Surviving a CMS EHR Audit

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Why Me?

- Providers who receive an EHR incentive payment for either the Medicare or Medicaid EHR Incentive Program potentially may be subject to an audit
- Eligible professionals should retain ALL relevant supporting documentation (in either electronic or paper format) used in the completion of the Attestation Module responses
- Documentation to support attestation data for meaningful use objectives and clinical quality measures should be retained for six years post-attestation

Details

- Figliozzi and Company is the designated contractor performing audits on behalf of the Centers for Medicare & Medicaid Services (CMS), and will perform audits on Medicare EP's
- If you are selected for an audit you will receive a letter from Figliozzi and Company with the CMS and EHR Incentive Program logos on the letterhead
- The audit notification letter will be sent by email to the address provided at registration
EHR Incentive Audits to Increase in 2014

- Post payment audits began in July 2012 and WILL take place during the course of the EHR Incentive Program
- CMS is now doing prepayment audits
- 5-10% of providers will be subject to pre/post payment audits
- Any provider exhibiting anomalous data subject to successive audits

CMS and Incentive Audits 2014

- CMS will not
  - Make risk profile public
  - Discuss issues related to specific audits
  - Provide information regarding protocols used
  - Resolve issues related to any audit
    - You MUST file an appeal
    - In other words if you fail an audit don't try to talk to the auditor
Meaningful Use 1 Issues

- Understand what you are doing
- Numbers must be consistent
- Multiple EP’s don’t see the same number of patients
- Don’t claim you have a CEHRT if you don’t have one

Security Risk Analysis

- EPs must conduct or review a security risk analysis of certified EHR technology and implement updates as necessary at least once prior to the end of the EHR reporting period and attest to that conduct or review
- The testing could occur prior to the beginning of the first EHR reporting period. However, a new review would have to occur for each subsequent reporting period
Meaningful Use 2 Issues

- Must use 2014 Certified Software
- If using 3rd party patient portal must be able to document how patient activity is tracked
- Be prepared to show how you have gotten your patients to access their information

Audit Request

- Prepayment AND Post Payment
- Limited Audit
  - Proof of Ownership
- Full Audit
  - Proof of Ownership
  - Review of Core Items
  - Review of Menu Items
- Initial Review at Figliozzi and Sons
The Auditors

- Tough Job
- MUR still a moving target
  - Exchange of Key Clinical Information never was well clarified
- Generally Responsive
- Will explain what they need
- Willing to review all documentation
PART I. GENERAL INFORMATION

1. In order to implement the Electronic Health Record Technology (EHR) system, please follow the steps below for your electronic medical record (EMR) system:

   a. Provide the EMR system with the necessary data from the EHR system.

   b. Ensure that all patient information is securely transmitted to the EHR system.

   c. Ensure that the EHR system is compatible with the EMR system.

   d. Ensure that the EHR system is maintained and updated regularly.

2. Please provide the following information:

   a. Name of the organization:

   b. Contact person:

   c. Phone number:

   d. Fax number:

   e. Email address:

PART II. CORE USE OBJECTIVES (MU) PREREQUISITES

1. In order to achieve the MU criteria, please provide the following information:

   a. Name of the organization:

   b. Contact person:

   c. Phone number:

   d. Fax number:

   e. Email address:

2. Ensure that all patient information is securely transmitted to the EHR system.

   a. Ensure that the EHR system is compatible with the EMR system.

   b. Ensure that the EHR system is maintained and updated regularly.

   c. Ensure that the EHR system is used for all patient encounters.

   d. Ensure that the EHR system is used for all patient encounters.

   e. Ensure that the EHR system is used for all patient encounters.

   f. Ensure that the EHR system is used for all patient encounters.

   g. Ensure that the EHR system is used for all patient encounters.

   h. Ensure that the EHR system is used for all patient encounters.

   i. Ensure that the EHR system is used for all patient encounters.

   j. Ensure that the EHR system is used for all patient encounters.

   k. Ensure that the EHR system is used for all patient encounters.

   l. Ensure that the EHR system is used for all patient encounters.

   m. Ensure that the EHR system is used for all patient encounters.

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   u. Ensure that the EHR system is used for all patient encounters.

   v. Ensure that the EHR system is used for all patient encounters.

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   x. Ensure that the EHR system is used for all patient encounters.

   y. Ensure that the EHR system is used for all patient encounters.

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   A. Ensure that the EHR system is used for all patient encounters.

   B. Ensure that the EHR system is used for all patient encounters.

   C. Ensure that the EHR system is used for all patient encounters.
PROOF OF CEHRT

- Provide proof of use of a CEHRT
  - Licensing Agreement
  - Invoices
  - Contract
  - Letter from Vendor
  - MUST INCLUDE
    - Name of Vendor
    - Product Name
    - Version number

MORE THAN ONE OFFICE?

- Number of offices
- Was CEHRT Used in each office?
- How many UNIQUE patients seen in each location?
- Documentation
  - Schedule
  - Number of patients seen in each location
Core Measure Documentation

Drug Interaction Checks

- Drug/Drug Allergy Interaction Checks
  - Documentation from vendor or 3rd party intermediary attesting that the functionality was enabled during the entire reporting period
  - Screen shots dated during the attestation period.

Clinical Decision Support

- Screenshot of CDS showing functionality
- Letter from vendor attesting that functionality was available, enabled and active during the EHR reporting period
Security Risk Analysis

- Proof that a security risk analysis of the certified EHR technology was performed prior to the end of the reporting period (e.g., report which documents the procedures performed during the analysis and the results)
- Submit Dated Document
- Most reported deficiency

Security Analysis

- Risk Analysis
  - Confidentiality Checklist
  - Integrity Checklist
  - Availability Checklist
- Risk Management
  - Identify Safeguards
- Sanction Policy
- Audit Log
Drug Formulary Checks

- Screenshot
- Letter from vendor attesting that the functionality was available, enabled and active during the entire reporting period

Patient List

- Report from system listing patients with a specific condition dated during the reporting period

Exclusions

- Must supply documentation as to why exclusion was claimed
- Examples
  - Immunization
  - Vital Signs
  - eRX/CPOE
  - Lab Tests
BE PREPARED

- Read meaningful use audit FAQs
- Designated Responsible Person
- Be ready to respond to an audit immediately
- Retain all supporting documentation
- Prepare to share screen shots or accommodate a visit
- Work with your vendor

Initial Review

- Will be done at contractor's office using the information supplied
- Additional information may be requested
- In some cases, demonstration of EHR system might be requested onsite

If fail audit

- Will receive letter requesting repayment ONLY
- No explanations as to what was deficient
- Can appeal decision
Resources

- Meaningful Use Audit FAQs can be found at: https://questions.cms.gov/faq.php?id=5005