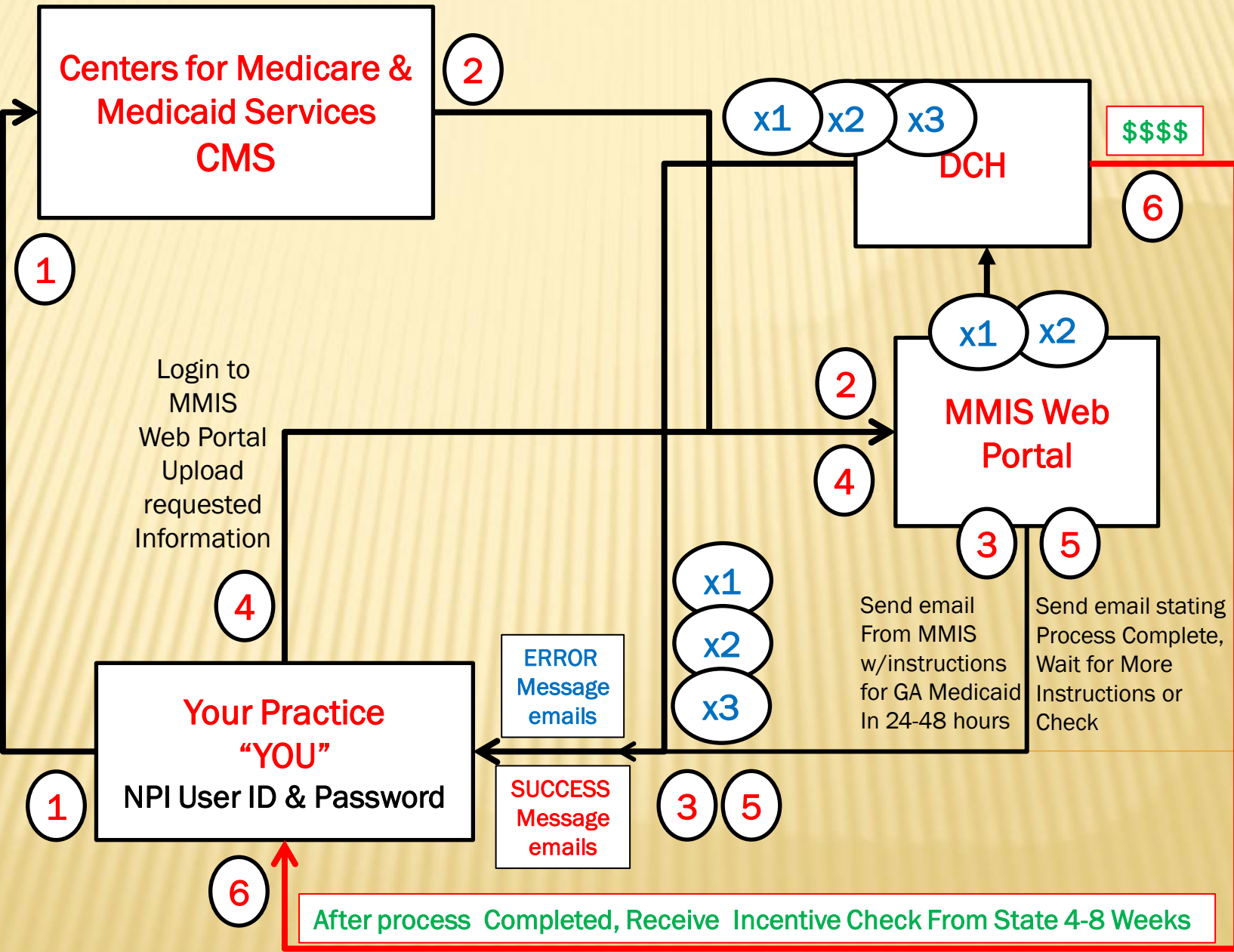


# Medicaid Registration/Payment Process



Pristine  
Technology  
Solutions  
Inc.

Register  
w/CMS





3

# Medicaid Registration Email

**\*\*\* This is the email you will \*\*\***

**RECEIVE AFTER YOU REGISTER WITH CMS**

From: <[noreply@gammis.com](mailto:noreply@gammis.com)>

Date: Thu, Sep 8, 2011 at 1:00 PM

Subject: John Doe - 1234567890 Georgia Medicaid Electronic Health Records (EHR) Incentive Program - Registration -

To: [lenny@pristechsolutions.com](mailto:lenny@pristechsolutions.com)

Dear Applicant:

Congratulations, you have successfully completed the Medicare and Medicaid EHR Incentives Program Registration and Attestation System (R&A) process. This is the initial step in applying for the Georgia Medicaid EHR Incentive Program. Your information has been sent to the Medical Assistance Provider Incentive Repository (MAPIR) which is the Georgia Department of Community Health's web-based EHR incentives program application system.

You are now ready to apply for the Georgia Medicaid EHR Incentive Program payment in MAPIR. The application may be accessed after you log into the MMIS Web Portal at <https://www.mmis.georgia.gov/portal/default.aspx>. Please follow the on-screen instructions as you proceed through the application process.

Please visit our website at [www.dch.georgia.gov/ehr](http://www.dch.georgia.gov/ehr) for more information. If you have any questions, please contact the Office of Health Information Technology at [MedicaidIncentives@dch.ga.gov](mailto:MedicaidIncentives@dch.ga.gov).

Sincerely,  
Department of Community Health  
Office of Health Information Technology  
Medicaid EHR Incentive Program

Please note: All correspondence regarding the Georgia Medicaid EHR Incentives Program is sent via email.



5

# Medicaid Registration Email

**\*\*\* This is the email you will receive  
AFTER YOU COMPLETE YOUR REGISTRATION  
with the State \*\*\***

From: <[no-reply@gammis.com](mailto:no-reply@gammis.com)>

Date: Wed, Sep 14, 2011 at 2:08 PM

Subject: John Doe- 1234567890 Georgia Medicaid Electronic Health Records (EHR) Incentive Program - Application Submitted -

To: [lenny@pristechsolutinos.com](mailto:lenny@pristechsolutinos.com)

Dear Applicant:

Thank you for applying for a Georgia Medicaid Electronic Health Records (EHR) Incentive Program payment. This letter is to confirm that we have received your completed application through the Medical Assistance Provider Incentive Repository (MAPIR).

During the review of your application, if additional information is needed to determine your eligibility, we will contact you. We anticipate that our review process will take approximately 7-10 business days.

Please visit our website at [www.dch.georgia.gov/ehr](http://www.dch.georgia.gov/ehr) for more information. If you have any questions, please contact the Office of Health Information Technology at [MedicaidIncentives@dch.ga.gov](mailto:MedicaidIncentives@dch.ga.gov).

Thank you again for applying to participate in the Georgia Medicaid EHR Incentive Program.

Sincerely,

Department of Community Health  
Office of Health Information Technology  
Medicaid EHR Incentive Program

Please note: All correspondence regarding the Georgia Medicaid EHR Incentive Program is sent via email.



x1

# Medicaid Registration Email

This is the email you will receive if you  
**ENCOUNTER A PROBLEM**  
with your Registration with the State

**From:** "noreplyhospcalc" <[noreplyhospcalc@dch.ga.gov](mailto:noreplyhospcalc@dch.ga.gov)>

**Date:** September 22, 2011 10:56:50 AM EDT

**To:** <lenny@pristehcsolutions.com>

**Subject:** Notice of Georgia Medicaid Electronic Health Records (EHR) Incentive Program Application Denial

Dear Applicant:

This notification is to inform you that, upon further review of your application, we are unable to approve your application for a Georgia Medicaid EHR Incentive Program payment.

Please upload your Patient Volume Calculator and evidence of your Adoption, Implementation or Upgrade of certified EHR technology in the MAPIR system and your application will be re-reviewed.

If you have any questions, please contact the Office of Health Information Technology at [MedicaidIncentives@dch.ga.gov](mailto:MedicaidIncentives@dch.ga.gov).

Thank you for your interest in the Georgia Medicaid EHR Incentive Program.

Sincerely,  
Department of Community Health  
Office of Health Information Technology  
Medicaid EHR Incentive Program

Please note: All correspondence regarding the Georgia Medicaid EHR Incentive Program is sent via email.



x2

# Medicaid Registration Email

**This is the email you will receive if your  
INFORMATION ENTERED IN CMS DOES NOT MATCH  
Information in MMIS.**

From: **noreplyhospcalc** <[noreplyhospcalc@dch.ga.gov](mailto:noreplyhospcalc@dch.ga.gov)>

Date: Mon, Oct 3, 2011 at 8:38 AM

Subject: Notice of Georgia Medicaid Electronic Health Records (EHR) Incentive Program - Provider Mismatch Information

To: [lenny@pristechsolutions.com](mailto:lenny@pristechsolutions.com)

Dear Applicant:

This notification is to inform you that the information provided during the Registration and Attestation (R&A) registration process does not match that on file with the state Medicaid Management Information System (MMIS) system. The MMIS system does not contain a payee record for the NPI and TIN combination received from the R&A. Please contact the R&A to correct this issue.

Sincerely,

Department of Community Health  
Office of Health Information Technology  
Medicaid EHR Incentive Program

Please note: All correspondence regarding the Georgia Medicaid EHR Incentive Program is sent via email.



x3

# Medicaid Registration Email

**This is the email you will receive the first email and  
HAVE NOT COMPLETED THE MEDICAID INCENTIVE PROGRAM  
application.**

From: <[no-reply@gammis.com](mailto:no-reply@gammis.com)>

Date: Mon, Oct 3, 2011 at 8:00 AM

Subject: Lenny Swinson- 1234567890 Notice of Georgia Medicaid Electronic Health Records (EHR) Incentive Program Application Inactivity -

To: lenny@pristechsolutions.com

Dear Applicant:

This notification is to inform you that it has been more than 14 days since there was activity on your Georgia Medicaid EHR Incentives Program application. Your application status is currently 'Incomplete.' Please log into the MMIS Web Portal at [www.mmis.georgia.gov](http://www.mmis.georgia.gov) to complete your application within 14 days to prevent the deletion of your partially completed application.

If you need assistance with completing your application please visit our website and review the appropriate user guide at [www.dch.georgia.gov/ehr](http://www.dch.georgia.gov/ehr) for more information. For other questions, please contact the Office of Health Information Technology at [MedicaidIncentives@dch.ga.gov](mailto:MedicaidIncentives@dch.ga.gov).

Sincerely,

Department of Community Health  
Office of Health Information Technology  
Medicaid EHR Incentive Program

Please note: All correspondence regarding the Georgia Medicaid EHR Incentive Program is sent via email. No Provider activity until submitted.



# Medicaid Registration Email

**This is the ERROR Message you get while registering if your  
NPI and TIN entered in CMS does NOT match  
the one in MMIS**

The MMIS system does not contain a payee record for the NPI and TIN combination received from the R&A. Please contact the Georgia Department of Community Health (DCH) or the R&A to resolve this issue.

You will not be able to Submit your application until this issue is resolved. You may however continue with the application process.

The MMIS system does not contain a payee record for the NPI and TIN combination received from the R&A. Please contact the Georgia Department of Community Health (DCH) or the R&A to resolve this issue.

You will not be able to Submit your application until this issue is resolved. You may however continue with the application process.

**MMIS Error**