES/Welcome.do</a>
<input type="checkbox"/>	National Plan and Provider Enumeration System (NPPES) Web Account Log in ID and password – Source: <a href="https://nppes.cms.hhs.gov/NPPES/Welcome.do">https://nppes.cms.hhs.gov/NPPES/Welcome.do</a>
<input type="checkbox"/>	EHR Certification Number – Source: <a href="http://onc-chpl.force.com/ehrcert">http://onc-chpl.force.com/ehrcert</a>
<input type="checkbox"/>	Payee Tax Identification Number (TIN)
<input type="checkbox"/>	Eligible Professional Type
<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"/>	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"/>	Payee Tax Identification Number (TIN) (Identified in Step F1)

### 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 User ID and Password (Obtained in Step S1)
<input type="checkbox"/>	Proof of A/I/U (Vendor Contract/Paid Invoice)
<input type="checkbox"/>	Group Practice Demographics
<input type="checkbox"/>	Group Practice Patient Volume Methodology
<input type="checkbox"/>	Eligible Professional Type (Identified in Step F1)
<input type="checkbox"/>	Medicaid Patient Encounters (Arizona and out-of-state)
<input type="checkbox"/>	Total Patient Encounters
<input type="checkbox"/>	Patient Volume Reporting Period
<input type="checkbox"/>	Total Claims

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

A collaboration of: