Meaningful Use Audits
Lessons Learned from the Front Line

Audio Announcement: Select your audio option now. To dial in by phone, select “Use Telephone” in your audio pane, then dial the provided phone number and access code. Once connected, enter your unique audio PIN. To access the toll-free number, click on “Additional Numbers.” By default you have joined audio using your computer’s speaker system.
Managing Your Audio

**Use Telephone**

If you select the “use telephone” option please dial in with the phone number and access code provided.

**Use Microphone and Speakers**

If you select the mic & speakers options please be sure that your speakers/headphones are connected.
Managing Your Screen

Questions Panel

To ask the presenter, please type your question into the question panel and press send.

Minimizing and Maximizing Your Screen

Use the orange and white arrow to minimize and maximize the GoTo panel.

Use the blue and white square to maximize the presentation area.
Meaningful Use Services

One-Time Assessment

• “We are about to attest and need assurance everything is right.”
• “Not certain where to start or what should be on our audit radar.”
• “We have outside support but want additional validation.”

Meaningful Use Scorecard

• Extensive detail
• Provide regulatory references with each question answered for your audit documentation
• Rapid return of detailed and customized analysis

Long-Term Support

• “We need daily support.”
• “We require assistance to stay on top of all the clarifications.”
• “We cannot hire an additional FTE to support MU.”
• “We have a fairly complex IT environment.”

Meaningful Use Navigator®

• Assess current environment and identify gaps, and monitor your progress
• Experts on-call
• Proactive alerts

For more information, contact:

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Meaningful Use Audits
Lessons Learned from the Front Line

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Senior Consultant, Meaningful Use Navigator
The Advisory Board Company
panjamat@advisory.com
Road Map

1. Understanding the Meaningful Use (MU) Audit

2. Lessons Learned from the Front Line

3. Developing a MU Mock Audit
Potential Price Tags of MU Audit Failure

Potential Impacts of MU Audit

**$31M**

Returned meaningful use incentives by Health Management Associates (HMA) due to error in certified EHR technology application based on its internal review

**Job Loss**

• CIO and multiple VPs at HMA
• CMIO of Detroit Medical Center

**Other Impacts**

• Red flag for subsequent audits
• Organizational reputation

## Value of Audit Preparation

### Average Industry Incentives\(^1\) Received As of June 2014

<table>
<thead>
<tr>
<th>Professional Type</th>
<th>Average Incentive</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medicaid Eligible Professional</td>
<td>$24,973</td>
</tr>
<tr>
<td>Medicare Eligible Professional</td>
<td>$24,212</td>
</tr>
<tr>
<td>Medicare Advantage Eligible Professional</td>
<td>$29,832</td>
</tr>
<tr>
<td>Eligible Hospital</td>
<td>$3.21M</td>
</tr>
</tbody>
</table>

### Potential Industry Payment Adjustments in 2015

<table>
<thead>
<tr>
<th>Professional Type</th>
<th>Average Incentive</th>
</tr>
</thead>
<tbody>
<tr>
<td>Internal Medicine</td>
<td>$1,110</td>
</tr>
<tr>
<td>Oncology</td>
<td>$1,668</td>
</tr>
<tr>
<td>Orthopedics</td>
<td>$2,430</td>
</tr>
<tr>
<td>Hospital</td>
<td>$2.3M</td>
</tr>
</tbody>
</table>

To Address the Risk of Fraud and Abuse

**Serious Consequences for Fraud**

**Types of Penalties**
- Significant fines
- Imprisonment
- Both fines and imprisonment
- Loss of licenses
- Exclusion from Medicare participation for a specified period of time
- Civil liability

**5%** of ALL Attesters Will Be Audited

<table>
<thead>
<tr>
<th>Provider Type</th>
<th>Program Type</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Medicare</td>
</tr>
<tr>
<td>EPs</td>
<td>YES</td>
</tr>
<tr>
<td>EHs/CAHs</td>
<td>YES</td>
</tr>
</tbody>
</table>

MU Audit Mechanism

Recognizing the Audit Details

**Auditors**

<table>
<thead>
<tr>
<th>Provider Type</th>
<th>Program Type</th>
<th>Medicaid</th>
<th>Medicare</th>
</tr>
</thead>
<tbody>
<tr>
<td>EPs</td>
<td>Figliozzi and Company OR the EHR Meaningful Use Audit Team</td>
<td></td>
<td></td>
</tr>
<tr>
<td>EHs/CAHs</td>
<td>State or its contractor</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Audit Timing**

- Attestation
- Pre-Payment Audit
- Incentive Payments
- Post-Payment Audit
- Off the Audit Hook

**6 Years**

**Audit Methodology**

- Random
- Risk Profile

The Advisory Board Company – Health Care IT Advisor research and analysis.
On Your Mark, Get Set, Go!

MU Audit Processes

1. Receive the Initial Request via the Email Address Entered during Registration

2. Conduct Internal Response Processes

3. Submit Requested Documentation Via Regular Mail or Secured Portal

4. Potentially Receive A Request For Onsite Review

5. Potentially Receive Additional Rounds of Subsequent Requests

6. Receive an Audit Determination Letter from the Auditor

Assume MU Audits Are Unavoidable

Team Sport

- Formal vs. informal governance
- Time and resource consuming
- Objective owner
- Business continuity

Robust Book of Evidence

- Per payment year
- Electronic vs. paper
- Effective naming convention
- Centralized, secured location
- Detailed support documentation

“Two years in a row. I was under the impression they were random. So it seemed odd to me to get the notification again, the second year after the filing.”

Ralph Johnson, CIO
Franklin Community Health Network,
Farmington, Maine

Preparation is Key

Tight Response Workflow

- Assign accountability and responsibility
- Prioritize audit activities
- Streamline the workflow through reiterations based on experiences

Source: The Advisory Board Company – Health Care IT Advisor research and analysis.
1. Understanding the Meaningful Use (MU) Audit

2. Lessons Learned from the Front Line

3. Developing a MU Mock Audit
Creating a Team Structure

One-Person Team Is Unhealthy, Share the Load

Sole Responsibility
- MU audit preparation is typically assigned solely to MU Project Manager
- Limited executive involvement
- No to little oversight
- No contingency plan in an absence of MU Project Manager

Encouraged Practice

1. Secure executive buy-in and involvement
2. Engage stakeholders from various departments
3. Develop a formal team structure with an oversight/steering committee

Team-Based
- Dedicated MU audit team with representation across departments
- Executive sponsorship
- Steering Committee involvement
- Business continuity

Source: The Advisory Board Company – Health Care IT Advisor research and analysis.
Developing a Robust Book of Evidence

Make or Break and Audit with Support Documentation

Per Payment Year

Electronic vs. Paper

Centralized, Secured Location

Effective Naming Convention and Organization

Detailed Support Documentation

1) MU Audit Checklist. [Link](http://www.advisory.com/Consulting/meaningful-use-navigator/meaningful-use-audit-checklist)

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Highlights from the Field

- **LOGO!**
  - Reports with Vendor Logo

- **Date of Security Risk Analysis Completion and Inclusion of Remediation Plan**

- **Documentation to show CEHRT Functionalities**

- **Rationale for Selecting the CEHRT**

- **Volume-Based Review**
  - EH: ED Volume Calculation Method
  - EP: Low Patient Volume

- **Consistency of Denominators**

Source: The Advisory Board Company – Health Care IT Advisor research and analysis.
Know Your Numbers; Prevent a Risk Profiling Audit

Avoid a Major Reporting Pitfall for Percentage-Based Measures

Percentage-based Measures with Identical Denominators

Number of unique patients admitted to the EHs or CAH’s inpatient or ED during the EHR reporting period

---

**Stage 2 Performance Scorecard**

**Reporting Period: April 1 – June 30, 2014**

<table>
<thead>
<tr>
<th>Measure</th>
<th>Numerator</th>
<th>Denominator</th>
<th>Performance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Demographics</td>
<td>7,350</td>
<td>7,428</td>
<td>98.9%</td>
</tr>
<tr>
<td>Vital signs</td>
<td>7,222</td>
<td>7,428</td>
<td>97.2%</td>
</tr>
<tr>
<td>Patient-specific Education</td>
<td>6,232</td>
<td><strong>8,059</strong></td>
<td>77.3%</td>
</tr>
</tbody>
</table>

---

1) Know Your Numbers: How to Avoid a Major MU Pitfall. 

Source: The Advisory Board Company – Health Care IT Advisor research and analysis.
Road Map

1. Understanding the Meaningful Use (MU) Audit
2. Lessons Learned from the Front Line
3. Developing a MU Mock Audit
Why Conduct an Internal Mock Audit?

Scripps Health’s Internal Objectives

- Develop a replicable, systematic approach
- Ensure timely responses to audit requests
- Confirm audit processes are compliant with internal policies
- Guarantee readiness of audit tracking tools
- Build senior leadership confidence

Source: Scripps Health
7 Effective MU Audit Preparation Steps

- **Step 1**: Create a Comprehensive Book of Evidence
- **Step 2**: Define Role of Internal Audit
- **Step 3**: Formulate Guiding Principles
- **Step 4**: Create Audit Tracking Tools
- **Step 5**: Determine Stakeholders & Roles
- **Step 6**: Conduct (Mock) Audit
- **Step 7**: Obtain Feedback / Update Process

Source: Scripps Health
Step 1: Creating a Comprehensive Book of Evidence

Scripps Health’s Book of Evidence

- Stored on secure drive with limited access
- Systematically organize folders
- Use different media types (recorded demonstration vs. screenshots)

Core Objectives
Step 1: Creating a Comprehensive Book of Evidence

Performance Reports

Name

- Clinical Quality Measures
- Core Objectives
- Financial
- Meetings and Communications
- Menu Objectives
- Payment Eligibility for Hospitals
- Reports
- Use of a Certified EHR
- BOE Index EH.xlsx

Name

- Clinical Quality Measures Validation
- EDW Datamart Development
- EDW Final Report Validation
- Final Reports
- Supplemental Reports by Objective

Name

- Final Report Validation Documentation
- Internal Audit Review of Validation and BOE
- Report Development - QA
- Report Development - UAT
- Report Validation Process Documentation
- Validation Screenshots

Source: Scripps Health
Step 1: Creating a Comprehensive Book of Evidence

Decision Making, CMS Communications, and CEHRT
Step 2: Define Role for Internal Audit

**Independent Function**

- Corporate VP, Chief Audit, Compliance, and Information Security Executive serves as our Chief Audit Executive
- Reports to: President/CEO, SVP-General Counsel, and Audit Committee of the Board of Trustees

**Oversight/Steering Committee Stakeholders**

- 19 individuals from IT, compliance and security, clinical, finance, general counsel, HIM, knowledge management, and operations
- Corporate VP, Chief Audit Compliance & Information Security Executive guidance role

**Assurance Responsibilities**

- Executive Oversight Steering Committees
- Meaningful Use Acute Care EHR Risk Committee
- Meaningful Use Ambulatory EHR Risk Committee
- Performs Book of Evidence Audit/Validation
- Meaningful Use Report Audit Validation
- Ensures Legal input as needed
- Consultation Role
- **Observation Role in the Mock Audit**

Source: Scripps Health
Step 3: Formulate Guiding Principles

1. Single point of contact for communications with CMS audit contractor
2. Only provide specific information requested
3. Internal "mock audit" will be performed as a self-assessment to strengthen our readiness and ensure timely responses to audit requests with Internal Audit in Observation Role
4. Aggregate all required documents in half the time allotted to allow time for approvals and sign-offs
5. All templates for tracking audit progress will be developed prior to "mock audit"
6. All communications with auditor will request email confirming receipt
7. Log all documents shared and communications with auditor
8. To protect patient confidentiality, patient information will be de-identified
9. All relevant supporting documentation will be maintained for six (6) years post-attestation

Scripps Health’s MU Audit Preparation and Response Process

Source: Scripps Health
### CMS Meaningful Use Eligible Hospital Audit Checklist

<table>
<thead>
<tr>
<th>Status</th>
<th>Ref</th>
<th>Action/Task/Activity</th>
<th>Person Assigned</th>
<th>Key Stakeholders</th>
<th>Action Date (Scheduled/Complete)</th>
<th>Expected Completion Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td>CFO notified of CMS Audit Request - forwards message and calls Director, MU</td>
<td>CFO / Director MU</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td>Email all key stakeholders to notify who is being audited</td>
<td>Director MU</td>
<td>Refer to Distribution List</td>
<td>Same day as notification</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
<td>Populate CMS EH Audit Request Form with information requested from auditor</td>
<td>Director MU</td>
<td></td>
<td>Same day as notification</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td></td>
<td>Set up conference call with all stakeholders to review process and what is requested</td>
<td>Director MU</td>
<td>Refer to Distribution List</td>
<td>Within 24 hours of receipt of notification</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td></td>
<td>MU Team meeting to assign owners and due dates to items on EH Audit Request Form</td>
<td>Director MU</td>
<td>Based on Requests</td>
<td>Within 36 hours of receipt of notification</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td></td>
<td>Complete Confidential Information Data Request Authorization Form</td>
<td>Director MU</td>
<td>Sr. Director Compliance</td>
<td>Within 36 hours of receipt of notification</td>
<td></td>
</tr>
</tbody>
</table>
## CMS Meaningful Use Eligible Hospital Audit Checklist

<table>
<thead>
<tr>
<th>CMS Audit Contact Date:</th>
<th>Eligible Hospital Audited:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>FINAL Date to Submit Documentation:</strong></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Status</th>
<th>Ref</th>
<th>Action/Task/Activity</th>
<th>Person Assigned</th>
<th>Key Stakeholders</th>
<th>Action Date (Scheduled/ Complete)</th>
<th>Expected Completion Date</th>
<th>Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>1</td>
<td>CFO notified of CMS Audit Request - forwards message and calls Director MU</td>
<td>CFO / Director MU</td>
<td>Key Stakeholders - Calls/Emails &amp; Email only</td>
<td></td>
<td></td>
<td>CFO is Authorized Official</td>
</tr>
<tr>
<td>2</td>
<td>2</td>
<td>Email all key stakeholders to notify who is being audited</td>
<td>Director MU</td>
<td>Key Stakeholders - Calls/Emails &amp; Email only</td>
<td></td>
<td></td>
<td>Same day as notification</td>
</tr>
<tr>
<td>3</td>
<td>3</td>
<td>Populate CMS EH Audit Request Form with information requested from auditor</td>
<td>Director MU</td>
<td>Key Stakeholders - Calls/Emails</td>
<td></td>
<td></td>
<td>Same day as notification</td>
</tr>
<tr>
<td>4</td>
<td>4</td>
<td>Set up conference call with all stakeholders to review process and what is requested</td>
<td>Director MU</td>
<td>Key Stakeholders - Calls/Emails</td>
<td></td>
<td></td>
<td>Within 24 hours of receipt of notification</td>
</tr>
<tr>
<td>5</td>
<td>5</td>
<td>MU Team meeting to assign owners and due dates to items on EH Audit Request Form</td>
<td>Director MU</td>
<td>Key Stakeholders - Calls/Emails</td>
<td></td>
<td></td>
<td>Within 36 hours of receipt of notification</td>
</tr>
<tr>
<td>6</td>
<td>6</td>
<td>Complete Confidential Information Data Request Authorization Form</td>
<td>Director MU</td>
<td>Sr. Director Compliance</td>
<td></td>
<td></td>
<td>Within 36 hours of receipt of notification</td>
</tr>
<tr>
<td>7</td>
<td>7</td>
<td>Gather information and post in EH Audit Folder</td>
<td>Action item assigned</td>
<td></td>
<td></td>
<td></td>
<td>Within 3 to 5 days of receipt of notification Insert folder link</td>
</tr>
<tr>
<td>8</td>
<td>8</td>
<td>MU Team Meeting with Internal Audit to review submission</td>
<td>Corp VP Audit &amp; Compliance / Director MU</td>
<td></td>
<td></td>
<td></td>
<td>24 hours after completion of gathering documents</td>
</tr>
<tr>
<td>9</td>
<td>9</td>
<td>Set up GoToMeeting with all stakeholders to review completed audit documents for submission</td>
<td>Director MU</td>
<td>Key Stakeholders - Calls/Emails</td>
<td></td>
<td></td>
<td>Within 8 days of receipt of notification</td>
</tr>
<tr>
<td>10</td>
<td>10</td>
<td>Obtain approval signatures of audit document packet</td>
<td>Director MU</td>
<td></td>
<td></td>
<td></td>
<td>Within 10 days of receipt</td>
</tr>
<tr>
<td>11</td>
<td>11</td>
<td>Submission of documentation on audit contractor’s secure website</td>
<td>Director MU</td>
<td>Figliozzi &amp; Co (audit contractor)</td>
<td></td>
<td></td>
<td>No later than the 14th day of notification All above must be complete for this to occur</td>
</tr>
<tr>
<td>12</td>
<td>12</td>
<td>Post audit completion receipt and all documents submitted in COMPLETE audit folder in Book of Evidence on Secure Drive</td>
<td>Director MU</td>
<td></td>
<td></td>
<td></td>
<td>No later than the 14th day of notification Insert folder link</td>
</tr>
<tr>
<td>13</td>
<td>13</td>
<td>Send email to all stakeholders confirming audit submission</td>
<td>Director MU</td>
<td>Key Stakeholders - Calls/Emails &amp; Email only</td>
<td></td>
<td></td>
<td>No later than the 14th day of notification</td>
</tr>
<tr>
<td>14</td>
<td>14</td>
<td>Audit process review session conference call</td>
<td>Director MU</td>
<td>Key Stakeholders - Calls/Emails</td>
<td></td>
<td></td>
<td>Within 2 week of final submission</td>
</tr>
</tbody>
</table>

Repeat process above if CMS auditor requests additional information
Step 4: Create Audit Tracking

CMS Meaningful Use EH Audit Request Items

<table>
<thead>
<tr>
<th>Status</th>
<th>Ref</th>
<th>Request for documentation</th>
<th>Person Assigned</th>
<th>Action Date Assigned</th>
<th>Action Date Due</th>
<th>Action Date Completed</th>
<th>Expected Completion Date</th>
<th>Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td>Proof of Possession of a certified EHR:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>As proof of use of a Certified Electronic Health Record Technology system, provide a</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>copy of your licensing agreement with the vendor or invoices. Please ensure that the</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>licensing agreements or invoices identify the vendor, product name and product version</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>number of the Certified Electronic Health Record Technology system utilized during your</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>attestation period. If the version number is not present on the invoice/contract,</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>please supply a letter from your vendor attesting to the version number used during your</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>attestation period.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

EP Audit Acknowledgement Form

- Grants permission to respond to audit request on their behalf
- Approval of submission packet before sending to Figliozzi and Company
### CMS Meaningful Use Audit Request Items

**CMS Audit Contact Date:**

**Eligible Hospital or Provider Audited:**

**FINAL Date to Submit Documentation:**

Populate the requests for documentation below based on letter from CMS Auditor.

<table>
<thead>
<tr>
<th>Status</th>
<th>Ref</th>
<th>Request for documentation (SAMPLE ONLY)</th>
<th>Person Assigned</th>
<th>Action Date Assigned</th>
<th>Action Date Due</th>
<th>Action Date Completed</th>
<th>Expected Completion Date</th>
<th>Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td><strong>Proof of Possession of a certified EHR:</strong> As proof of use of a Certified Electronic Health Record Technology system, provide a copy of your licensing agreement with the vendor or invoices. Please ensure that the licensing agreements or invoices identify the vendor, product name and product version number of the Certified Electronic Health Record Technology system utilized during your attestation period. If the version number is not present on the invoice/contract, please supply a letter from your vendor attesting to the version number used during your attestation period.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Within 3 to 5 days of receipt of notification</td>
</tr>
<tr>
<td>2</td>
<td></td>
<td><strong>For Core Measures #1</strong> provide the supporting documentation (in either paper or electronic format) used in the completion of the Attestation Module responses (i.e., a report from your EHR system that ties to your attestation).</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Within 3 to 5 days of receipt of notification</td>
</tr>
<tr>
<td>3</td>
<td></td>
<td><strong>For Core Measures #3</strong> provide the supporting documentation (in either paper or electronic format) used in the completion of the Attestation Module responses (i.e., a report from your EHR system that ties to your attestation).</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Within 3 to 5 days of receipt of notification</td>
</tr>
<tr>
<td>4</td>
<td></td>
<td><strong>Public Health Reporting Objective:</strong> Documentation to support the provider selected and met or was granted an exclusion for one public health reporting objective. Acknowledgement from your public health department of your test is acceptable.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Within 3 to 5 days of receipt of notification</td>
</tr>
</tbody>
</table>
### Step 5: Determine Stakeholders & Roles

**Align Stakeholder Roles with Audit Checklist**

Mock Audit Identifies Roles:
- Mock Auditor
- Key Audit Contact
- Internal Audit Role

EP Audit Signatures:
- Executive Sponsor & EP

#### EH Stakeholder Distribution List

<table>
<thead>
<tr>
<th>Corporate</th>
<th>Stakeholders Distribution List Calls &amp; Emails</th>
<th>Stakeholders Signature List</th>
<th>Copy on Emails</th>
</tr>
</thead>
<tbody>
<tr>
<td>Corp VP Asst General Counsel</td>
<td>![Check Mark]</td>
<td>![Check Mark]</td>
<td>![Check Mark]</td>
</tr>
<tr>
<td>Corp VP, Audit/Compliance</td>
<td>![Check Mark]</td>
<td>![Check Mark]</td>
<td></td>
</tr>
<tr>
<td>Corp Executive VP, Strategy &amp; Administration</td>
<td>![Check Mark]</td>
<td>![Check Mark]</td>
<td></td>
</tr>
<tr>
<td>CIO</td>
<td>![Check Mark]</td>
<td>![Check Mark]</td>
<td></td>
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Source: Scripps Health
Step 6: Conduct a Mock Audit

Plan Two Waves

Wave 1
- Proof of certified EHR
- Source documents used when completing attestation for Core & Menu
  - Summary Report – numerator/denominator & time period
  - Evidence report was generated for the EH or EP
- Security Risk Assessment
  - Proof performed prior or during reporting period
  - Procedures performed during analysis, results of analysis, implementation plan and completion dates for deficiencies

Wave 2
- Core & Menu objectives with thresholds – documentation
- Attestation measures – proof of enabled functionality
- Documents to support exclusions
- Public Health Agency test
- Patient List by Condition – de-identity PHI

CMS FAQ 7711
- Audit guidance
- https://questions.cms.gov/faq.php?id=5005&faqId=7711

Source: Scripps Health
Step 7: Obtain Feedback and Incorporate Lessons

Major Lessons Learned from the Mock Audit and Actual Audits

1. Determine internal audit role and requirements early in process
2. Allow time for legal inputs on your security risk analysis submission
3. Obtain vendor approval for using agreements as PROOF of CEHRT
4. Value of screenshots from LIVE
5. Supportive documentation created for each individual objective
6. We are prepared, not scared!

Source: Scripps Health
Don’t Wait to Get Here

• **Respondents ONLY** – EPs, EHs, and CAHs that do not respond to the auditor CANNOT appeal.

• **Time Sensitive** – An appeal must be filed within 30 days of the demand letter.

• **Electronic submission** – File an appeal with documentation at ehrappeals@provider-resources.com

• **Required Documentation** – An appeal will be considered ONLY IF all documentation is provided at the time of submission.

• **Questions** – Contact the EHR Information Center at 888-734-6433

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**Audits and Appeals – Misconceptions**

• **No one** outside of CMS or its audit contractor has special or privileged access to the audit or appeal process

• **No one** has been asked to “consult” with CMS or its audit contractor on the audit or appeal process

• **No one** has any “specialized knowledge”

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Download Useful Tools and Educate Yourself

Publicly Available Tools

- **Book of Evidence Checklist:** Preparing for Meaningful Use Audit

- **Scripps Health’ Audit Tracker**

**Additional Resources**
- Meaningful Use—The Whiteboard Story
- Quick Guide Comparison—Stage 1 to Stage 2 Objectives and Measures
- MU Audits: Lessons Learned from the Front Line
Questions

Questions Panel

To ask the presenter content questions, please type your question into the question panel and press send.
What Did You Think of Today’s Session?

Please Take Time to Complete Our Evaluation

• Once you or the presenter exits the webconference, you will be directed to an evaluation that will automatically load in your web browser.

• Please take a minute to provide your thoughts on the presentation.

Thank You!

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