Meaningful Use is an incentive program for providers. It uses Certified Electronic Health Record Technology (CEHRT) to:

- Improve the quality, safety and efficiency of medical records
- Reduce health disparities
- Improve care coordination and population and public health
- Maintain privacy and security of patient health information
- Engage patients and their families in medical care

You can receive up to $63,750 in Meaningful Use incentive payments from the Medicaid Electronic Health Record (EHR) Incentive Program.

**Eligibility:** To receive a Meaningful Use incentive payment, you must join the Medicaid EHR Incentive Program by the end of the 2016 reporting year.

**Eligible provider types under the Medicaid Incentive Program:**

- Physicians (MD and DO)
- Dentists (DMD and DDS)
- Physician assistants who oversee a Federally Qualified Health Center
- Nurse practitioners
- Certified nurse midwives

To learn more about Meaningful Use and how to participate in the Medicaid EHR Incentive Program, email NYC REACH at pcip@health.nyc.gov or visit www.nycreach.org.
Proper EHR documentation of tobacco-use treatment helps patients become tobacco-free. It also helps you meet certain incentive requirements for Meaningful Use, Physician Quality Reporting System (PQRS) and Patient-Centered Medical Home (PCMH), and can increase reimbursement from most insurers.

### What You Need to Do

**Document smoking status**

- Assess smoking status and update the patient’s progress in the EHR at every visit.

  *Note: Some light and non-daily smokers may not self-identify as “smokers,” so it’s important to ask about smoking pattern.*

**Document the treatment plan**

- Provide counseling, pharmacotherapy – including combination regimens – community referrals and follow-up. Update the patient’s progress in the EHR at every visit.

**Code for smoking cessation interventions**

- Use the correct billing codes to ensure reimbursement for treatment interventions.

### Incentive Requirements by Program

**Meaningful Use**

- Document smoking/tobacco status for all patients 13 years of age and older.

  *Note: Confirm with your EHR vendor that your EHR can capture this information.*

**NCQA Patient-Centered Medical Home (PCMH) 2014 Recognition**

- Document smoking/tobacco status and track treatment interventions to achieve NCQA PCMH recognition.

**Physician Quality Reporting System (PQRS)**

- Report measure 226 (screen and counsel identified tobacco users) via claims-based reporting.

  *Note: Completing this requirement will prevent the 2017 Medicare Part B payment adjustment.*

*Smoking/tobacco cessation counseling is billable and is accepted by most insurance companies. Reimbursement is between $12 and $34 per code and varies by carrier and your contract arrangements. NYC REACH offers billing and reimbursement support.*

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