

# Washington State EHR Incentive Program WHITE PAPER #8: EP Patient Volume Encounter Reports

Revised April 2016

Due to new CMS pre-payment audit instructions, we are required to collect the following information. You can supply the original report you ran to get your patient volumes or run a new one that shows similar PV.

• A copy of the encounter report you used to come up with your Total Encounters and the Medicaid Encounters in **Excel** format. It must be sortable- see below example.

#### **Attesting with Individual Encounters**

 An encounter report to include patient names, dates of service, insurance carrier, client ID/insurance number (Identify the encounters that are <u>Apple Health/Medicaid or otherwise includable</u> in the 30% (or 20% for pediatricians) patient volume requirement, as opposed to other types of coverage.), or

### **Attesting with Group Proxy**

- An encounter report to include Provider name, NPI, patient names, date of services, insurance carrier, client ID/insurance number (Identify the encounters that are <u>Apple</u> <u>Health/Medicaid or otherwise includable</u> in the 30% patient volume requirement, as opposed to other types of coverage.)
- Provide a list of providers included in the encounter data, including Name/NPI/License
  Type/Date of Hire and End Date. When using group proxy, the entire practice must be
  included, including non-EP's.
- Include <u>all</u> providers for example: RNs, Hygienists; etc., even if they may not be eligible for the program, but still have an encounter with your patient.

## **Definitions of Encounter Types:**

**Total Encounters:** Total encounters (paid or unpaid) for the provider (if applying as an individual) or for the entire group (not just eligible providers). If you have bundled charges or bill for on one claims (such as an OB-GYN provider), then count "all" of the encounters not just the one claim.

**Medicaid Encounters:** Total Medicaid client encounters (paid or unpaid) for the provider (if applying as an individual) or for the entire group (not just eligible providers). If you have bundled charges or bill for on one claims (such as an OB-GYN provider), then count "all"

of the encounters not just the one claim. Medicaid client claims should include any encounters where the client is Medicaid eligible and/or Medicaid pays all or part of premiums or co-pays. (This "excludes" CHIP encounters, see below).

**CHIP:** Washington Medicaid's CHIP program is a "stand-alone", Title XXI, and must be separated from Medicaid Encounters (click on the Worksheet below for tools to remove stand-alone encounters if your system does not separate them out). http://www.hca.wa.gov/assets/program/patient-volume-worksheet.pdf

**CHARITY CARE**: An advance written agreement that services are at no cost due to income limitations. Uncollectable debt is not charity care.

**SLIDING FEE SCALE:** An advance, written agreement that services are at reduced cost due to income limitations. Uncollectable debt is not sliding fee scale.

#### Sample of Encounter Report and minimum data required:

Patient	Date of Birth	Date of Service	patient primary ins pkg	patient	patient ins hldr idcert no	Svs provider NPI/Name
Name			name	secondary ins		
				pkg type		
Doe, John	9/1/2014	1/1/2014	Aetna	Personal	12346789	12345678901
				Payment		
				(Cash - No		
				Insurance)		
Mae, Daisy	10/29/1983	2/25/2014	Delta Dental	Personal	6541321654	65415853189
				Payment		
				(Cash - No		
				Insurance)		
Dog, Lucky	1/1/2014	2/1/2014	Uniform Medical	Personal	36543213	65421598560
				Payment		
				(Cash - No		
				Insurance)		
Boy, John	3/4/2005	3/1/2014	Medicaid- FFS	Medicaid	000000000WA	95465165165
Girl, Jane	5/5/1999	2/1/2014	AMERIGROUP-WA -	Medicaid	54321	ect
			HEALTHY OPTIONS			
			(MEDICAID HMO)			

If you are unable to supply the above documents for some reason, please contact us to discuss optional documents we can accept.

Contact email: healthit@hca.wa.gov

Name Change Disclaimer: CMS is renaming the EHR Incentive Programs to the Promoting Interoperability (PI) Programs. Washington does not plan on following the name change however, you will see reference to it in most of our documents. For more information please visit the CMS website.