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# POSSIBILITY

MANAGING A CONVERSION AND MEANINGFUL  
USE ATTESTATION SIMULTANEOUSLY



Solving for Today. Preparing for Tomorrow.



**Your phone has been automatically muted. Please use the Q&A panel to ask questions during the presentation!**

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# INTRODUCTIONS

## JAMES QUILL

- **CONSULTANT, PROFESSIONAL SERVICES**
  - Conversion Analyst
  - 2+ years in Healthcare IT

## KRISTIE MITCHELL

- **SENIOR CONSULTANT, PROFESSIONAL SERVICES**
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## DREW JOHNSON

- **CONSULTANT/DEVELOPER, TECHNICAL SERVICES**
  - Custom Programmer/Data Expert
  - 2+ years in Healthcare IT

# AGENDA

## I. OVERVIEW

- I. Conversion Process
- II. Timeline Considerations
- III. Crosswalk Requirements

## II. TECHNICAL PLANNING

- I. Conversion Recommendations

## III. ATTESTATION PLANNING

- I. Overview
- II. Resource requirements
- III. Data Submission options
- IV. Gap Analysis
- V. Data Storage

## IV. CONCLUSION

# Overview

## Conversion Process

- I. Definition
- II. Terms
- III. Examples

# Terms

## I. ETL Process

- I. Process by which data is moved from one system to another. Extract>Transform>Load

## II. Legacy System

- I. EHR that you are converting from; source system.

## III. Target System

- I. EHR that you are converting to.

# Overview

## Timeline (High Level)

- I. Project Design/System Access
- II. Extracts/Data Evaluation
- III. Data Mapping
- IV. Testing/Validation/Issue Resolution
- V. Conversion Go-Live
- VI. Support and Gap Loads

# Overview

## Crosswalk requirements

- I. Identifies the fields that they report on in the data warehouse
- II. Know exactly how actions in the legacy system post to the database for reporting>how actions in the target system post to the database
- III. Comparison to make sure that all data is related/similar and all fields are accounted for



# Overview

## Technical recommendations

- I. How should the data be brought over – Discretely or Nondiscretely?
  - I. Discrete
    - I. Unable to report on the data if converting the data nondiscretely.
- II. How should the data be brought over?
  - I. What should be brought over in a CCD?
  - II. What should be brought over via HL7?

# Attestation Planning Overview

- I. Will an EHR conversion impact your ability to attest?
- II. What are your long term goals?
- III. Budgeting

# Attestation Planning

## Resource Allocation

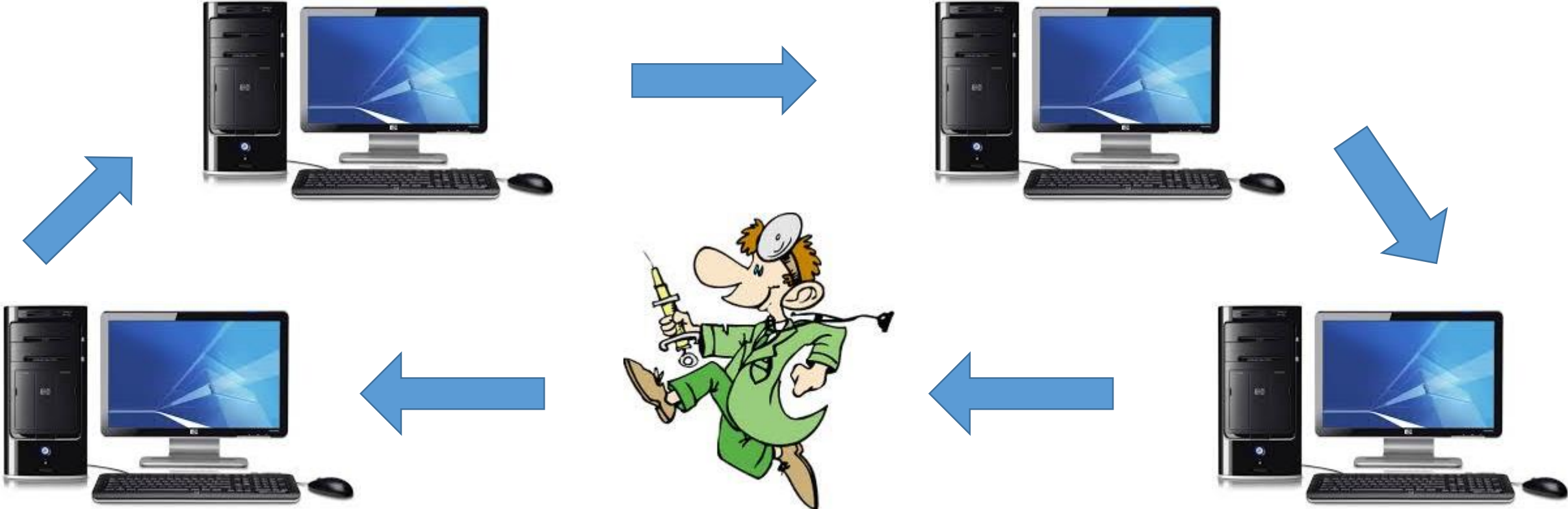
- I. Budgeting
- II. Training
- III. Communication across analysts
  - I. Conversion Team
  - II. Quality Reporting Team

# Attestation Planning

## Data Submission

- I. CMS registration updates
  - I. Check current registration status here: <https://ehrincentives.coms.gov>
- II. Identifying your percentages
- III. Unique reporting situations

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# Attestation Planning

## Comparison of Legacy and Target system workflows

- I. Gap Analysis
- II. Configuration
- III. Ongoing Maintenance

# Attestation Planning

## Data Storage

- I. What do you need
  - I. Source Document
  - II. Documentation for Non-Percentage-Based Objectives
  - III. Exclusions Documentation
- II. How long do you have to keep it
- III. Why you have to keep it

## Conclusion

### Resource Links:

- I. <http://www.galenhealthcare.com/products-services/>
- I. [http://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/Downloads/EHR\\_SupportingDocumentation\\_Audits.pdf](http://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/Downloads/EHR_SupportingDocumentation_Audits.pdf)
- II. [http://wiki.galenhealthcare.com/index.php/What to Expect When Converting A Walk Through a Clinical Data Conversion](http://wiki.galenhealthcare.com/index.php/What_to_Expect_When_Converting_A_Walk_Through_a_Clinical_Data_Conversion)
- III. <http://www.asha.org/slp/RecordRetention/#state>



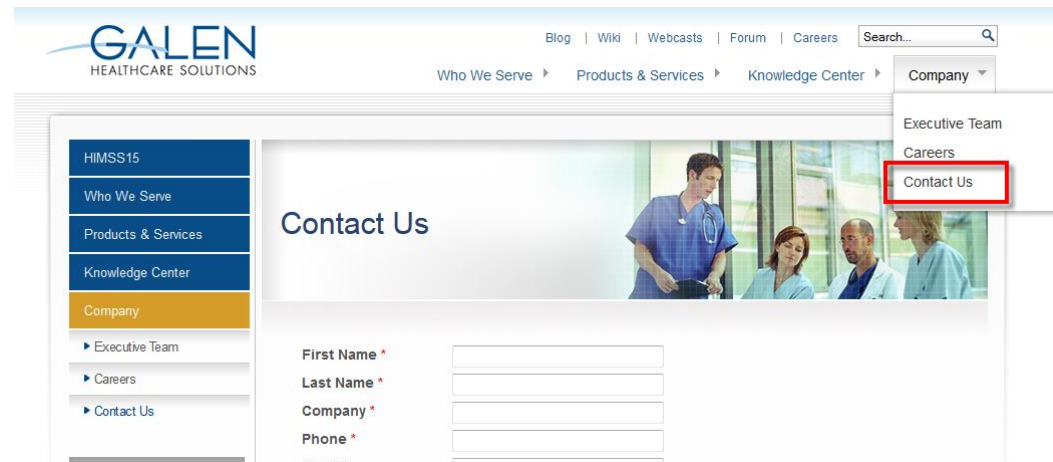
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