



Notable Differences between the Medicare and Medicaid EHR Incentive Programs

Medicare	Medicaid
Federal Government will implement (will be an option nationally)	Voluntary for States to implement (may not be an option in every State)
Payment reductions begin in 2015 for providers that do not demonstrate Meaningful Use	No Medicaid payment reductions
Must demonstrate MU in Year 1	A/I/U option for 1 st participation year
Maximum incentive is \$44,000 for EPs (10% bonus for EPs in HPSAs)	Maximum incentive is \$63,750 for EPs
Meaningful Use definition is common for Medicare	States can adopt certain additional requirements for Meaningful Use
Last year a provider may initiate program is 2014; Last year to register is 2016; Payment adjustments begin in 2015	Last year a provider may initiate program is 2016; Last year to register is 2016
Only physicians, subsection (d) hospitals and CAHs	5 types of EPs, acute care hospitals (including CAHs) and children's hospitals

Acronym Translation

A/I/U – Adopt, Implement or Upgrade
 CAH – Critical Access Hospital
 EHR – Electronic Health Record
 EP – Eligible Professional
 HPSA – Health Professional Shortage Area