

EHR Incentive Program Audit Guidance

Illinois EHR Incentive Help Desk
May 18, 2017

Agenda



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Health IT Regional
Extension Center

- Audit process and timeline
- Documents to save/collect
- Responding to audit

Disclaimer

This presentation is for educational purposes only and represents best available information as of publication date. Audit requirements may change and adherence to the following guidance does not ensure passing of a program audit.

EHR Help Desk representatives work in partnership with Illinois Medicaid but do not conduct program audits. Please direct questions about specific requirements for existing or previous audits to the audit contractor or your requesting auditor.



Process & Timeline

Audit Process



- Conducted by the Department of Healthcare and Family Services, Office of the Inspector General, Bureau of Medicaid Integrity
- Applies to any eligible professional, eligible hospital or critical access hospital receiving an EHR Incentive payment
- Entails review of documents supporting information submitted for attestation in the performance year under audit (up to 6 years later)

Audit Process

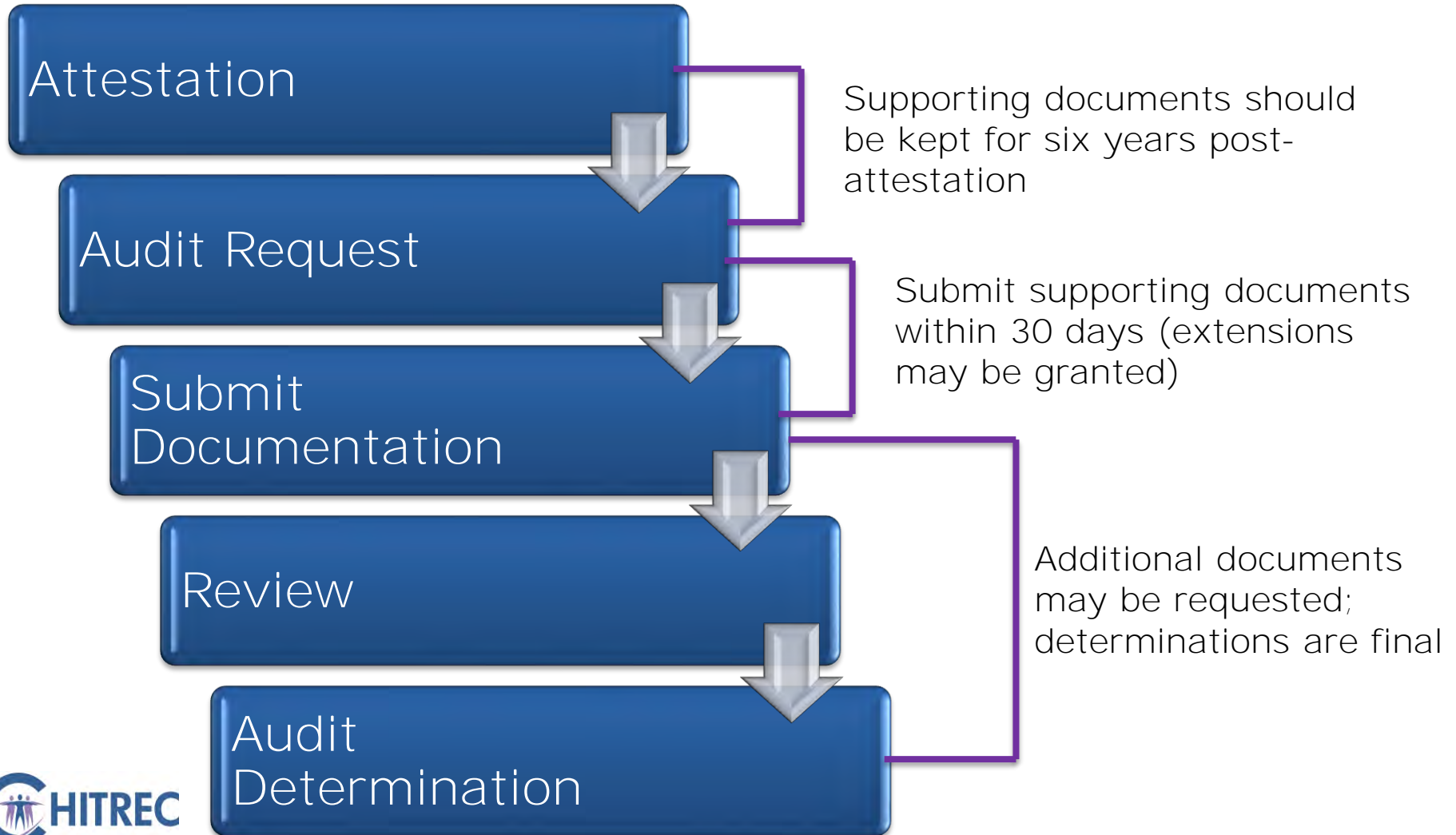


- Participants acknowledge possibility of audit
- Attestation statement*:
 - “**additional** documentation may be requested during a pre-payment or post payment **audit**”
 - “**true**, accurate and complete to the best of my knowledge... for numerators, denominators and exclusions for functional **measures**”
 - “**retain documentation to support my eligibility**”
 - “**pursue repayment in all instances of improper payment**”
 - “**any falsification, or concealment of a material fact may be prosecuted under Federal and State laws**”

* Acceptance required at time of attestation. The complete disclaimer language can be found on page 59 of the eMIPP Toolkit at:

www.illinois.gov/hfs/SiteCollectionDocuments/4417EHRIncentiveProgramToolkitv8.pdf

Audit Timeline





Documents to Save/Collect

Documentation



- Best practice: save audit documents during MU reporting period, complete file prior to attestation
- Evidence will reflect compliance with program requirements as of the performance year
- If necessary: collect documents retrospectively
- MU rule changes and EHR updates may limit ability to create supporting evidence later

ONC Certified Software



- Documentation of CHPL certification ID for version of software referenced during attestation
- Documentation to prove acquisition/purchase/lease of certified EHR software (contract, invoice, license)
- Documentation of all locations where EP encounters occurred (during MU period)

NOTE: This is not an exhaustive list. Documents are suggested from OIG at <https://www.illinois.gov/hfs/SiteCollectionDocuments/EHRIncentiveProgramAudits.pdf>. Your audit may or may not require all of the above.

Sample: CHPL ID



Search for product at <https://chpl.healthit.gov>

The screenshot shows the 'Certified Health IT Product List' website. The search bar contains 'amazing charts'. Below the search bar, there are filter buttons for Certification Status, Certification Edition, Certification Criteria, Surveillance Activity, and More. A message states: 'Please note that only active and suspended listings are shown by default. Use the Certification Status / Certification Edition filters above to display retired, withdrawn, terminated, or 2011 edition listings.' Below this, there are links for 'Browse all', 'Clear Filters', and 'Clear 1 Recently Viewed Listing'. The search results show '1 - 1 of 1 Result' with 'Previous', '1', and 'Next' navigation. The table below has columns for Edition, Developer, Product, Version, Certification Date, CHPL ID, and Status. The first row is highlighted with a red circle around the Product and CHPL ID cells. An arrow points from the search bar to the Product cell.

Edition	Developer	Product	Version	Certification Date	CHPL ID	Status
2014	Amazing Charts	Amazing Charts	8.1	Feb 5, 2015	CHP-025229	

Windows screenshot: use "Snipping Tool" or press Alt + PrtSc keys simultaneously to copy entire screen, then paste into Word

Mac screenshot: press Command + Shift + 3 keys simultaneously to save entire screen to Desktop



Sample: EHR Acquisition



Receipt for payments to EHR vendor

CHICAGO, IL [REDACTED]

MediSoft

Customer ID		Customer PO		Payment Terms	
STAN003ED		ASSURANCE		Net Due	
Quantity	Item	Description	Unit Price	Extension	
1.00	CLINICAL 1	01/01/2016 thru 12/31/2016 Annual MediSoft Clinical Assurance - 1 year option up to 115 users Physician Center - 25 concurrent users (65 Providers & 30 Staff) [REDACTED] - 1 unit up to 5 users [REDACTED] - 3 units up to 15 users [REDACTED] - 1 unit up to 5 users [REDACTED] - 2 unit up to 10 users [REDACTED] - 1 unit up to 5 users [REDACTED] - 2 units up to 10 users - Temp Closed [REDACTED] - 1 unit up to 5 users - Temp Closed [REDACTED] - 1 unit up to 5 users - Closed [REDACTED] - 3 units up to 15 users - Closed [REDACTED] - 2 units up to 10 uses - Closed Future Use - 1 unit up to 5 users	139,610.00	139,610.00	

PAID
1-26-16
CK

Phone Support, Videos, Codes on Disk, Trainings,
and Custom Formats are non returnable or

Check No: _____

	Sales Tax	
	Amount Received	0.00
TOTAL		139,610.00

Amount Due upon receipt. Delinquent accounts will be charged a finance charge of 2% per month. Thank you for keeping your account current.



Eligibility Requirements



- Reports that support calculations of Medicaid and total patient encounter volume
- Group definitions, including members and locations included to calculate group volume (if applicable)
- Documentation showing an FQHC/RCH is lead by a PA (for demonstrating eligibility of PA)

NOTE: This is not an exhaustive list. Documents are suggested from OIG at <https://www.illinois.gov/hfs/SiteCollectionDocuments/EHRIncentiveProgramAudits.pdf>. Your audit may or may not require all of the above.

Sample: Patient Volume



De-identified claims report with individual encounters

	A	B	C	D
1	CLAIM NO	DOS	BILLING PROVIDER	INSURANCE
2	9999999	5/3/2016	JONES, JOHN	BCBS-IL
3	9999999	5/24/2016	JONES, JOHN	ILLINICARE HEALTH PLAN
4	9999999	6/6/2016	JONES, JOHN	FAMILY HEALTH NETWORK
5	9999999	6/30/2016	JONES, JOHN	BCBS-IL
6	9999999	7/19/2016	JONES, JOHN	BCBS-IL
7	9999999	7/18/2016	JONES, JOHN	HUMANA INC
8	9999999	7/28/2016	JONES, JOHN	BCBS-IL
9	9999999	5/9/2016	JONES, JOHN	MEDICAID-IL
10	9999999	5/9/2016	JONES, JOHN	BCBS-IL
11	9999999	5/10/2016	JONES, JOHN	MEDICARE-IL

Sample: Group Definition



Summary of encounters for each provider with each payer (Medicaid, Medicaid managed care, everything else), identify locations + TINs

MEDICAID PATIENT VOLUME MAY 1 2015- JULY 29, 2015					
PROVIDER	NPI NUM	MEDICAID	MERIDIAN	ILLINICARE	OTHER
PROVIDER 1	1000000000	413	183	273	109
PROVIDER 2	1000000000	94	36	63	20
PROVIDER 3	1000000000	94	37	99	40
PROVIDER 4	1000000000	192	88	157	54
TOTAL		793	344	592	223
We have two different locations with unique TIN. All providers see patients and bill at both locations.					
Location 1:	Location Name				
TIN	100000000				
Location 2:	Location Name				
TIN	100000000				

Meaningful Use Achievement



- MU and CQM reports from EHR
- Documentation supporting exclusions
- Screenshots supporting yes/no measures
- Examples of EHR functionality related to MU objectives
- HIPAA risk analysis (full document)

NOTE: This is not an exhaustive list. Documents are suggested from OIG at <https://www.illinois.gov/hfs/SiteCollectionDocuments/EHRIncentiveProgramAudits.pdf>. Your audit may or may not require all of the above

Sample: MU Report



Printed from EHR, saved in electronic format

medisoft[®] clinical

EHR Performance Metrics Report (Stage 2 Reporting Year 2015+)

Printed on February 07, 2017 at 12:58 pm for
Reporting Period October 03, 2016 - December 31, 2016

Version 11.0.7571.3200

Providers: [REDACTED]

[REDACTED]

Medication orders placed using CPOE (Threshold: > 60%)	
Number of medication orders issued using CPOE functionality:	222
Number of medication orders issued:	222
Ratio:	100.00 %
Laboratory orders placed using CPOE (Threshold: > 30%)	
Number of laboratory orders issued using CPOE functionality:	1,211
Number of laboratory orders issued:	1,211
Ratio:	100.00 %
Radiology orders placed using CPOE (Threshold: > 30%)	
Number of radiology orders issued using CPOE functionality:	166
Number of radiology orders issued:	166
Ratio:	100.00 %

Product and version matching CHPL search

Reporting period, numerator/denominators matching data entered into attestation

Sample: CQM Report



Printed from EHR, saved in electronic format

Clinical Quality Measures

9 measures from 3 different domains required

- 9 more measures required
- 3 domains needed

Numerator/denominators matching data entered into attestation

Identify selected measures used for attestation

MEASURE #	MEASURE NAME / DOMAIN	NUMERATOR / DENOMINATOR	EXCLUSIONS / EXCEPTIONS	PERCENT RESULT
Clinical Process / Effectiveness				
CMS122v4 NQF-0059	Diabetes: Hemoglobin A1c Poor Control Percentage of patients 18-75 years of age with diabetes who had hemoglobin A1c > 9.0% during the measurement period.	20/93	0/0	21%
CMS123v4 NQF-0056	Diabetes: Foot Exam Percentage of patients aged 18-75 years of age with diabetes who had a foot exam during the measurement period.	0/93	0/0	0%
CMS124v4 NQF-0032	Cervical Cancer Screening Percentage of women 21-64 years of age, who received one or more Pap tests to screen for cervical cancer.	76/197	0/0	38%

Yes/No Measures




- Vary depending on year of attestation
- Screenshot of EHR settings and/or demonstration of functionality
- Examples:
 - Patient list (2011-2014)
 - Clinical summaries (2011-2014)
 - Clinical decision support
 - Summary of care/Health information exchange
 - Engagement with public health registries

NOTE: This is not an exhaustive list. Documents are suggested from OIG at <https://www.illinois.gov/hfs/SiteCollectionDocuments/EHRIncentiveProgramAudits.pdf>. Your audit may or may not require all of the above.

Sample: CDS



Screenshot of clinical decision support rules/functionality



Patient-specific rules are modifiable by right-clicking on the recommendation.

Practice-wide rules are modifiable in the Admin section of Amazing Charts.

Health Maintenance (HM) Due | HM: Immunizations & Shots | HM: Screenings & Tests | Migration | Injections (non-HM)

Below is a list of this patient's Health Maintenance recommendations.

Recommendations are based in part on the patient's Risk/Health Factors. Risk/Health Factors can be adjusted from within the patient's chart.

Show immunizations only.
 Also show items not yet due.
 Hide childhood immunizations.

Name	Last	Next
a1c check	12/1/2010 2:52:3	03/01/2011
Behavioral Counseling in Primary Care to Promote Physical Activity	-	
Screening and Behavioral Counseling Interventions in Primary Care	3/10/2010 3:44:5	03/10/2011
Screening for Colorectal Cancer - Adult, aged 50-75, as	12/2010 4:03:00	12/2011 4:03:00
Td (Tetanus, diphtheria)	-	After 12/01/1964

Sample: Public Health



Screenshot of confirmation letter from ICARE

DPH.HL7ICARE
to me, Patricia

2:53 PM (18 hours ago)

10/01/16 31/16

Meaningful Use Stage 2

Measure: Sending LIVE data continuously with certified EHR to immunization registry - ICARE

Status of LIVE data sent to I-CARE (Illinois Comprehensive Automated Immunization Registry Exchange):

Passed

Demonstrating Meaningful Use with I-CARE is declared at the organization/practice level which includes the following provider. It is the responsibility of the practice to verify individual providers contribute to the data reported.

It is the responsibility of the providers participating in the program to attest to meaningfully using their EHR system

Clinic Name: Dr. Jones, MD
Clinic Group: 123 Main St
Address: Chicago, IL 60699
County: 312-555-5555
Phone Number: 312-555-5556
Fax Number: John Jones
Contact Name: dr.jones@fakeemail.net
Contact E-mail: dr.jones@fakeemail.net
HL7 MSH-4: 7779999

State of Illinois - CONFIDENTIALITY NOTICE: The information contained in this communication is confidential, may be attorney-client privileged or attorney work product, may constitute inside information or internal deliberative staff communication, and is intended only for the use of the addressee. Unauthorized use, disclosure or copying of this communication or any part thereof is strictly prohibited and may be unlawful. If you have received this communication in error, please notify the sender immediately by return e-mail and destroy this communication and all copies thereof, including all attachments. Receipt by an unintended recipient does not waive attorney-client privilege, attorney work product privilege, or any other exemption from disclosure.

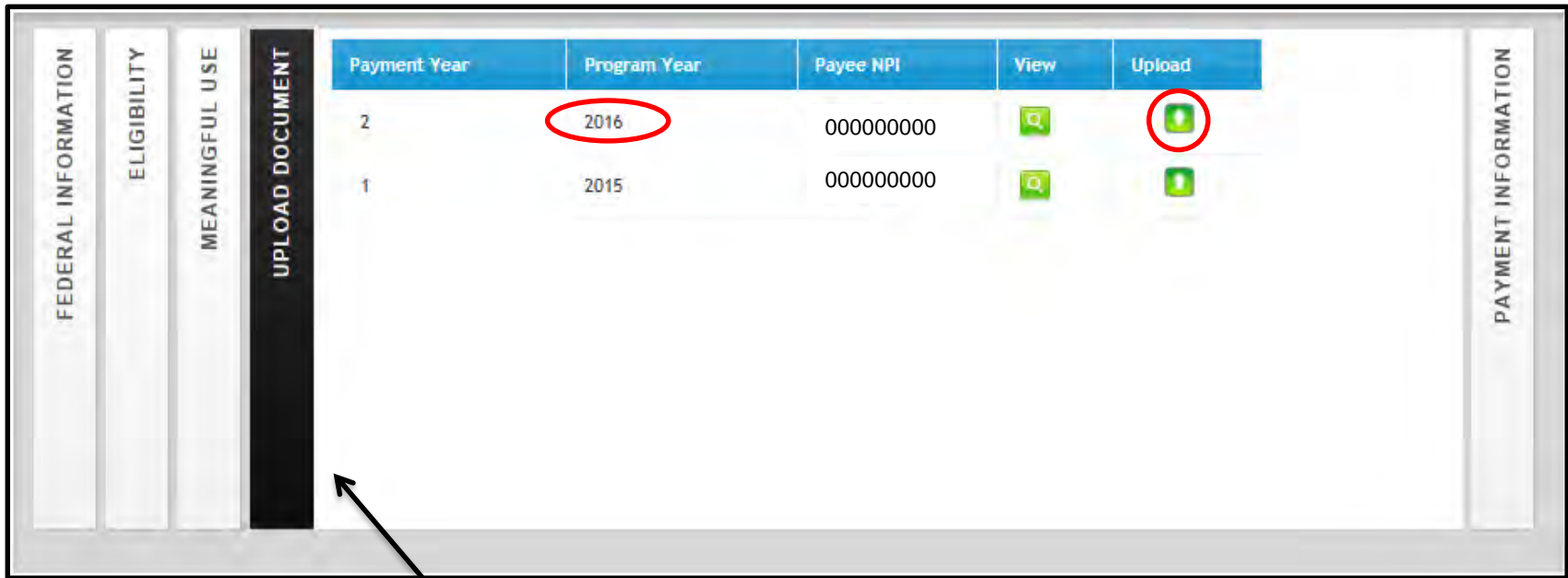
Creating an Audit File







- Maintain paper versions
- Save electronic versions on business device
- Upload electronic versions into eMIPP
- Upload into eMIPP does not eliminate possibility of audit or additional document requests

Upload Document

- Click the "Upload Document" tab
- Click the green arrow in the upload column for 2016



Payment Year	Program Year	Payee NPI	View	Upload
2	2016	000000000		
1	2015	000000000		

Active tab

Upload Document

- The "Upload Document" window appears within eMIPP
- Click "Browse" (or "Choose File")

Upload Document

Click Browse to Upload File

File Name: * **Browse...**

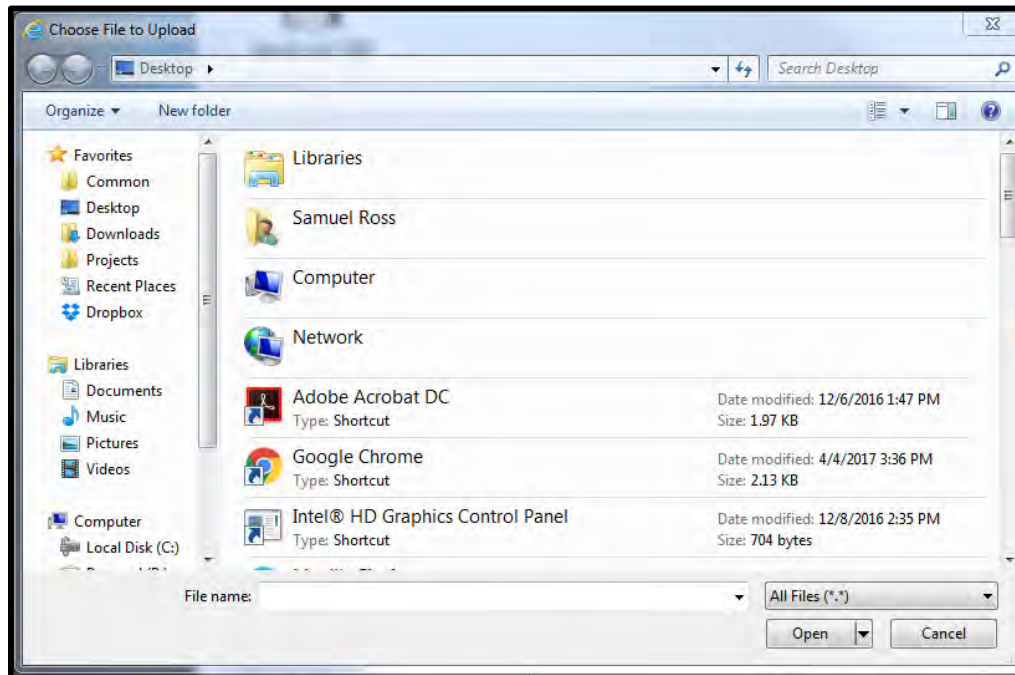
File Type: * ---SELECT---

File Description: *

Upload Cancel

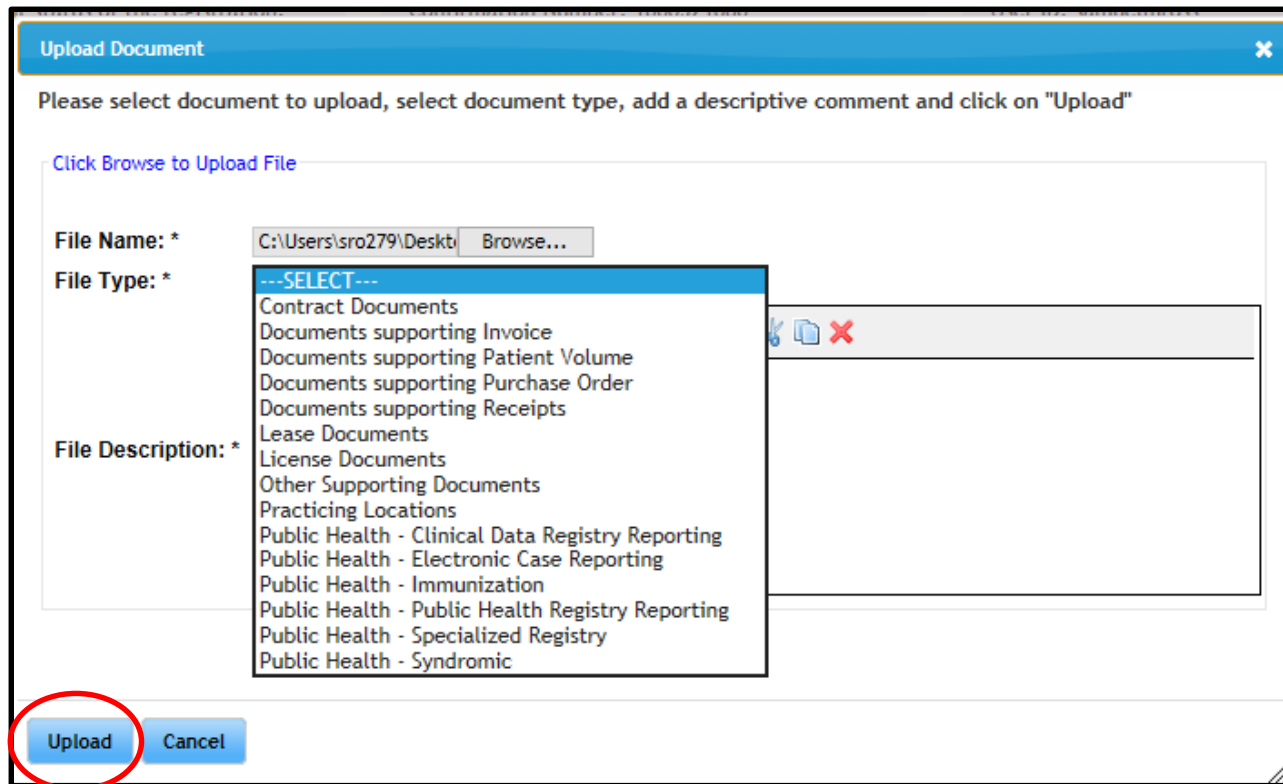
Upload Document

- “Choose File to Upload” window appears on your computer
- Navigate to the location of the file (i.e. Desktop, Documents)
- Double click or click “Open” (Word, Excel or PDF only)



Upload Document

- Click “---SELECT---” to choose File Type
- Select option that best corresponds to the file upload



The screenshot shows a web form titled "Upload Document" with a close button (X) in the top right corner. Below the title is a blue header bar. The main content area contains the instruction: "Please select document to upload, select document type, add a descriptive comment and click on 'Upload'".

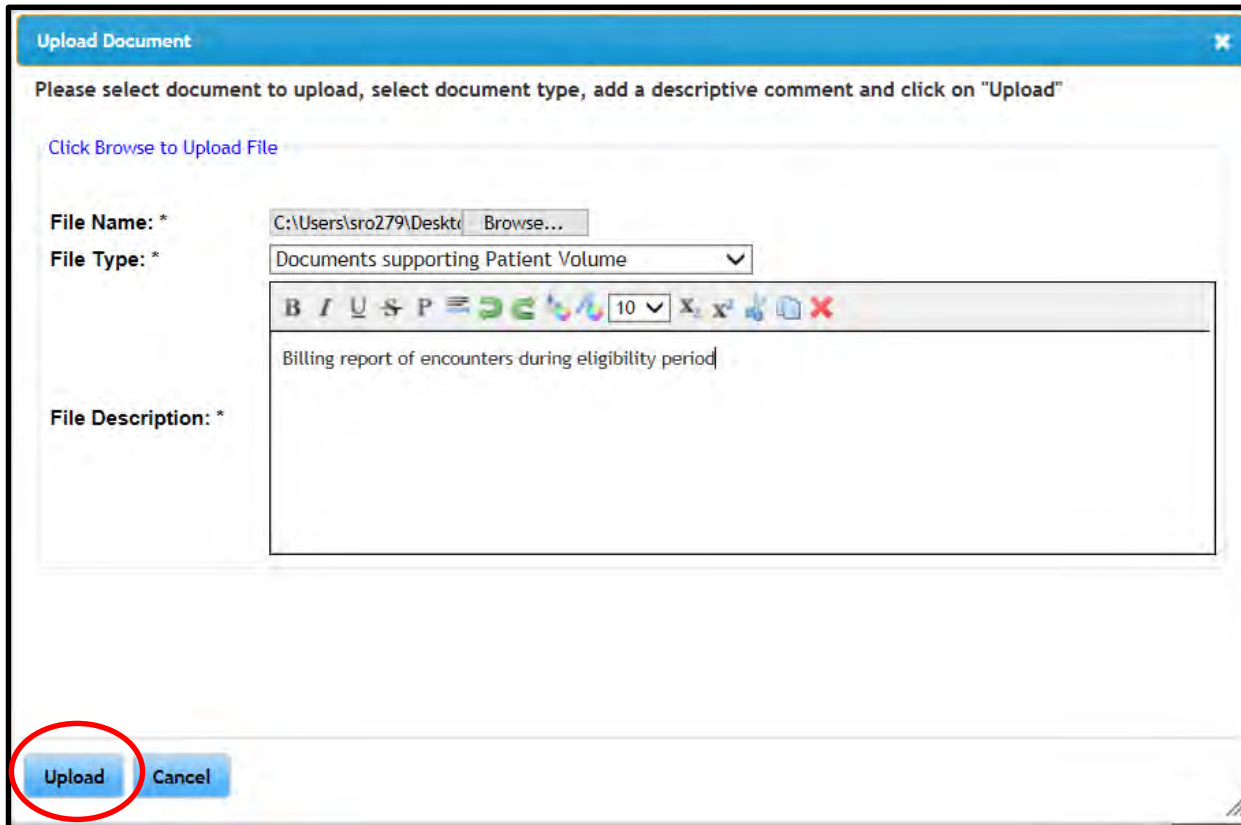
Below the instruction is a section titled "Click Browse to Upload File" with a light blue background. It contains three input fields:

- File Name: *** with a text box containing "C:\Users\sro279\Deskt" and a "Browse..." button.
- File Type: *** with a dropdown menu open. The menu items are: ---SELECT---, Contract Documents, Documents supporting Invoice, Documents supporting Patient Volume, Documents supporting Purchase Order, Documents supporting Receipts, Lease Documents, License Documents, Other Supporting Documents, Practicing Locations, Public Health - Clinical Data Registry Reporting, Public Health - Electronic Case Reporting, Public Health - Immunization, Public Health - Public Health Registry Reporting, Public Health - Specialized Registry, and Public Health - Syndromic.
- File Description: *** with a large empty text area.

At the bottom of the form, there are two buttons: "Upload" and "Cancel". The "Upload" button is circled in red.

Upload Document

- Enter a brief file description (i.e. EHR receipt)
- Click "Upload"



Upload Document

Please select document to upload, select document type, add a descriptive comment and click on "Upload"

[Click Browse to Upload File](#)

File Name: * C:\Users\sro279\Desktop\ Browse...

File Type: * Documents supporting Patient Volume

File Description: * Billing report of encounters during eligibility period

Upload Cancel



Responding to Audit

Email Notification



All communications via HFS.OIG.Audit@Illinois.gov

From: "hfs.oig.audit@illinois.gov" <hfs.oig.audit@illinois.gov>
Date: April 6, 2017 at 7:00:13 AM CDT
To: [REDACTED]
Subject: Illinois EHR Incentive Program Audit Notification.

April 6, 2017

[REDACTED]

Notice of Review

Dear [REDACTED]

I represent the Illinois Department of Healthcare and Family Services, Office of the Inspector General (HFS-OIG), which ensures the integrity of the Illinois Medicaid Programs. Pursuant to State and federal law, the Illinois Department of Healthcare and Family Services, Office of Inspector General (HFS-OIG) is mandated to verify Electronic Healthcare Record Incentive payments made under the Medical Assistance Program (Medicaid).

Our records indicate that you have received payment and attested to the use of a certified EHR technology. The purpose of this letter is to inform you that HFS-OIG will be conducting an audit to ensure your compliance with the requirements of the Illinois Medicaid Electronic Health Record (EHR) Incentive Program. The EHR reporting period that will be reviewed is

Email Attachment

All communications via HFS.OIG.Audit@Illinois.gov



Reply to Email

- Acknowledge receipt
- Notify if provider was not employed at your organization during the year under audit
- Request extension, if necessary
- Submit outstanding questions
- Reply to additional requests
- Notify when documents are submitted

Submit Documents



- Upload documents into eMIPP Audit tab
- Upload into state file transfer portal at <https://filet.illinois.gov/filet/pimupload.asp>
- Send as secure email to HFS.OIG.Audit@illinois.gov
- Send as certified mail to EHR Audits at 2200 Churchill Rd, Bldg A-1, Springfield, IL 62702

eMIPP Audit Tab



- Log into eMIPP via IMPACT
- Click **“Track”** at top
- Enter CMS ID of provider under audit
- Click the **“Audit”** tab

eMIPP Audit Tab

- Click the "Audit" tab
- Click the green magnifying glass in first column

Audit List				
Year	Program Year	Audit Type	Audit Status	Audit Reason
2014	2014	Meaningful Use	Intent to Audit	Discrepancy found from ri

Active tab

eMIPP Audit Tab

- Opens to "Audit Details" tab
- New system; details here may not be completely accurate

Audit Details

Audit Details | Comments | Documents

Identifying Information

Confirmation Number: 1000494847

All form fields with * are required.

EP Audit Information

Name: Joerg Albrecht	Provider Type: Physician
NPI: 1942453022	Payment Year: 1
Payee NPI: 1821385170	Program Year: 2014
TIN: 141118700	Audit Type: Adopt, Implement or Upgrade
Payee TIN: 366006541	Audit Status: Intent to Audit

External Audit Control#: [?]

Audit Status: [?] ---SELECT---

Audit Organization: * [?] Medicaid State Performing the Audit

Audit Type: * [?] Adopt, Implement or Upgrade

Reason for Audit: * [?] Discrepancy found from risk assessment

Cancel Reason: [?] [?]

Audit Finding: [?] ---SELECT---

Audit notes: [?] START AUDIT

Audit Intent Date: [?] 04/05/2017

Audit Start Date: [?] [?]

Audit Cancel Date: [?] [?]

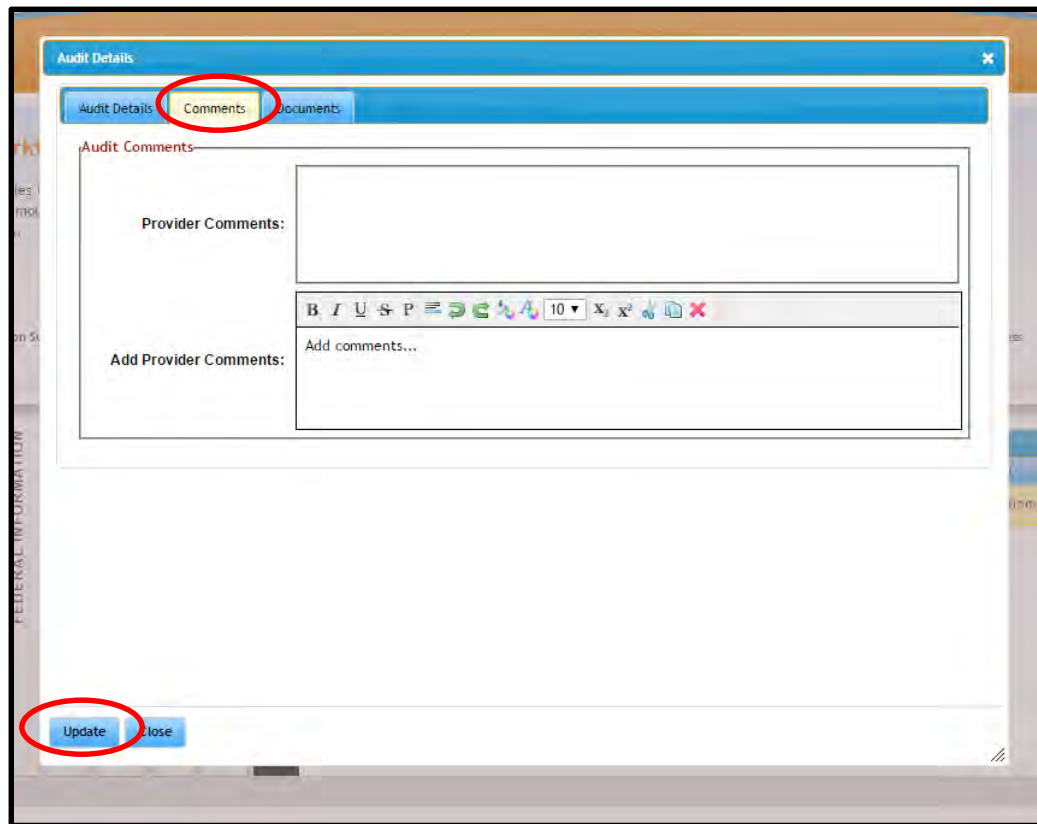
Audit End Date: [?] [?]

Audit Case Number: [?] 1000102192

Update Close

eMIPP Audit Details

- Click the “Comments” tab at top
- Enter comments, click “Update” to save



The screenshot displays the 'Audit Details' window with three tabs: 'Audit Details', 'Comments', and 'Documents'. The 'Comments' tab is selected and circled in red. Below the tabs, there is a section for 'Audit Comments' containing a large text area for 'Provider Comments' and a smaller text area for 'Add Provider Comments' with a rich text editor toolbar. At the bottom of the window, the 'Update' button is circled in red, along with a 'Close' button.

eMIPP Audit Details

- Click the “Documents” tab at top
- Use the “Choose File” (or “Browse”) button to select up to three files at a time; click “Update” to save

The screenshot displays the 'Audit Details' window with the 'Documents' tab selected. The interface includes a header with 'Audit Details', 'Comments', and 'Documents' tabs. Below the header, there is a prompt: 'Please select document to upload, select document type, add a descriptive comment and click on "Update"'. The main area contains three file upload sections, each with a 'Click Browse to Upload File' link, a 'File Name' field containing a 'Choose File' button, a 'File Description' field, and a 'File Category' dropdown menu. The dropdown menu is open, showing a list of categories including 'Contract Documents', 'Documents supporting Cost reports', 'Documents supporting Invoice', 'Documents supporting Patient Volume', 'Documents supporting Purchase Order', 'Documents supporting Receipts', 'Hospital Calculation Worksheet', 'Lease Documents', 'License Documents', 'Other Supporting Documents', and 'Practicing Locations'. The 'Documents supporting Purchase Order' option is highlighted. Below the upload sections is a 'Document List' table with columns for 'Download', 'Delete', 'Title', 'Category', 'Date', 'Provider Visible', 'Deleted By', and 'Comments'. At the bottom of the window, there are 'Update' and 'Close' buttons.

Download	Delete	Title	Category	Date	Provider Visible	Deleted By	Comments
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State File Transfer Portal



- Visit <https://filet.illinois.gov/filet/pimupload.asp>
- Enter HFS.OIG.Audit@Illinois.gov in “Recipient Email Addresses” field
- Enter your email address
- Click the “Browse” button to select files
- Click the “Send It” button to submit

State File Transfer Portal



Upload

WARNING! UNAUTHORIZED ACCESS IS PROHIBITED

Further access is limited to authorized users for State of Illinois official business only. By accessing or using this system you are consenting to monitoring and recording, which may be disclosed for administrative, disciplinary, civil, or criminal actions, penalties, or prosecution. Users should have no expectation of privacy when using this system or any of its components. The transmission of the file(s) is secured via SSL during the upload and download process; to further protect the file(s), it is the user's responsibility to protect confidential data by encrypting sensitive files before upload.

I acknowledge that I have read and understand this warning.

It's as easy as 1-2-3, ... 4! [Instructions](#) [Features!](#)

1 Recipient Email Addresses: (comma separated)

2 Your Email Address :

3 Select File to Send (Up to 2 gig):
 No file selected. [+ Add More Files](#)

File Transfer Email Subject (Optional):

[Advanced Options](#)

Message to Recipient (Optional):

4

Help Desk Information



- For general EHR Incentive and Meaningful Use inquiries, contact us by phone or email

<p>Contact the Illinois Medicaid EHR Incentive Help Desk for Attestation, Registration, and Meaningful Use answers</p> <p>1-855-MU-HELP-1 (855-684-3571) Monday-Friday, 8:30am – 5:00pm</p>	<p>hfs.ehrincentive@illinois.gov</p> <p>iHFS ILLINOIS DEPARTMENT OF Healthcare and Family Services</p>
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- Chicago providers: visit www.chitrec.org for more information on services and support
- Providers outside of Chicago: visit www.ilhitrec.org