Eligible Hospital, Critical Access Hospital (CAH), and Dual-Eligible Hospital Attestation Worksheet for Modified Stage 2 of the Medicare Electronic Health Record (EHR) Incentive Program in 2017

This worksheet is a resource for eligible hospitals, CAHs, and dual-eligible hospitals to log their meaningful use measures before using CMS' Registration and Attestation system to attest to the Modified Stage 2 program requirements of the Medicare EHR Incentive Program for an EHR reporting period in 2017.

Note: This worksheet differs in format and presentation when compared with the Attestation User Guide and Attestation system.

For each objective with a percentage-based measure, EHR technology certified to the 2014 edition, 2015 edition, if it is available, or a combination of the 2014 and 2015 editions must include the capability to record the numerator and denominator electronically and generate a report including the numerator, denominator, and resulting percentage for these measures. However, eligible hospitals, CAHs, and dual-eligible hospitals may use additional data to calculate numerators and denominators and to generate reports on all measures for the objectives.

Eligible hospitals, CAHs, and dual-eligible hospitals may enter their meaningful use criteria in the blue boxes. Each measure's objective is included to help eligible hospitals, CAHs, and dual-eligible hospitals enter the correct criteria. Certain measures do not require a numerator and denominator, but rather a yes/no answer, and are marked as such. Measures with exclusions have the exclusion description listed in the measure information section.

Note: There are no alternate exclusions or specifications available for Modified Stage 2 in 2017.

Eligible hospitals and CAHs must report on the following:

- 1. **7 objectives**, including one consolidated public health reporting objective requiring eligible hospitals, CAHs, and dual-eligible hospitals to meet at least three public health measures.
- 16 clinical quality measures (CQMs) for attestation. Requirements for CY 2017 eCQM submission (electronic reporting) can be found at: http://www.qualityreportingcenter.com/inpatient/iqr/tools/.

EHR Reporting Period: For 2017, the EHR Reporting period for eligible hospitals and CAHs is any continuous 90-day period within the calendar year.

Meaningful Use Objectives and Measures

Must fill out for each of the 7 objectives including 3 public health measures for eligible hospitals, CAHs and dual-eligible hospitals.

#	Measure Information	Measure Values		
1	Objective: Protect electronic protected health information (ePHI) created or maintained by the CEHRT through the implementation of appropriate technical capabilities. Measure: Security Risk Analysis: Conduct or review a security risk analysis in accordance with the requirements in 45 CFR 164.308(a)(1), including addressing the security (to include encryption) of ePHI created or maintained in CEHRT in accordance with requirements in 45 CFR 164.312(a)(2)(iv) and 45 CFR 164.306(d)(3), and implement security updates as necessary and correct identified security deficiencies as part of the EP's risk management process. Note: This measure only requires a yes/no answer.			
	Denominator: N/A Numerator: N/A	YES NO		
2	Measure: e-Prescribing: More than 10 percent of hospital discharge permissible prescriptions (for new and changed prescriptions) are of formulary and transmitted electronically using CEHRT. Exclusion: Any eligible hospital or CAH that does not have an internal process.	n: Any eligible hospital or CAH that does not have an internal pharmacy that can electronic prescriptions and is not located within 10 miles of any pharmacy that		
	Does the exclusion apply to you?	Yes No		
	Denominator: Number of new or changed permissible prescriptions written for drugs requiring a prescription in order to be dispensed for patients discharged during the EHR Reporting Period.			
	Numerator : The number of prescriptions in the denominator generated, queried for a drug formulary, and transmitted electronically.			
3	or provider of care or refers their patient to another provider of care record for each transition of care or referral. Measure: Health Information Exchange: The eligible hospital or CAP their patient to another setting of care or provider of care must (1)	re: <u>Health Information Exchange</u> : The eligible hospital or CAH that transitions or refers atient to another setting of care or provider of care must (1) use CEHRT to create a ry of care record; and (2) electronically transmit such summary to a receiving		
	Denominator: Number of transitions of care and referrals during the EHR reporting period for which the eligible hospital's or CAH's inpatient or emergency department (POS 21 or 23) was the transferring or referring provider.			

#	Measure Information	Measure Values	
	Numerator: The number of transitions of care and referrals in the denominator where a summary of care record was created using CEHRT and exchanged electronically.		
4	Objective: Use clinically relevant information from CEHRT to identify patient-specific education resources and provide those resources to the patient. Measure: Patient-Specific Education: More than 10 percent of all unique patients admitted to the eligible hospital's or CAH's inpatient or emergency department (POS 21 or 23) during the EHR reporting period are provided patient-specific education resources identified by CEHRT.		
	Denominator: Number of unique patients admitted to the eligible hospital or CAH inpatient or emergency departments (POS 21 or 23) during the EHR reporting period.		
	Numerator: Number of patients in the denominator who are subsequently provided patient-specific education resources identified by CEHRT		
5	Objective: The eligible hospital or CAH that receives a patient from another setting of care or provider of care or believes an encounter is relevant performs medication reconciliation. Measure: Medication Reconciliation: The eligible hospital or CAH performs medication reconciliation for more than 50 percent of transitions of care in which the patient is admitted to the eligible hospital's or CAH's inpatient or emergency department (POS 21 or 23).		
	Denominator: Number of transitions of care during the EHR reporting period for which the eligible hospital's or CAH's inpatient or emergency department (POS 21 or 23) was the receiving party of the transition. Numerator: The number of transitions of care in the denominator		
	where medication reconciliation was performed.		
6	Objective: Provide patients the ability to view online, download, and transmit their health information within 36 hours of hospital discharge. Measure: Provide Patient Access: More than 50 percent of all unique patients who are discharged from the inpatient or emergency department (POS 21 or 23) of an eligible hospital or CAH are provided timely access to view online, download and transmit to a third party their health information. Measure: View, Download or Transmit (VDT): At least 1 patient (or patient-authorized representative) who is discharged from the inpatient or emergency department (POS 21 or 23) of an eligible hospital or CAH during the EHR reporting period views, downloads or transmits to a third party his or her health information during the EHR		
	reporting period. View, Download or Transmit Exclusion: Any eligible hospital or CAH to	that is located in a	
	county that does not have 50 percent or more of its housing units v	with 4Mbps	

#	Measure Information	Measure Values	
	Broadband availability according to the latest information available day of the EHR reporting period.	from the FCC on the first	
	Denominator Provide Patient Access: Number of unique patients discharged from an eligible hospital's or CAH's inpatient or emergency department (POS 21 or 23) during the EHR reporting period.		
	Numerator Provide Patient Access: The number of patients in the denominator who have access to view, download, and transmit their health information within 36 hours after the information is available to the eligible hospital or CAH.		
	Does the exclusion for View, Download or Transmit apply to you? Denominator View, Download or Transmit: Number of unique patients discharged from the inpatient or emergency department (POS 21 or 23) of the eligible hospital or CAH during the EHR reporting period.	Yes No	
	Numerator View, Download or Transmit: The number of patients (or patient-authorized representatives) in the denominator who view, download or transmit to a third party their health information.		
7	Objective: The eligible hospital or CAH is in active engagement with a public health agency to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice. Measure: Immunization Registry Reporting: The eligible hospital or CAH is in active engagement with a public health agency to submit immunization data. Note: This measure only requires a yes/no answer.		
	Immunization Registry Reporting Exclusions: Any eligible hospital or CAH meeting one or more of the following criteria may be excluded from the immunization registry reporting measure if the eligible hospital or CAH— Exclusion 1: Immunization Registry Reporting: Does not administer any immunizations to any of the populations for which data is collected by its jurisdiction's immunization registry or immunization information system during the EHR reporting period; Exclusion 2: Immunization Registry Reporting: Operates in a jurisdiction for which no immunization registry or immunization information system is capable of accepting the specific standards required to meet the CEHRT definition at the start of the EHR reporting period; or Exclusion 3: Immunization Registry Reporting: Operates in a jurisdiction where no immunization registry or immunization information system has declared readiness to receive immunization data from the eligible hospital or CAH at the start of the EHR reporting period. Measure 2: Syndromic Surveillance Reporting: The eligible hospital or CAH is in active engagement with a public health agency to submit syndromic surveillance data. Note: This measure only requires a yes/no answer		

Syndromic Surveillance Reporting Exclusions: Any eligible hospital or CAH meeting one or more of the following criteria may be excluded from the syndromic surveillance reporting measure if the eligible hospital or CAH—

Exclusion 1 Syndromic Surveillance Reporting: Does not have an emergency or urgent care department;

Exclusion 2 Syndromic Surveillance Reporting: Operates in a jurisdiction for which no public health agency is capable of receiving electronic syndromic surveillance data from eligible hospitals or CAHs in the specific standards required to meet the CEHRT definition at the start of the EHR reporting period; or

Exclusion 3 Syndromic Surveillance Reporting: Operates in a jurisdiction where no public health agency has declared readiness to receive syndromic surveillance data from eligible hospitals or CAHs at the start of the EHR reporting period. Any EP who was not the recipient of any transitions of care during the EHR reporting period.

Measure 3: <u>Specialized Registry Reporting:</u> The eligible hospital or CAH is in active engagement to submit data to a specialized registry

Note: This measure only requires a yes/no answer

Specialized Registry Reporting Exclusions: Any eligible hospital or CAH meeting at least one of the following criteria may be excluded from the specialized registry reporting measure if the eligible hospital or CAH—

Exclusion 1 Specialized Registry Reporting: Does not diagnose or treat any disease or condition associated with or collect relevant data that is required by a specialized registry in their jurisdiction during the EHR reporting period;

Exclusion 2 Specialized Registry Reporting: Operates in a jurisdiction for which no specialized registry is capable of accepting electronic registry transactions in the specific standards required to meet the CEHRT definition at the start of the EHR reporting period; or

Exclusion 3 Specialized Registry Reporting: Operates in a jurisdiction where no specialized registry for which the eligible hospital or CAH is eligible has declared readiness to receive electronic registry transactions at the beginning of the EHR reporting period.

Measure 4: Electronic Reportable Laboratory Result Reporting: The eligible hospital or CAH is in active engagement with a public health agency to submit electronic reportable laboratory (ELR) results.

Note: This measure only requires a yes/no answer

Electronic Reportable Laboratory Result Reporting Exclusions: Any eligible hospital or CAH meeting one or more of the following criteria may be excluded from the electronic reportable laboratory result reporting measure if the eligible hospital or CAH— Exclusion 1 Electronic Reportable Laboratory Result Reporting: Does not perform or order laboratory tests that are reportable in their jurisdiction during the EHR reporting period; Exclusion 2 Electronic Reportable Laboratory Result Reporting: Operates in a jurisdiction for which no public health agency is capable of accepting the specific ELR standards required to meet the CEHRT definition at the start of the EHR reporting period; or Exclusion 3 Electronic Reportable Laboratory Result Reporting: Operates in a jurisdiction where no public health agency has declared readiness to receive electronic reportable laboratory results from eligible hospitals or CAHs at the start of the EHR reporting period. Note: This measure only requires a yes/no answer

#	Measure Information	Measure Values
	Does exclusion 1 for Immunization Registry Reporting apply to you?	Yes No
	Does exclusion 2 for Immunization Registry Reporting apply to you?	Yes No
	Does exclusion 3 for Immunization Registry Reporting apply to you?	Yes No
	Denominator Immunization Registry Reporting: N/A	YES NO
	Numerator Immunization Registry Reporting : N/A	YES NO
	Does exclusion 1 for Syndromic Surveillance Reporting apply to you?	Yes No
	Does exclusion 2 for Syndromic Surveillance Reporting apply to you?	Yes No
	Does exclusion 3 for Syndromic Surveillance Reporting apply to you?	Yes No
	Denominator Syndromic Surveillance Reporting: N/A	YES NO
	Numerator Syndromic Surveillance Reporting: N/A	TES NO
	Does exclusion 1 for Specialized Registry Reporting apply to you?	Yes No
	Does exclusion 2 for Specialized Registry Reporting apply to you?	Yes No
	Does exclusion 3 for Specialized Registry Reporting apply to you?	Yes No
	Denominator Specialized Registry Reporting: N/A	YES NO
	Numerator Specialized Registry Reporting: N/A	120 110
	Does exclusion 1 for Electronic Reportable Laboratory Result Reporting apply to you?	Yes No
	Does exclusion 2 for Electronic Reportable Laboratory Result Reporting apply to you?	Yes No
	Does exclusion 3 for Electronic Reportable Laboratory Result Reporting apply to you?	Yes No
	Denominator Electronic Reportable Laboratory Result Reporting:	
	N/A	YES NO
	Numerator Electronic Reportable Laboratory Result Reporting : N/A	