	Important Content Update Message
🔧	We are currently updating the OP Help Center content for the release of OP 20. OP 20 (official version 20.0.x) is the certified, 2015 Edition, version of the Office Practicum software. This is displayed in your software (**Help tab > About**) and in the Help Center tab labeled Version 20.0. We appreciate your patience as we continue to update all of our content.

MU: Confirm your Medicaid Designation Plan in your OP Software is Correct

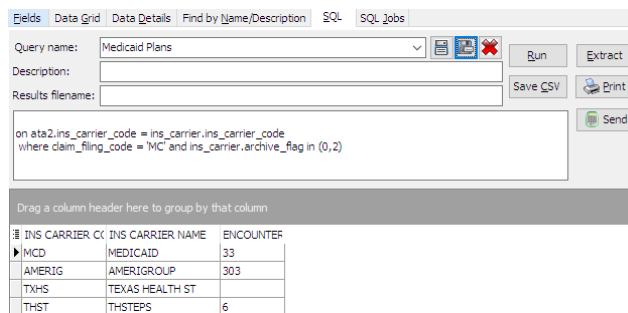Last Modified on 02/05/2020 3:39 pm EST

📌	**Note**: This is step 2 of 7 for configuring a report to indicate volume count as listed in MU: Introduction to Determining Medicaid Volume using the OP Software.

The OP software will automatically determine which encounters are ascribed to Medicaid and which encounters ones are not. This determination is based upon how you have set up insurance carriers. To confirm that your Designation Plan is correct in the software:

1. Run this **SQL: Confirm Medicaid Designation of Plans in OP is Correct** You will be prompted to enter your attestation period start date. This query provides an estimated total number of encounters during the selected period for all active Medicaid plans (and only active Medicaid plans). Your results should look like the image below.

2. Review the list of insurances carefully and ask the following questions:

   - **Are ALL the Medicaid plan codes listed here?**
     - **All insurance codes used to bill Medicaid**, both Medicaid MCOs and straight-state Medicaid, should appear in this list.
   - **Are ONLY Medicaid plan codes listed here?**
     - **Unless specifically permitted by your state (Group 3 states), CHIP plan codes**

should not be included here. Also, if your state does not allow you to neatly separate Medicaid-eligible from CHIP-eligible patients, you may have to use an adjustment factor (Group 2 states). You can look at our **state-by-state reference tables** to determine in which group your state is placed.

- **Out-of-state Medicaid encounters may be counted** towards your MU numbers if it is beneficial to do so. However, your state's Medicaid program may contact the other state to confirm that you submitted the relevant claim(s). This may delay the progress of your attestation. OP therefore recommends that you do NOT include out-of-state Medicaid plans unless you are otherwise not eligible to participate in MU.

When you have corrected the plans, move onto the next step listed in the **introduction**.