



## Documentation of Medi-Cal Encounters

In order to be eligible for the Medi-Cal EHR Incentive program providers must have at least 30% of their patient encounters during a 90-day “representative period” delivered to Medi-Cal patients or (in the case of FQHC or RHC providers) other “Needy Individuals.” The federal government requires DHCS to verify the encounters reported by providers against claims and encounter data held by the state. Because these data bases often cannot provide verification, DHCS now requests that all providers furnish documentation of their Medi-Cal and/or Other Needy Individual encounters.

- In addition to the documentation, providers should upload a cover letter that clearly explains how to interpret the documentation. This should include an explanation of how to identify the Medi-Cal encounters, and how to identify that the encounters were delivered by the provider during the 90-day representative period. Although a summary table of encounters is helpful, in general such a table will not be considered sufficient unless copies of the original source documents are also uploaded.
  
- Acceptable original source documentation should be:
  - A report from a practice management system with sufficient detail to demonstrate how Medi-Cal encounters or Other Needy Individual encounters were derived. This may be in Excel or other formats and should specify the vendor of the practice management system (e.g. Centricity, Practice Pal).
  
  - Or:
  
  - Other types of documentation, such as billing logs, practice registers, etc. Any non-electronic documentation should be clear enough and contain sufficient detail to enable DHCS staff to quickly and accurately validate Medi-Cal and Other Needy Individual encounters.

Providers should submit data and documentation for the entire 90-day representative period, if possible. If the documentation consists of a large number of pages of detail it is acceptable to submit a sample of the pages that clearly illustrates the content and structure of the original data source and how it was interpreted. Please take into consideration that submitting incomplete, sample documentation may subject your

application to higher risk for subsequent audit. Documentation can be divided into up to 10 files of up to 10 MB each in order to be uploaded to the State Level Registry.

Because of HIPAA privacy concerns, DHCS recommends removing or redacting protected health information from any documentation that is submitted to the State Level Registry.