



# My Practice's Initial Experience with Meaningful Use Attestation

By J. Scott Litton, Jr., MD | June 17, 2011

The time has finally come. My practice has adopted the latest software download for reporting meaningful use of our EHR software. I have been feverishly working with compiling the necessary requirements for the attestation process. The data has been collected for the 90-day time period and I was all set to go.

There are several requirements for the attestation process for demonstrating to CMS that I am using our EHR software in a meaningful way. While I will not attempt to describe each of the requirements from CMS, I will describe my first attempt at the attestation process.

I chose to use the time period of March 1 through June 1 for our initial reporting period. For 2011, CMS requires that the medical practice report a 90-day time period for each physician to earn the payments proposed for Medicare patients. Our practice does not have the necessary percentage of Medicaid patients to apply for the Medicaid bonus available, however.

To start off, data reporting for vaccine administration was an easy process. Simply attest that the EHR software can successfully report vaccine information—very easy. Most EMR software titles can easily do this. Next, verify that you have the necessary percentage of patients for the Medicare requirement. Very easily completed. Next, verify that the appropriate percentage of e-prescribing has been completed. That was a snap as well. As I went through step by step, I found that the reporting process was very easily completed and I must brag about [my EHR choice](#) because all the reports for meaningful use are neatly arranged and easily accessible for review.

I was doing very well until I came to the necessary percentage of patients for reporting smoking status. Our EHR accurately documents this in each note, however I found that the necessary requirement of intervention documentation was not completed for the necessary percentage of patients during the reporting period. Rather than report unverified information, I simply chose to modify my existing templates and use an upcoming reporting period in order to satisfy this requirement.

Next, I found that providing the necessary percentage of visit summaries to the patients was below the requirement as well. This was easily remedied by modification of my existing templates and encouraging more patients to sign up for our available online portal. Once this has been completed, I will be able to easily send an electronic copy of each visit summary to each patient in their portal inbox.

For the most part, I found the initial attestation process to be very easy and not very time consuming. My EHR software reporting capabilities allowed me to create a good first draft of my efforts and was easily able to review any deficiencies that our practice demonstrates at present. The entire process of attestation took about 90 minutes to complete and for the most part, I have no complaints with using the CMS website. Sign up was very easy and the practice administrator can complete a portion of reporting and save the progress and come back later to complete.

