Connecticut Medicaid Electronic Health Record Incentive Program

Hospital Incentive Program Eligibility

Acute care hospitals and children's hospitals enrolled in the Medicaid program are eligible to participate in the EHR incentive program.

To be eligible for an EHR incentive payment for each year the eligible hospital (EH) seeks an EHR incentive payment, the EH must meet the following criteria:

- An acute care hospital must have at least a 10 percent Medicaid patient volume for each year for which the hospital seeks an EHR incentive payment.
- A children's hospital is exempt from meeting a patient volume threshold.

DSS will provide incentive payments to eligible hospitals over a 3-year period. Incentive payments to hospitals will be distributed at 50, 30 and 20% respectively.

In the first year of the incentive program, the EH must demonstrate that during the payment year, it has adopted, implemented, or upgraded certified EHR technology.

In the two subsequent payment years, the EH must demonstrate that it has been a meaningful user during the EHR reporting period for the applicable payment year.

Calculating Patient Volume

A Medicaid enrolled acute care hospital must annually meet patient volume requirements. To calculate Medicaid patient volume, divide –

- ✓ The total CT Medicaid encounters in any representative, continuous 90-day period in the preceding fiscal year; by
- ✓ The total encounters in the same 90-day period.

For purposes of calculating hospital patient volume a Medicaid encounter means -

- Services rendered to a HUSKY A, HUSKY C (Previously known as Medicaid Fee-for-Service) or HUSKY D (previously known as Medicaid for Low Income Adults MLIA) individual per inpatient discharge; or,
- Services rendered in an emergency department (ED) in any one day to a HUSKY A, HUSKY C or HUSKY D individual.

EXAMPLE: The hospital is applying to the EHR Incentive Program in Federal Fiscal Year 2011 (Oct 1, 2010 – Sept 30, 2011). The following is an example of a representative, consecutive 90-day period from the previous federal fiscal year



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April 1, 2010 – June 29, 2010 - FFY 2010	
Medicaid FFS, MLIA, and HUSKY A Inpatient Discharges and ED Visits	2,225
Total Hospital Inpatient Discharges and ED Visits	6,725

The eligibility calculation is as follows:

(Medicaid Discharges + Medicaid ED Visits)

(Total Discharges + Total ED Visits)

(2,225) = Medicaid Patient Volume

(6,725) 33%

