# Wisconsin Medicaid Promoting Interoperability Program Eligible Professional Attestation Guidance for the Stage 3 Public Health and Clinical Data Registry Reporting Objective

This document contains attestation guidance for the Stage 3 Public Health and Clinical Data Registry Reporting Objective for Eligible Professionals.

The ultimate goal of receiving public health data from Eligible Professionals is to improve surveillance capabilities and use the data collected to positively affect the care of patients in Wisconsin. Several Wisconsin Department of Health Services (DHS) Division of Public Health (DPH) programs have declared readiness to receive public health data from certified EHR technology (CEHRT) for the purposes of the Medicaid Promoting Interoperability (PI) Program. Eligible Professionals who collect relevant public health data are invited to coordinate with these DPH programs to send production data from CEHRT. This document recommends actions for Eligible Professionals to take to begin sending public health data to DPH programs and provides attestation guidance to help determine if they are ready to attest to the Public Health and Clinical Data Registry Reporting Objective.

**How to Use This Document**: Answer the numbered questions in Sections 1 and 2. Each section contains multiple questions that will help guide you in determining how to properly attest to the Public Health and Clinical Data Registry Reporting Objective.

- Section 1: Background—This section contains questions to determine if the Eligible Professional is both eligible to submit data to the relevant DPH programs and eligible to participate in the Medicaid Promoting Interoperability Program.
- Section 2: Measure Specific Guidance—This section helps the Eligible Professional determine if he or she is ready to attest to the Public Health and Clinical Data Registry Reporting Objective.

Depending on your responses to the yes and no questions, you will be provided with a suggested action or specific guidance. Each possible response contains a bolded **Recommended Action** and/or **Attestation Guidance** to assist you with properly attesting to the Stage 3 Public Health and Clinical Data Registry Reporting Objective:

- **Recommended Actions** help guide you through the sections of this document and list actions DPH recommends you take to begin sending public health data to a DPH program.
- Attestation Guidance helps you determine if you are ready to attest to the Public Health and Clinical Data Registry Reporting Objective.

**IMPORTANT**: Before answering the questions in the sections below, you should be familiar with the detailed requirements for successfully attesting to the Public Health and Clinical Data Registry Reporting Objective. Refer to the <u>Appendix</u> at the end of this document, or visit the <u>Public Health Meaningful Use Reporting</u> <u>Guidance webpage</u> for this information.

# Section 1: Background

**Instructions:** The questions below will help you determine if you are both eligible to submit data to the relevant DPH programs and eligible to participate in the Wisconsin Medicaid PI Program. This section contains two questions and guidance for each possible response. Your response to the question(s) will guide you through the document and determine if you should proceed to Section 2.

Start by reading Question 1. Answer the question and read the information corresponding to your response.

Question 1: Do you have the 2	2015 Edition of certified electro	nic health record technology					
(CEHRT)?							
	only accept data submitted from EH	IR technology certified to the					
current federal standards.							
YES	DO NOT KNOW	NO					
<b>Recommended Action:</b> Once you have confirmed your EHR technology is certified to the current federal standards, proceed to Question 2 below.	<b>Recommended Action:</b> If you are unsure about your EHR certification, check with your EHR vendor or verify using the <u>Certified Health IT Product List</u> .	<b>Recommended Action:</b> If you do not have EHR technology certified to the current federal standards, do not register your intent to submit data to DPH programs.					
Question 2: Are you an Eligible Program in a previous Program	e Professional who has particip n Year?	ated in the Medicaid PI					
Program in a previous Program Healthcare professionals must mee additionally, Program Year 2016 wa		receive incentive payments;					
Program in a previous Program Healthcare professionals must mee	n Year? et eligibility criteria defined by law to	receive incentive payments;					
Program in a previous Program Healthcare professionals must mee additionally, Program Year 2016 wa Program. YES	n Year? et eligibility criteria defined by law to as the last year for providers to initia	o receive incentive payments; Ite participation in the Medicaid Pl					
Program in a previous Program Healthcare professionals must mee additionally, Program Year 2016 wa Program. YES This document provides guidance	m Year? et eligibility criteria defined by law to as the last year for providers to initia <b>DO NOT KNOW</b> For Medicaid PI Program participation history, log in to the	o receive incentive payments; Ite participation in the Medicaid P NO					
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Program in a previous Program Healthcare professionals must meet additionally, Program Year 2016 wa Program. YES This document provides guidance to Eligible Professionals intending to attest to the Wisconsin	n Year? et eligibility criteria defined by law to as the last year for providers to initia <b>DO NOT KNOW</b> For Medicaid PI Program participation history, log in to the Centers for Medicaid & Medicaid Services ( <u>CMS) Promoting</u>	o receive incentive payments; the participation in the Medicaid P <b>NO</b> If you are not an Eligible Professional, this document may					

This concludes Section 1: Background. These questions were asked to determine if an Eligible Professional is both eligible to submit data to DPH programs detailed in this document and eligible to participate in the Wisconsin Medicaid PI Program. If you have been instructed to do so, proceed to Section 2 on Page 3.

# Section 2: Measure-Specific Guidance

**Instructions:** The questions below will help you determine if you are ready to attest to the Public Health and Clinical Data Registry Reporting Objective. This section contains a table for each of the five public health measures available to Eligible Professionals. Each measure contains questions that help identify whether the relevant DPH program is collecting data from Eligible Professionals like you and whether you have taken actions required to begin sending public health data to the program. Your response to the questions will guide you through the document.

For each measure, start by reading Question 1. Answer the question, read the information corresponding to your response, and continue to the next question or measure.

Measure 1: Immunization Registry Reporting					
Question 1: Do you administer immunizations?					
YES NO					
DPH is collecting immunization data from Eligible Professionals who administer immunizations.	DPH is <b>not</b> establishing connections to Eligible Professionals who do not administer immunizations.				
<b>Recommended Action:</b> Proceed to Question 2 on Page 4.	Attestation Guidance: Determine which exclusion may be applicable to you. For more information on the public health reporting exclusions, review the Public Health Meaningful Use Reporting Guidance webpage.Recommended Action: Proceed to Measure 2: Syndromic Surveillance Reporting.				

## **Measure 1: Immunization Registry Reporting**

Question 2: Did you register to submit immunization data to DPH? In Wisconsin, this registration is completed by submitting a registration form through the <u>Public Health</u> <u>Registration for Electronic Data Submission System (PHREDS)</u>.

YES	DO NOT KNOW	NO
Attestation Guidance: Eligible	<b>Recommended Action:</b> If you are	<b>Recommended Action:</b> All Eligible
Professionals who have registered	not sure if a PHREDS registration	Professionals should register with
with DPH and believe they have	form already exists for your	DPH for the public health
taken proper actions to meet the	organization, email	program(s) to which they intend
measure should choose the active	<u>dhsehealth@dhs.wisconsin.gov</u>	to electronically submit data. For
engagement option that most	with the subject line "Confirm	additional information on how to
closely reflects their current	Existing Registration Form" and	register, review the <u>Public Health</u>
status.	provide the name of your	<u>Meaningful Use webpage</u> .
	organization.	Attestation Guidance: Eligible Professionals who believe they have taken proper actions to meet the measure should choose the active engagement option which most closely reflects their current status.

## Measure 2: Syndromic Surveillance Reporting

Question 1: Are you in a category of providers from which ambulatory syndromic surveillance data is collected by Wisconsin?

Refer to <u>Appendix B</u> to determine if data is being collected from your Provider Type and Specialty.

## YES

#### Program Year 2020 Guidance

Prior to January 1, 2021, Wisconsin DPH did not collect syndromic surveillance data from any category of Eligible Professional unless the Eligible Professional was already in production sending syndromic surveillance data. Therefore, Eligible Professionals who were not submitting production data prior to January 1, 2021 qualify to meet Exclusion 3: "Operates in a jurisdiction where no PHA has declared readiness to receive syndromic surveillance data from Eligible Professionals at the start of the EHR reporting period" for the purposes of attesting to the Syndromic Surveillance Reporting Measure for Program Year 2020.

# **Program Year 2021 Guidance Recommended Action:** Proceed to Question 2 below.

#### NO

If you are not in a category of providers from which ambulatory syndromic surveillance data is collected, based on your Provider Type and Specialty codes, you qualify to meet Exclusion 1: "Is not in a category of providers from which ambulatory syndromic surveillance data is collected by their jurisdiction."

If you are not an Eligible Professional, this document may not provide you with proper guidance. This document provides guidance to Eligible Professionals intending to attest to the Wisconsin Medicaid PI Program.

#### Question 2: Did you register to submit syndromic surveillance data to DPH? In Wisconsin, this registration is completed by submitting a registration form through <u>PHREDS</u>.

### YES

Attestation Guidance: Eligible Professionals who have registered with DPH and believe they have taken proper actions to meet the measure should choose the active engagement option that most closely reflects their current status.

# DO NOT KNOW

**Recommended Action:** If you are not sure if a PHREDS registration form already exists for your organization, email

<u>dhsehealth@dhs.wisconsin.gov</u> with the subject line "Confirm Existing Registration Form" and provide the name of your organization.

## NO

**Recommended Action:** All Eligible Professionals should register with DPH for the public health program(s) to which they intend to electronically submit data. For additional information on how to register, review the <u>Public Health Meaningful Use</u> <u>webpage</u>.

Attestation Guidance: Eligible Professionals who believe they have taken proper actions to meet the measure should choose the active engagement option which most closely reflects their current status.

## **Measure 3: Electronic Case Reporting**

Question 1: Do you treat or diagnose Category I, II, or III reportable diseases? According to <u>Wis. Stat. § 252.05, Communicable Diseases</u>, any health care provider who treats or sees a person who has or is believed to have a communicable disease is required to report this information.

YES	DO NOT KNOW	NO
Recommended Action: Proceed to	Recommended Action:	DPH is <b>not</b> establishing
Question 2 below.	A list of reportable communicable	connections to Eligible
	diseases and other notifiable	Professionals who do not treat or
	conditions is provided in Wis.	diagnose Category I, II, or III
	<u>Admin. Code ch. DHS 145 –</u>	reportable diseases.
	<u>Appendix A</u> .	
		Attestation Guidance: Determine
	The DPH Disease Reporting	which exclusion may be applicable
	webpage contains additional	to you. For more information on
	information regarding these	the public health reporting
	diseases and conditions and	exclusions, review the Public
	requirements for the timing of	Health Meaningful Use Reporting
	reporting.	Guidance webpage.
		Recommended Action: Proceed to
		Measure 4: Public Health Registry
		Reporting.

Question 2: Did you register to submit electronic case reporting data to DPH? In Wisconsin, this registration is completed by submitting a registration form through <u>PHREDS</u>.

## YES

Attestation Guidance: Eligible Professionals who have registered with DPH and believe they have taken proper actions to meet the measure should choose the active engagement option that most closely reflects their current status.

# DO NOT KNOW

**Recommended Action:** If you are not sure if a PHREDS registration form already exists for your organization, email <u>dhsehealth@dhs.wisconsin.gov</u> with the subject line "Confirm Existing Registration Form" and provide the name of your organization.

For further guidance, contact the DPH electronic case reporting team at <u>dhsecr@dhs.wisconsin.gov</u>.

## NO

**Recommended Action:** All Eligible Professionals should register with DPH for the public health program(s) to which they intend to electronically submit data. For additional information on how to register, review the <u>Public Health</u> <u>Meaningful Use webpage</u>.

Attestation Guidance: Eligible Professionals who believe they have taken proper actions to meet the measure should choose the active engagement option which most closely reflects their current status.

Measure 4: Public Health Registry Reporting								
Question 1A: Do you clinically or pathologically diagnose cancer and/or provide cancer-								
directed first-course treatment?								
YES DO NOT KNOW NO								
Recommended Action: Proceed to Question 1B below.	<b>Recommended Action:</b> Contact the Wisconsin Cancer Reporting System (WCRS) at <u>cancer@dhs.wisconsin.gov</u> to request more information on its definitions of diagnosis and first- course treatment.	<b>Recommended Action:</b> Proceed to Question 3 on Page 9.						
	hnology certified to create canc	er case information and						
transmit information to cance								
	tted from EHR technology certified to							
	ion, §170.314(f)(5) and §170.314(f)(6							
YES	DO NOT KNOW	NO						
If you answered "Yes" to both Question 1A and 1B, DPH is collecting cancer case reporting data from Eligible Professionals like you.	<b>Recommended Action:</b> Verify that your EHR technology is certified to <b>§170.314(f)(5)</b> and <b>§170.314(f)(6)</b> . If you are unsure about your EHR certification for cancer, check with your EHR vendor or verify using	If you do not have EHR technology certified to <b>§170.314(f)(5)</b> and <b>§170.314(f)(6)</b> , do not register your intent to submit cancer data to DPH.						
<b>Recommended Action:</b> Proceed to Question 2 on the next page.	the <u>Certified Health IT Product</u> <u>List</u> .	<b>Recommended Action:</b> Proceed to Question 3 on Page 9.						

## Measure 4: Public Health Registry Reporting

Question 2: Did you register to submit cancer data to DPH? In Wisconsin, this registration is completed by submitting a registration form through <u>PHREDS</u>.

YES	DO NOT KNOW	NO	
YES Attestation Guidance: Eligible Professionals who have registered with DPH and believe they have taken proper actions to meet the measure should choose the active engagement option that most closely reflects their current status. Recommended Action: Proceed to Question 3 on Page 9.	DO NOT KNOW Recommended Action: If you are not sure if a PHREDS registration form already exists for your organization, email dhsehealth@dhs.wisconsin.gov with the subject line "Confirm Existing Registration Form" and provide the name of your organization. Additionally, if you are engaged with public health registries not sponsored by DPH, proceed to Question 3 on Page 9.	NO Recommended Action: All Eligible Professionals should register with DPH for the public health program(s) to which they intend to electronically submit data. For additional information on how to register, review the <u>Public Health</u> Meaningful Use webpage. Attestation Guidance: Eligible Professionals who believe they have taken proper actions to meet the measure should choose the active engagement option which most closely reflects their current status. Additionally, if you are engaged with public health registries not sponsored by DPH, proceed to Question 3 on Page 9.	

## Measure 4: Public Health Registry Reporting

# Question 3: Do you intend to meet the Public Health Registry Reporting Measure using a registry outside of DPH?

WCRS is the only public health registry for which DPH has declared readiness to accept electronic data from CEHRT.

YES

CMS defines a "public health registry" as a registry that is administered by, or on behalf of, a local, state, territorial, or national public health agency and which collects data for public health purposes. This means that CMS does not limit the public health registries that may be used to satisfy the Public Health Registry Reporting Measure to those sponsored by state and local public health agencies.

However, if you choose to leverage a registry that is not sponsored by DPH for the Public Health Registry Reporting Measure, DPH does not provide registration, administrative onboarding, compliance, or audit support.

Attestation Guidance: Eligible Professionals who believe they have taken proper actions to meet the measure with a registry fitting CMS' description of a public health registry should choose the active engagement option that most closely reflects their current status.

**Reminder:** The Public Health Registry Reporting Measure may be used twice to meet the required number of measures.

NO

**Recommended Actions:** Complete two steps of due diligence to determine if there is a public health registry available to you. According to CMS, an Eligible Professional must complete steps 1 and 2 below to determine if they qualify for an exclusion from the Public Health Registry Reporting Measure.

- Check the <u>Public Health Meaningful Use</u> <u>webpage</u> to determine if there is a public health registry sponsored by the state for which you are eligible. WCRS is the only public health registry for which DPH has declared readiness to accept electronic data from CEHRT.
- 2. Check with the specialty societies with which you are affiliated to determine if there is a public health registry available to you that qualifies for the Meaningful Use Program. CMS defines a "public health registry" as a registry that is administered by, or on behalf of, a local, state, territorial, or national public health agency and which collects data for public health purposes.

Attestation Guidance: After completing the previous two steps of due diligence, if you have determined there is not a qualifying public health registry available to you, then you may self-attest to an exclusion. Determine which exclusion may be applicable to you. For more information on the public health reporting exclusions, review the <u>Public</u> <u>Health Meaningful Use Reporting Guidance</u> <u>webpage</u>.

# Measure 5: Clinical Data Registry Reporting

Question 1: Do you intend to meet the Clinical Data Registry Reporting Measure? DPH has not identified any clinical data registries with readiness to accept clinical data electronically from CEHRT.

YES	NO
DPH has not identified any clinical data registries with readiness to accept clinical data electronically from CEHRT. Therefore, DPH does not provide registration, administrative onboarding, compliance, or audit support for the Clinical Data Registry Reporting Measure.	<ul> <li>Recommended Actions: Complete two steps of due diligence to determine if there is a clinical data registry available to you. According to CMS, an Eligible Professional must complete steps 1 and 2 below to determine if they qualify for an exclusion from the Clinical Data Registry Reporting Measure.</li> <li>1. Check the Public Health Meaningful Use</li> </ul>
Attestation Guidance: Eligible Professionals who believe they have taken proper actions to meet the measure should choose the active engagement option that most closely reflects their current status. Reminder: The Clinical Data Registry Reporting Measure may be used twice to meet the required number of measures.	<ul> <li>webpage to determine if there is a clinical registry sponsored by the state for which you are eligible. DPH has not identified any clinical data registries with readiness to accept clinical data electronically from CEHRT.</li> <li>Check with the specialty societies with which you are affiliated to determine if there is a clinical data registry available to you that qualifies for the Meaningful Use Program.</li> </ul>
	Attestation Guidance: After completing the previous two steps of due diligence, if you have determined there is not a qualifying clinical data registry available to you, then you may self-attest to an exclusion. Determine which exclusion may be applicable to you. For more information on the public health reporting exclusions, review the <u>Public</u> <u>Health Meaningful Use Reporting Guidance</u> webpage.

This concludes Section 2: Measure-Specific Guidance. These questions were asked to help determine if you are ready to attest to the Public Health and Clinical Data Registry Reporting Objective.

# **Additional Information**

For more information on the Wisconsin Medicaid Promoting Interoperability Program's Public Health and Clinical Data Registry Reporting Objective, you can:

- Email <u>dhsehealth@dhs.wisconsin.gov</u>.
- Visit <u>www.dhs.wisconsin.gov/phmu/index.htm</u> or <u>www.cms.gov/Regulations-and-</u> <u>Guidance/Legislation/EHRIncentivePrograms/index.html</u>.

The information provided in this publication is published in accordance with 42 C.F.R. §§ 495.24, 495.40, 495.332.

# **Appendix A**

#### Public Health and Clinical Data Registry Reporting Objective and Measure Options

To meet Meaningful Use requirements and receive an incentive payment, Eligible Professionals must meet a number of objectives and measures established by CMS for the Medicaid PI Programs.

All Eligible Professionals will attest to a public health reporting objective that requires providers to actively engage with their public health agency or clinical data registry to submit public health data electronically from EHR technology certified for the Medicaid PI Programs.

#### How to Attest to the Objective

The Public Health and Clinical Data Registry Reporting Objective comprises five measure options:

- Measure 1: Immunization Registry Reporting
- Measure 2: Syndromic Surveillance Reporting
- Measure 3: Electronic Case Reporting
- Measure 4: Public Health Registry Reporting\*
- Measure 5: Clinical Data Registry Reporting\*

\*The Public Health Registry Reporting Measure and Clinical Data Registry Reporting Measure may be used twice to meet the required number of measures.

Eligible Professionals are required to attest to any two of the five measures. For more detailed information on the objective and measures, review the <u>CMS Eligible Professional Stage 3 Public Health and Clinical Data</u> <u>Registry Reporting Objective Specification Sheet</u>.

#### How to Meet a Measure: Demonstrating Active Engagement

To meet any of the public health reporting measures, an Eligible Professional must demonstrate **active engagement** with a public health agency or clinical data registry. Active engagement means the Eligible Professional is engaging in certain actions that signal progress toward sending **production data** to a public health agency or clinical data registry.<sup>1</sup> For example, a provider can actively engage with a public health agency or clinical data registry by registering his or her intent to electronically submit a type of data they collect. For more details on active engagement requirements, review the <u>Public Health Meaningful Use</u> <u>Reporting Guidance webpage</u> and the <u>Syndromic Surveillance Measure Guidance for Eligible Professionals,</u> <u>P-01254</u>.

#### **Public Health Reporting Exclusions**

For each of the measure options, an Eligible Professional has the choice to either meet the measure or claim an exclusion. There are multiple exclusions for each of the public health reporting measures, which may be claimed based on the types of public health data collected by an Eligible Professional and the public health agency or clinical data registry's readiness to receive data. Eligible Professionals are required to self-attest to exclusions in the attestation system based on their ability to satisfy the exclusion criteria. An exclusion for a measure does not count toward the total number of measures required to meet the objective. If a provider is unable to meet the required number of measures, the Eligible Professional can meet the objective by excluding from all of the remaining measures. For more information on the public health reporting exclusions, review the <u>Public Health Meaningful Use Reporting Guidance webpage</u>.

<sup>&</sup>lt;sup>1</sup>Submitting production data shows that an Eligible Professional regularly reports data generated through clinical processes involving patient care from CEHRT to a public health program.

#### **Readiness of Public Health Programs in Wisconsin**

DPH has declared readiness to electronically receive data from CEHRT for some of its public health programs. DPH's capability to accept data may change; therefore, Eligible Professionals should check the status of each program's capability at the start of each EHR reporting period. This information is regularly updated in the DPH <u>Meaningful Use Declaration of Readiness table on the Public Health Meaningful Use Reporting Guidance</u> webpage.

#### **Registration for Public Health Programs**

All Eligible Professionals participating in the Wisconsin Medicaid PI Program should register with DPH if they intend to submit data to the public health programs that have declared readiness. In Wisconsin, this registration is through the **PHREDS.** PHREDS is a SharePoint site where Eligible Professionals register by submitting a registration form indicating their intent to submit data from CEHRT to the relevant public health program(s). Eligible Professionals who have completed a registration form in previous years do not need to submit a new registration for each EHR reporting period as long as the registration contains accurate information. For additional guidance on how to register your intent to electronically submit data, review the <u>PHREDS Enrollment and Registration of Intent webpage</u>.

# Appendix B

#### Provider Type and Specialty list for Syndromic Surveillance Data Submission

The table below identifies the Eligible Professionals from whom DPH is accepting data, based on Provider Type and Specialty code.

Medicaid PI Program Eligible Provider Type	РТ	Type Description	PS	Specialty Description	SS Data Collected from Specialty?
Hospitals (Acute Care, Critical Access and Children's)	1	Hospital	10	Inpatient/Outpatient Hospital	Yes
Nurse Practitioner	9	Nurse Practitioner	90	Certified Pediatric Nurse Practitioner	Yes
Nurse Practitioner	9	Nurse Practitioner	92	Certified Family Nurse Practitioner	Yes
Nurse Practitioner	9	Nurse Practitioner	93	Other Nurse Practitioner	Yes
Nurse Practitioner	9	Nurse Practitioner	95	Nurse Practitioner/Nurse Midwife	Yes
Physician Assistant	10	Physician Assistant	100	Physician Assistant	Yes
Nurse Practitioner	11	Mental Health and Substance Abuse Services	125	Advanced Practice Nurse Prescriber	Yes
Certified Nurse Midwife	16	Nurse Service	212	Nurse Midwife	Yes
Dentist	27	Dentist	270	Endodontics	No
Dentist	27	Dentist	271	General Practice	No
Dentist	27	Dentist	272	Oral Surgery	No
Dentist	27	Dentist	273	Orthodontics	No
Dentist	27	Dentist	274	Pediatric Dentist	No
Dentist	27	Dentist	275	Periodontics	No
Dentist	27	Dentist	276	Oral Pathology	No
Dentist	27	Dentist	277	Prosthodontics	No
Physician	31	Physician	310	Allergy and Immunology	Yes
Physician	31	Physician	311	Anesthesiology	No
Physician	31	Physician	312	Cardiovascular Disease	Yes
Physician	31	Physician	314	Dermatology	Yes
Physician	31	Physician	315	Emergency Medicine	Yes
Physician	31	Physician	316	Family Practice	Yes
Physician	31	Physician	317	Gastroenterology	Yes
Physician	31	Physician	318	General Practice	Yes
Physician	31	Physician	319	General Surgery	No

Medicaid PI Program Eligible Provider Type	РТ	Type Description	PS	Specialty Description	SS Data Collected from Specialty?
Physician	31	Physician	320	Geriatrics	Yes
Physician	31	Physician	322	Internal Medicine	Yes
Physician	31	Physician	324	Nephrology	Yes
Physician	31	Physician	325	Neurological Surgery	No
Physician	31	Physician	326	Neurology	Yes
Physician	31	Physician	327	Nuclear Medicine	Yes
Physician	31	Physician	328	Obstetrics and Gynecology	No
Physician	31	Physician	329	Oncology and Hematology	Yes
Physician	31	Physician	330	Ophthalmology	Yes
Physician	31	Physician	331	Orthopedic Surgery	No
Physician	31	Physician	332	Otolaryngology	Yes
Physician	31	Physician	333	Pathology	Yes
Physician	31	Physician	336	Physical Medicine and Rehab	No
Physician	31	Physician	337	Plastic Surgery	No
Physician	31	Physician	338	Proctology	Yes
Physician	31	Physician	339	Psychiatry	Yes
Physician	31	Physician	340	Pulmonary Disease	Yes
Physician	31	Physician	341	Radiology	Yes
Physician	31	Physician	342	Thoracic and Cardiovascular Surgery	No
Physician	31	Physician	343	Urology	Yes
Physician	31	Physician	345	Pediatrician	Yes
Physician	31	Physician	354	Preventative Medicine	No



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