On March 30, 2015, the Centers for Medicare and Medicaid Services (CMS) released a Proposed Rule outlining the requirements for Stage 3 of Meaningful Use. Following this proposed rule, CMS released another Proposed Rule on April 15, 2015 suggesting changes to Meaningful Use for years 2015-2017.

Although none of the suggested changes to the EHR Incentive Program found in either Proposed Rule are final, it is likely that some suggested changes will be finalized.

**The proposed major changes to the EHR Incentive Program for years 2015 through 2017 include:**

1. Moving all providers submitting Meaningful Use to a calendar-year EHR Reporting Period;
2. Allowing for a 90-day reporting period for all Meaningful Users for 2015, only;
3. Removing those Meaningful Use measures that are redundant, duplicative, or “topped out”; and
4. Making changes to actual Meaningful Use measures and restructuring the total number of measures to align with the Stage 3 structure of Meaningful Use.

In order to make these changes to the National Level Repository (NLR), CMS has already or will soon be preventing Eligible Professionals (EP) and Eligible Hospitals (EH) from attesting to Meaningful Use for 2015 until after January 1, 2016.

Because Maryland will need to make similar changes to eMIPP, we will be preventing EPs and EHs from attesting with Maryland beginning on Monday, July 20, 2015.

Between July 20, 2015 and January 2016, Maryland will be updating eMIPP to accommodate the changes made to the EHR Incentive Program for 2015-2017. When eMIPP comes back online in January, providers and hospitals will have an opportunity to submit their attestations for Program Year 2015.

From July 20, 2015 until eMIPP is back online in January, the EHR Incentive Program Team and Maryland’s Health Information Exchange (HIE) and Meaningful Use Resource Center (CRISP) will be collecting any questions from providers and hospitals. We will also assist providers by reviewing patient volume and Meaningful Use objectives. Please submit questions or requests for patient volume or Meaningful Use review to CRISP by calling 1-877-952-7477 or via email at support@crisphealth.org.

DHMH and CRISP will also work together to assist providers and hospitals to understand the rule changes by hosting educational webinars, publishing tip sheets and tools on the Resource Center, and providing one-on-one assistance.

We appreciate your patience while we make the necessary changes to our system and policies to accommodate CMS rulemaking. For more information, visit the Meaningful Use Resource Center at: https://meaningfuluse.crisphealth.org/.