

FAQ's

EHS and EPs

If I have questions regarding the letter and questionnaire who should I contact?

Questions can be directed to dhhreh@wv.gov. When contacting this email please be sure to provide your case #, provider NPI #, and provider name used in the attestation.

What are requirements/guidelines for acceptable screen shots of documentation for the audit?

If possible, the screen shot should show that it is from the CEHRT, such as a vendor logo or the provider/practice name. It should include the date of the screen shot, especially if the documentation is used to verify a function that occurred previously. It also must include the information related to what is being verified.

Is this audit going to be completed remotely or on-site?

A desk audit will be performed where supporting documentation is received and reviewed remotely. Based on these results, additional review may be required which could include an on-site visit. Hospitals or providers will be notified in advance of any on-site audits.

What type of detail is required in the “detail of the numerator and denominator”?

The detail is a list of the elements that the numerator or denominator is comprised of such as a list of patients, number of prescriptions, etc. Each element included should have a unique identifier so that the count can be verified.

You don't have the capability in your EHR reporting system to provide a list of the patients included in your numerator or denominator counts.

You should work with your vendor to try and obtain the requested information. There may be reporting capabilities you are not aware of or special reporting options only available through the vendor. A local Regional Extension Center (REC) may also be able to intervene and assist the provider to better understand the program and the CEHRT if the vendor is unable to do so.

If data is in the certified electronic health record technology, can a different system be used to generate reports to provide documentation for this audit?

The certified EHR technology must be able to record the numerator and denominator and generate a report. However, non-certified systems can be used to calculate numerators and denominators and to generate reports regarding the measures.

EPs Only

If I attested individually and used a CEHRT from one of my practice locations do I still need to list patient volume for each practice location?

Please provide all patient volume documentation for all locations attested with. If attesting for Meaningful Use, documentation must be provided for all practice locations so it can be verified that 50% of the patient encounters were reported at a practice/location with a CEHRT.

If I didn't contract with a third party to conduct a security risk assessment do I still need to provide my results and documentation?

Yes, all providers attesting with MU need to undergo a security risk assessment and all findings and associated documentation must be provided regardless of the use of a third party.

What is the difference between questions 9 and 12 in the MU Questionnaire?

Questions 9 and 12 are very similar, however, question 9 is asking for the procedures used to determine unique patients (i.e., how you gathered total unique patients for the reporting period from your system) for the EHR reporting period. Question 12 is asking for the definition used to determine unique patients (i.e., what was considered a unique patient), including what visit types are included.

In the Eligible Professional AIU questionnaire, what is the difference between question 5 and 5b, and question 10?

Question 5 is asking for patient volume and the procedures used to determine this number. Many providers work at multiple locations, therefore it is important that you specify which locations you used during your attestation in order to calculate your patient volume. Question 10 is looking for verification that one of the locations that you used to calculate patient volume as explained in question 5 uses a Certified Electronic Health Record Technology. Therefore, documentation is needed to verify that a CEHRT is used at one of your locations.

EHS Only

The Eligible Hospital desk audit questionnaire only includes an information request for financial and operational reports that support eligibility and payment calculations. Is any additional documentation needed to support Meaningful Use?

The audit that is being conducted is specifically for eligibility and AIU. CMS is responsible for conducting MU audits and will contact you separately if you are selected. Being selected for an eligibility audit does not necessarily mean you will be selected for an MU audit. Therefore, for this audit no documentation is required to support Meaningful Use.