MEDICAID EHR TEAM
ANALYSIS, TRAINING & TECHNICAL ASSISTANCE

CMS
CENTERS FOR MEDICARE & MEDICAID SERVICES

Stage 2 – Modified Stage 2 – Stage 3 Comparison of Eligible Professional Measures and Objectives
A tool that outlines the evolution of meaningful use objectives from stage 2 to stage 3

Due to the number of changes to the meaningful use (MU) objectives and measures since the initial Stage 2 Final Rule was released, a new MU stage comparison tool has been developed to support states and their EHR incentive program stakeholders.

The tool includes 3 tables:

- Table A provides a quick reference guide to the changes in MU requirements between Stage 2, Modified Stage 2 and Stage 3. In the Short Title column of Table A there are links to Tables B and C to make navigation through the tool easier. Also, please note that as the stages of MU have evolved the numbering of the objectives has not remained consistent from one version of MU to the next. The objective numbers are noted in the Modified Stage 2 and Stage 3 Columns.
- Table B provides more information regarding the changes to objectives, measures and exclusions in Stage 2, Modified Stage 2 and Stage 3.
- Table C presents information on the objectives, measures and associated exclusions that have been retired and/or are no longer stand-alone requirements to demonstrate MU.

Below is a timeline that includes key dates and deadlines associated with the MU Stages and associated program years.

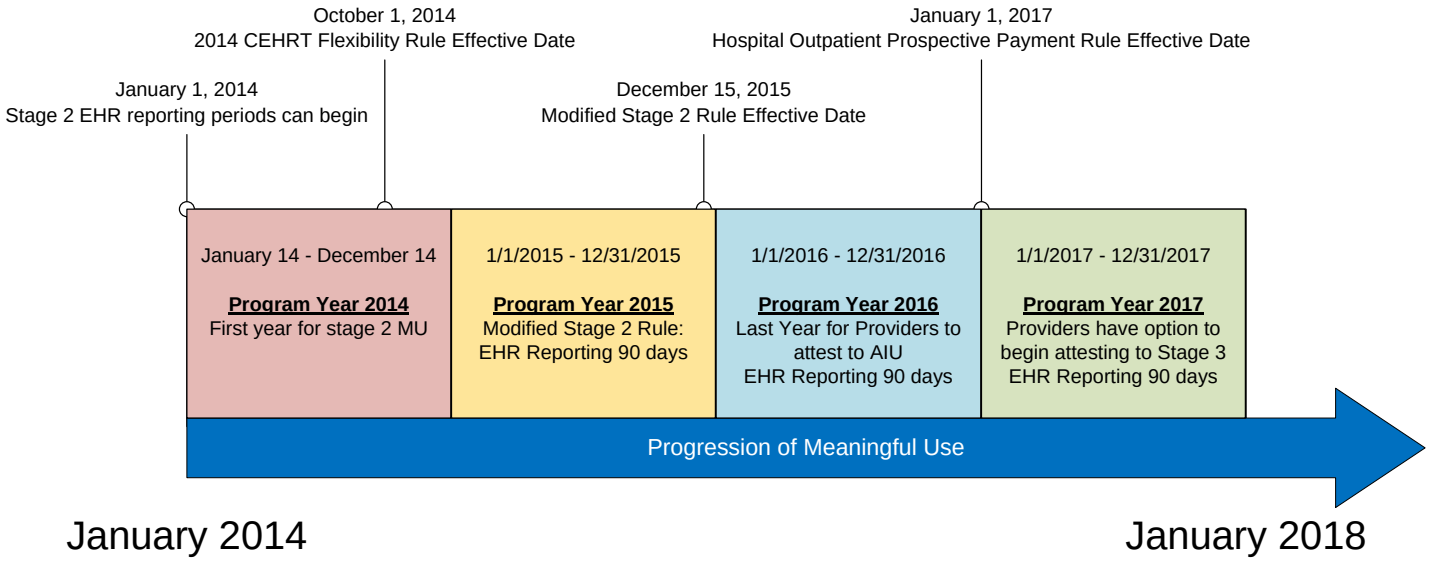

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	Table A Summary of Changes For Eligible Professional (EPs)	
	Modified Stage 2 – 10 objectives for EPs	**Stage 3 – 8 objectives for EPs**
Stage 2 Short Title	**Changes Made to Stage 2 MU (Yes/No and Brief Description)**	**Changes Made to Modified Stage 2 MU (Yes/No and Brief Description)**
Protect Electronic Health Information	**Objective 1: Protect Patient Health Information** No Changes	**Objective 1: Protect Patient Health Information** No Changes
e-Prescribing (eRX)	**Objective 4: Electronic Prescribing** Yes. Changes Made: Alternate Measure (2015)	**Objective 2: Electronic Prescribing** Yes. Changes Made: Increased measure threshold
Clinical Decision Support	**Objective 2: Clinical Decision Support** Yes. Changes Made: Alternate Objective and Measure provided for 2015	**Objective 3: Clinical Decision Support** No Changes
CPOE	**Objective 3: Computerized Provider Order Entry** Yes. Changes Made: Alternate Measure (2015) and Alternate Exclusions (2015-2016)	**Objective 4: Computerized Provider Order Entry** Yes. Changes Made: Increased measure threshold. Minor wording changes
Patient Electronic Access	**Objective 8: Patient Electronic Access** Yes. Changes Made: Objective, Measures and Exclusions. Alternate Exclusion (2015)	**Objective 5: Patient Electronic Access to Health Information** Yes. Changes Made: Objective, Measures and Exclusions. Added in "Patient-Specific Education"
Patient-Specific Education Resources	**Objective 6: Patient-Specific Education** Yes. Changes Made: Alternate Exclusion (2015)	*Incorporated into* **Objective 5 Patient Electronic Access to Health Information**
Use Secure Electronic Messaging	**Objective 9: Secure Electronic Messaging** Yes. Changes Made: Measure and Exclusions. Alternate Exclusion (2015).	*Incorporated into* **Objective 6 Coordination of Care through Patient Engagement**
Summary of Care	**Objective 5: Health Information Exchange** Yes. Changes Made: Measures and Alternate Exclusion (2015)	**Objective 7: Health Information Exchange** Yes. Changes Made: Objective, Measures and Exclusions
Medication Reconciliation	**Objective 7: Medication Reconciliation** Yes. Changes Made: Alternate Exclusion (2015)	*Incorporated into measure 3 of* **Objective 7 Health Information Exchange**
Immunization Registries Data Submission	*No longer separate measures - Now included as measures within Public Health Reporting objectives*	
Syndromic Surveillance Data Submission*	**Objective 10: Public Health Reporting** New Objective in Modified Stage 2.	**Objective 8: Public Health and Clinical Data Registry Reporting** Yes. Changes to Measures and Exclusions. Minor wording changes to Objective.
Report to Cancer Registry*		
Report Specialized Registry*		
Record Demographics	*Retired. Demographics, Vital Signs and Clinical Lab-Test Results are included as part of the Summary of Care objective, and must be made available to patients as part of the Patient Electronic Access (VDT) objective*	
Record Vital Signs		
Clinical Lab-Test Results		
Record Smoking Status	*Retired. Smoking Status must be made available to patients as part of Patient Electronic Access objective*	
Clinical Summaries	*Retired. Removed clinical summaries because it included paper-based actions and there is a viable health IT-based solution*	
Patient Lists	*Retired. Removed these measures because they met criteria as either redundant, duplicative, or topped out*	
Preventive Care		
Electronic Notes*		
Imaging Results*		
Family Health History*		

* Stage 2 MU Menu Set Measures

Information about changes between Stage 2 and Modified Stage 2 (PYs 2015-2017) available by clicking here

October 2016

Table B: Stage 2, Modified Stage 2, Stage 3 Comparison

Language changes are noted in **blue**.

Short Title	Requirement Information	Stage 2	Modified Stage 2	Stage 3
		PY 2014	PY 2015, PY 2016, PY 2017	Option to Start in PY 2017

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Language changes are noted in **blue**.

Short Title	Requirement Information	Stage 2 PY 2014	Modified Stage 2 PY 2015, PY 2016, PY 2017	Stage 3 Option to Start in PY 2017
Protect Electronic Health Information	**Objective**	Protect electronic health information created or maintained by the CEHRT through the implementation of appropriate technical capabilities.	**2015-2017:** Protect electronic health information created or maintained by the CEHRT through the implementation of appropriate technical capabilities.	Protect electronic protected health information (ePHI) created or maintained by the CEHRT through the implementation of appropriate technical, **administrative, and physical safeguards.**
	Measure	Conduct or review a security risk analysis in accordance with the requirements under 45 CFR 164.308(a) (1), including addressing the encryption/security of data stored in CEHRT in accordance with requirements under 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 provider's risk management process for EPs.	**2015-2017:** 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 by CEHRT in accordance with requirements under 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.	Conduct or review a security risk analysis in accordance with the requirements under 45 CFR 164.308(a)(1), including addressing the security (including encryption) of data created or maintained by CEHRT in accordance with requirements under 45 CFR 164.312(a)(2)(iv) and 45 CFR 164.306(d)(3), implement security updates as necessary, and correct identified security deficiencies as part of the provider's risk management process.
	Exclusion(s)	No exclusion	No exclusion	No exclusion
Clinical Decision Support	**Objective**	Use clinical decision support to improve performance on high priority health conditions	**2015-2017:** Use clinical decision support to improve performance on high-priority health conditions. **2015 Alternate Objective: For an EHR reporting period in 2015 only, an EP who is scheduled to participate in Stage 1 in 2015 may satisfy the following in place of Measure 1:** **Implement one clinical decision support rule relevant to specialty or high clinical priority, along with the ability to track compliance with that rule.**	Implement clinical decision support (CDS) interventions focused on improving performance on high-priority health conditions.
	Measure	Measure 1. Implement 5 clinical decision support interventions related to 4 or more clinical quality measures, if applicable, at a relevant point in patient care for the entire EHR reporting period. Absent 4 clinical quality measures related to an EP's scope of practice or patient population, the clinical decision support interventions must be related to high-priority health conditions. Measure 2. The EP has enabled the functionality for drug-drug and drug-allergy interaction checks for the entire EHR reporting period	**2015-2017:** EPs must satisfy both of the following measures in order to meet the objective. Measure 1: Implement 5 clinical decision support interventions related to 4 or more clinical quality measures at a relevant point in patient care for the entire EHR reporting period. Absent 4 clinical quality measures related to an EP's scope of practice or patient population, the clinical decision support interventions must be related to high priority health conditions. Measure 2: The EP has enabled and implemented the functionality for drug-drug and drug allergy interaction checks for the entire EHR reporting period. **2015 Alternate Measure: Implement one clinical decision support rule.**	Measure 1: Implement 5 clinical decision support interventions related to 4 or more CQMs at a relevant point in patient care for the entire EHR reporting period. Absent 4 CQMs related to an EP's scope of practice or patient population, the clinical decision support interventions must be related to high-priority health conditions. Measure 2: The EP has enabled and implemented the functionality for drug-drug and drug-allergy interaction checks for the entire EHR reporting period.
	Exclusion(s)	For the second measure, any EP who writes fewer than 100 medication orders during the EHR reporting period.	**2015-2017:** For the second measure, any EP who writes fewer than 100 medication orders during the EHR reporting period.	For the second measure, any EP who writes fewer than 100 medication orders during the EHR reporting period.
CPOE	**Objective**	Use computerized provider order entry (CPOE) for medication, laboratory and radiology orders directly entered by any licensed healthcare professional who can enter orders into the medical record per state, local and professional guidelines	**2015-2017:** Use computerized provider order entry for medication, laboratory, and radiology orders directly entered by any licensed healthcare professional who can enter orders into the medical record per state, local, and professional guidelines.	Use computerized provider order entry (CPOE) for medication, laboratory, and **diagnostic imaging** orders directly entered by any licensed healthcare professional, **credentialed medical assistant, or a medical staff member credentialed to and performing the equivalent duties of a credentialed medical assistant**, who can enter orders into

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Short Title	Requirement Information	Stage 2 PY 2014	Modified Stage 2 PY 2015, PY 2016, PY 2017	Stage 3 Option to Start in PY 2017
				the medical record per state, local, and professional guidelines.
	Measure	More than 60% of medication, 30% of laboratory, and 30% of radiology orders created by the EP during the EHR reporting period are recorded using CPOE	**2015-2017:** An EP, through a combination of meeting the thresholds and exclusions (or both), must satisfy all three measures for this objective: Measure 1: More than 60% of medication orders created by the EP during the EHR reporting period are recorded using computerized provider order entry. Measure 2: More than 30% of laboratory orders created by the EP during the EHR reporting period are recorded using computerized provider order entry. Measure 3: More than 30% of radiology orders created by the EP during the EHR reporting period are recorded using computerized provider order entry. **2015 Alternate Measure 1: For Stage 1 providers in 2015, more than 30% of all unique patients with at least one medication in their medication list seen by the EP during the EHR reporting period have at least one medication order entered using CPOE; or more than 30% of medication orders created by the EP during the EHR reporting period are recorded using computerized provider order entry.**	Measure 1: More than 60% of medication orders created by the EP during the EHR reporting period are recorded using computerized provider order entry; Measure 2: **More than 60%** of laboratory orders created by the EP during the EHR reporting period are recorded using computerized provider order entry; and Measure 3: **More than 60%** of **diagnostic imaging** orders created by the EP during the EHR reporting period are recorded using computerized provider order entry.
	Exclusion(s)	Any EP who writes fewer than 100 medication, radiology, or laboratory orders during the EHR reporting period.	**2015-2017:** Measure 1: Any EP who writes fewer than 100 medication orders during the EHR reporting period. Measure 2: Any EP who writes fewer than 100 laboratory orders during the EHR reporting period. Measure 3: Any EP who writes fewer than 100 radiology orders during the EHR reporting period. **2015-2016 Alternate Exclusions:** **Measures 2&3: Providers scheduled to be in Stage 1 in 2015 or 2016 may claim an exclusion for measures 2&3 (laboratory and radiology orders) of the Stage 2 CPOE objective for an EHR reporting period in 2015 or 2016**	Measure 1: Any EP who writes fewer than 100 medication orders during the EHR reporting period. Measure 2: Any EP who writes fewer than 100 laboratory orders during the EHR reporting period. Measure 3: Any EP who writes fewer than 100 **diagnostic imaging** orders during the EHR reporting period.

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Short Title	Requirement Information	Stage 2	Modified Stage 2	Stage 3
		PY 2014	PY 2015, PY 2016, PY 2017	Starting PY 2017
e-Prescribing (eRX)	**Objective**	Generate and transmit permissible prescriptions electronically (eRx)	**2015-2017:** Generate and transmit permissible prescriptions electronically (eRx).	EPs must generate and transmit permissible prescriptions electronically.
	Measure	More than 50 percent of all permissible prescriptions, or all prescriptions, written by the EP are queried for a drug formulary and transmitted electronically using CEHRT.	**2015-2017:** More than **50%** of all permissible prescriptions written by the EP are queried for a drug formulary and transmitted electronically using CEHRT. **Alternate Measure 2015: For Stage 1 providers in 2015, more than 40% of all permissible prescriptions written by the EP are transmitted electronically using CEHRT.**	More than **60%** of all permissible prescriptions written by the EP are queried for a drug formulary and transmitted electronically using CEHRT.
	Exclusion(s)	Any EP who: (1) Writes fewer than 100 permissible prescriptions during the EHR reporting period. (2) Does not have a pharmacy within their organization and there are no pharmacies that accept electronic prescriptions within 10 miles of the EP's practice location at the start of his/her EHR reporting period.	**2015-2017:** Any EP who: (1) Writes fewer than 100 permissible prescriptions during the EHR reporting period; or (2) Does not have a pharmacy within his or her organization and there are no pharmacies that accept electronic prescriptions within 10 miles of the EP's practice location at the start of his or her EHR reporting period	Any EP who: (1) writes fewer than 100 permissible prescriptions during the EHR reporting period; or (2) does not have a pharmacy within their organization and there are no pharmacies that accept electronic prescriptions within 10 miles of the EP's practice location at the start of his or her EHR reporting period.

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Short Title	Requirement Information	Stage 2 PY 2014	Modified Stage 2 PY 2015, PY 2016, PY 2017	Stage 3 Starting PY 2017
Summary of Care - Health Information Exchange (Modified Stage 2 and Stage 3)	**Objective**	The EP who transitions their patient to another setting of care or provider of care or refers their patient to another provider of care should provide summary of care record for each transition of care or referral.	**2015-2017:** The EP who transitions their patient to another setting of care or provider of care or refers their patient to another provider of care provides a summary care record for each transition of care or referral.	The EP provides a summary of care record when transitioning or referring their patient to another setting of care, **receives or retrieves a summary of care record upon the receipt of a transition or referral or upon the first patient encounter with a new patient, and incorporates summary of care information from other providers into their EHR using the functions of CEHRT.**
	Measure	EPs must satisfy both of the following measures in order to meet the objective: Measure 1. The EP who transitions or refers their patient to another setting of care or provider of care provides a summary of care record for more than 50% of transitions of care and referrals. Measure 2. The EP who transitions or refers their patient to another setting of care or provider of care provides a summary of care record for more than 10% of such transitions and referrals either (a) electronically transmitted using CEHRT to a recipient or (b) where the recipient receives the summary of care record via exchange facilitated by an organization that is a NwHIN Exchange participant or in a manner that is consistent with the governance mechanism ONC establishes for the NwHIN. Measure 3. An EP must satisfy one of the following criteria: • Exchange a summary of care with a provider or third party who has different CEHRT (and different vendor) as the sending provider as part of the 10% threshold for measure #2, allowing the provider to meet the criteria for measure #3 without the CMS Designated Test EHR (for EPs the measure at §495.6(j)(14)(ii)(C)(1) with a recipient who has EHR technology that was developed designed by a different EHR technology developer than the sender's EHR technology certified to 45 CFR 170.314(b)(2). OR • If unable to exchange summary of care documents with recipients using a different CEHRT in common practice, retain documentation on circumstances and attest "Yes" to meeting measure 3 if using a certified EHR which meets the standards required to send a CCDA (§ 170.202).	**2015-2017:** The EP that transitions or refers their patient to another setting of care or provider of care must **(1) use CEHRT to create a summary of care record; and (2) electronically transmit such summary to a receiving provider for more than 10% of transitions of care and referrals.**	Providers must attest to all three measures and must meet the thresholds for at least two measures to meet the objective. Measure 1: **For more than 50% of transitions of care and referrals**, the EP that transitions or refers their patient to another setting of care or provider of care: (1) Creates a summary of care record using CEHRT; and (2) electronically exchanges the summary of care record. **Measure 2: For more than 40% of transitions or referrals received and patient encounters in which the provider has never before encountered the patient, the EP incorporates into the patient's EHR an electronic summary of care document.** **Measure 3: For more than 80% of transitions or referrals received and patient encounters in which the provider has never before encountered the patient, the EP performs a clinical information reconciliation. The provider must implement clinical information reconciliation for the following three clinical information sets:** **(1) Medication. Review of the patient's medication, including the name, dosage, frequency, and route of each medication.** **(2) Medication allergy. Review of the patient's known medication allergies.** **(3) Current Problem list. Review of the patient's current and active diagnoses.**
	Exclusion(s)	Any EP who transfers a patient to another setting	**2015-2017:** Any EP who transfers a patient to another setting or	Measure 1 Exclusion: A provider may exclude from the

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Short Title	Requirement Information	Stage 2 PY 2014	Modified Stage 2 PY 2015, PY 2016, PY 2017	Stage 3 Starting PY 2017
Summary of Care - Health Information Exchange (Modified Stage 2 and Stage 3)		or refers a patient to another provider less than 100 times during the EHR reporting period is excluded from all three measures.	refers a patient to another provider less than 100 times during the EHR reporting period. **2015 Alternate Exclusion: Provider may claim an exclusion for the Stage 2 measure that requires the electronic transmission of a summary of care document if for an EHR reporting period in 2015, they were scheduled to demonstrate Stage 1, which does not have an equivalent measure.**	measure if any of the following apply: ○ Any EP who transfers a patient to another setting or refers a patient to another provider less than 100 times during the EHR reporting period. **○ Any EP that conducts 50% or more of his or her patient encounters in a county that does not have 50% or more of its housing units with 4Mbps broadband availability according to the latest information available from the FCC on the first day of the EHR reporting period may exclude the measures.** Measure 2 Exclusion: A provider may exclude from the measure if any of the following apply: ○ Any EP for whom the total of transitions or referrals received and patient encounters in which the provider has never before encountered the patient, is fewer than 100 during the EHR reporting period is excluded from this measure. **○ Any EP that conducts 50% or more of his or her patient encounters in a county that does not have 50% or more of its housing units with 4Mbps broadband availability according to the latest information available from the FCC on the first day of the EHR reporting period may exclude the measures.** Measure 3 Exclusion: **Any EP for whom the total of transitions or referrals received and patient encounters in which the provider has never before encountered the patient, is fewer than 100 during the EHR reporting period is excluded from this measure.**

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Short Title	Requirement Information	Stage 2	Modified Stage 2	Stage 3
		PY 2014	PY 2015, PY 2016, PY 2017	Starting PY 2017
Patient-Specific Education Resources	**Objective**	Use clinically relevant information from Certified EHR Technology to identify patient-specific education resources and provide those resources to the patient	**2015-2017:** Use clinically relevant information from CEHRT to identify patient-specific education resources and provide those resources to the patient.	*Incorporated into Measure 2 of the Patient Electronic Access Objective*
	Measure	Patient-specific education resources identified by CEHRT are provided to patients for more than 10% of all unique patients with office visits seen by the EP during the EHR reporting period.	**2015-2017:** Patient-specific education resources identified by CEHRT are provided to patients for more than 10% of all unique patients with office visits seen by the EP during the EHR reporting period.	
	Exclusion(s)	Any EP who has no office visits during the EHR reporting period.	**2015-2017:** Any EP who has no office visits during the EHR reporting period. **2015 Alternate Exclusion: Providers may claim an exclusion for the measure of the Stage 2 Patient Specific Education objective if for an EHR reporting period in 2015 they were scheduled to demonstrate Stage 1 but did not intend to select the Stage 1 Patient Specific Education menu objective.**	
Medication Reconciliation	**Objective**	The EP who receives a patient from another setting of care or provider of care or believes an encounter is relevant should perform medication reconciliation	**2015-2017:** The EP who receives a patient from another setting of care or provider of care or believes an encounter is relevant performs medication reconciliation.	*Incorporated into Measure 3 of the Health Information Exchange Objective.*
	Measure	The EP performs medication reconciliation for more than 50% of transitions of care in which the patient is transitioned into the care of the EP.	**2015-2017:** The EP performs medication reconciliation for more than 50% of transitions of care in which the patient is transitioned into the care of the EP.	
	Exclusion(s)	Any EP who was not the recipient of any transitions of care during the EHR reporting period.	**2015-2017:** Any EP who was not the recipient of any transitions of care during the EHR reporting period. **2015 Alternate Exclusion: Provider may claim an exclusion for the measure of the Stage 2 Medication Reconciliation objective if for an EHR reporting period in 2015 they were scheduled to demonstrate Stage 1 but did not intend to select the Stage 1 Medication Reconciliation menu objective.**	

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Short Title	Requirement Information	Stage 2 PY 2014	Modified Stage 2 PY 2015, PY 2016, PY 2017	Stage 3 Starting PY 2017
Patient Electronic Access	**Objective**	Provide patients the ability to view online, download and transmit their health information within 4 business days of the information being available to the EP	**2015-2017:** Provide patients the ability to view online, download, and transmit their health information within 4 business days of the information being available to the EP.	The EP provides patients (or patient-authorized representative) with **timely** electronic access to their health information **and patient-specific education.**
	Measure	Measure 1. More than 50% of all unique patients seen by the EP during the EHR reporting period are provided timely (available to the patient within 4 business days after the information is available to the EP) online access to their health information, with the ability to view, download, and transmit to a third party. Measure 2. More than 5% of all unique patients seen by the EP during the EHR reporting period (or their authorized representatives) view, download, or transmit to a third party their health information	EPs must satisfy both measures in order to meet this objective: **2015-2017 Measure 1:** More than 50% of all unique patients seen by the EP during the EHR reporting period are provided **timely access** to view online, download, and transmit to a third party their health information **subject to the EP's discretion to withhold certain information.** **2015-2016 Measure 2: For an EHR reporting period in 2015 and 2016, at least one patient seen by the EP during the EHR reporting period (or patient-authorized representative) views, downloads or transmits his or her health information to a third party during the EHR reporting period.** **2017 Measure 2: For an EHR reporting period in 2017, more than 5% of unique patients seen by the EP during the EHR reporting period (or his or her authorized representatives) view, download or transmit to a third party their health information during the EHR reporting period.**	Measure 1: For **more than 80%** of all unique patients seen by the EP: (1) The patient (or the patient-authorized representative) is provided timely access to view online, download, and transmit his or her health information; and **(2) The provider ensures the patient's health information is available for the patient (or patient-authorized representative) to access using any application of their choice that is configured to meet the technical specifications of the API in the provider's CEHRT.** **Measure 2: The EP must use clinically relevant information from CEHRT to identify patient-specific educational resources and provide electronic access to those materials to more than 35% of unique patients seen by the EP during the EHR reporting period.**
	Exclusion(s)	Any EP who: (1) Neither orders nor creates any of the information listed for inclusion as part of both measures, except for "Patient name" and "Provider's name and office contact information," may exclude **both** measures. (2) Conducts 50% or more of his or her patient encounters in a county that does not have 50% or more of its housing units with 3Mbps broadband availability according to the latest information available from the FCC on the first day of the EHR reporting period may exclude **only** the second measure.	**2015-2017 Exclusions:** Any EP who: Neither orders nor creates any of the information listed for inclusion as part of the measures or Conducts 50% or more of his or her patient encounters in a county that does not have 50% or more of its housing units with 4Mbps broadband availability according to the latest information available from the FCC on the first day of the EHR reporting period. **2015 Alternate Exclusion:** **Measure 2: Providers may claim an exclusion for the second measure if for an EHR reporting period in 2015 they were scheduled to demonstrate Stage 1, which does not have an equivalent measure.**	A provider may exclude the measures if one of the following apply: **An EP may exclude from the measure if they have no office visits during the EHR reporting period.** Any EP that conducts 50% or more of his or her patient encounters in a county that does not have 50% or more of its housing units with 4Mbps broadband availability according to the latest information available from the FCC on the first day of the EHR reporting period may exclude the measure.

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Short Title	Requirement Information	Stage 2 PY 2014	Modified Stage 2 PY 2015, PY 2016, PY 2017	Stage 3 Starting PY 2017
Use Secure Electronic Messaging	**Objective**	Use secure electronic messaging to communicate with patients on relevant health information.	**2015-2017:** Use secure electronic messaging to communicate with patients on relevant health information.	*Incorporated into Coordination of Care through Patient Engagement Objective.*
	Measure	A secure message was sent using the electronic messaging function of Certified EHR Technology by more than 5% of unique patients seen during the EHR reporting period.	**2015:** For an EHR reporting period in 2015, **the capability for patients to send and receive a secure electronic message with the EP was fully enabled during the EHR reporting period.** **2016:** For an EHR reporting period in 2016, **for at least 1 patient seen by the EP during the EHR reporting period, a secure message was sent using the electronic messaging function of CEHRT to the patient (or the patient-authorized representative), or in response to a secure message sent by the patient (or the patient-authorized representative) during the EHR reporting period.** **2017**: For an EHR reporting period in 2017, **for more than 5% of unique patients seen by the EP during the EHR reporting period, a secure message was sent using the electronic messaging function of CEHRT to the patient (or the patient-authorized representative), or in response to a secure message sent by the patient (or the patient-authorized representative) during the EHR reporting period.**	
	Exclusion(s)	Any EP who has no office visits during the EHR reporting period, or any EP who conducts 50 percent or more of his or her patient encounters in a county that does not have 50 percent or more of its housing units with 3Mbps broadband availability according to the latest information available from the FCC on the first day of the EHR reporting period.	**2015-2017:** Any EP who has no office visits during the EHR reporting period; or any EP who conducts 50 percent or more of his or her patient encounters in a county that does not have 50 percent or more of its housing units with **4Mbps** broadband availability according to the latest information available from the FCC on the first day of the EHR reporting period. **2015 Alternate Exclusion: An EP may claim an exclusion for the measure if for an EHR reporting period in 2015 they were scheduled to demonstrate Stage 1, which does not have an equivalent measure.**	

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Short Title	Requirement Information	Stage 2 PY 2014	Modified Stage 2 PY 2015, PY 2016, PY 2017	Stage 3 Starting PY 2017
Public Health and Clinical Data Registry Reporting (Clinical Data Registry added in Stage 3)	**Objective**	Immunization: Capability to submit electronic data to immunization registries or Immunization Information Systems and actual submission except where prohibited and in accordance with applicable law and practice. Syndromic: Capability to submit electronic syndromic surveillance data to public health agencies except where prohibited and in accordance with applicable law and practice. Cancer: Capability to identify and report cancer cases to a public health central cancer registry, except where prohibited, and in accordance with applicable law and practice. Specialized: Capability to identify and report specific cases to a specialized registry (other than a cancer registry), except where prohibited, and in accordance with applicable law and practice.	**2015 -2017: All PH related measures incorporated into one measure Public Health Reporting Objective:** The EP 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.	The EP is in active engagement with a public health agency **or clinical data registry** to submit electronic public health data **in a meaningful way** using certified EHR technology, except where prohibited, and in accordance with applicable law and practice.
	Measure	Immunization: Successful ongoing submission of electronic immunization data from Certified EHR Technology to an immunization registry or immunization information system for the entire EHR reporting period. Syndromic: Successful ongoing submission of electronic syndromic surveillance data from Certified EHR Technology to a public health agency for the entire EHR reporting period. Cancer: Successful ongoing submission of cancer case information from CEHRT to a public health central cancer registry for the entire EHR reporting period. Specialized: Successful ongoing submission of specific case information from Certified EHR Technology to a specialized registry for the entire EHR reporting period.	Stage 1 EPs in 2015 must meet at least 1 measure in 2015, Stage 2 EPs must meet at least 2 measures in 2015, and all EPs must meet at least 2 measures in 2016 and 2017. **2015-2017 (Public Health Reporting):** Measure 1 - Immunization Registry Reporting: The EP is in active engagement with a public health agency to submit immunization data. Measure 2 – Syndromic Surveillance Reporting: The EP is in active engagement with a public health agency to submit syndromic surveillance data. Measure 3 – Specialized Registry Reporting: The EP is in active engagement to submit data to a specialized registry.	**EPs would be required to choose from measures 1 through 5, and would be required to successfully attest to any combination of two measures. Providers may attest to measure 4 and measure 5 more than once, and an exclusion to a measure does not count toward the total in the manner proposed.** Measure 1—Immunization Registry Reporting: The EP is in active engagement with a public health agency to submit immunization data **and receive immunization forecasts and histories from the public health immunization registry/ immunization information system (IIS).** Measure 2—Syndromic Surveillance Reporting: The EP is in active engagement with a public health agency to submit syndromic surveillance data **from an urgent care setting.** **Measure 3—Electronic Case Reporting: The EP is in active engagement with a public health agency to submit case reporting of reportable conditions.** **Measure 4—Public Health Registry Reporting: The EP is in active engagement with a public health agency to submit data to public health registries.** **Measure 5—Clinical Data Registry Reporting: The EP is in active engagement to submit data to a clinical data registry.**
	Exclusion(s)	Immunization: (1) the EP does not administer any of the immunizations to any of the populations for which data is collected by their jurisdiction's immunization registry or immunization information system during the EHR reporting period; (2) the EP operates in a jurisdiction for which no immunization registry or immunization information system is capable of	**2015-2017 (Public Health Reporting) Exclusions:** Measure 1 Exclusions: Any EP meeting one or more of the following criteria may be excluded from the immunization registry reporting measure if the EP— • Does not administer any immunizations to any of the populations for which data is collected by its jurisdiction's immunization registry or	Exclusion for Measure 1: Any EP meeting one or more of the following criteria may be excluded from the immunization registry reporting measure if the EP:(1) Does not administer any immunizations to any of the populations for which data is collected by their jurisdiction's immunization registry or immunization information system during the EHR reporting period; (2)

Table B: Stage 2, Modified Stage 2, Stage 3 Comparison

Language changes are noted in **blue**.

Short Title	Requirement Information	Stage 2 PY 2014	Modified Stage 2 PY 2015, PY 2016, PY 2017	Stage 3 Starting PY 2017
Public Health and Clinical Data Registry Reporting (Clinical Data Registry added in Stage 3)		accepting the specific standards required for CEHRT at the start of their EHR reporting period; (3) the EP operates in a jurisdiction where no immunization registry or immunization information system provides information timely on capability to receive immunization data; or (4) the EP operates in a jurisdiction for which no immunization registry or immunization information system that is capable of accepting the specific standards required by CEHRT at the start of their EHR reporting period can enroll additional EPs. Syndromic: (1) the EP is not in a category of providers that collect ambulatory syndromic surveillance information on their patients during the EHR reporting period; (2) the EP operates in a jurisdiction for which no public health agency is capable of receiving electronic syndromic surveillance data in the specific standards required by CEHRT at the start of their EHR reporting period; (3) the EP operates in a jurisdiction where no public health agency provides information timely on capability to receive syndromic surveillance data; or (4) the EP operates in a jurisdiction for which no public health agency that is capable of accepting the specific standards required by CEHRT at the start of their EHR reporting period can enroll additional EPs. Cancer: (1) The EP does not diagnose or directly treat cancer; (2) The EP operates in a jurisdiction for which no public health agency is capable of receiving electronic cancer case information in the specific standards required for CEHRT at the beginning of their EHR reporting period; (3) The EP operates in a jurisdiction where no PHA provides information timely on capability to receive electronic cancer case information; or (4) The EP operates in a jurisdiction for which no public health agency that is capable of receiving electronic cancer case information in the specific standards required for CEHRT at the beginning of their EHR reporting period can enroll additional EPs. Specialized: (1) The EP does not diagnose or directly treat any disease associated with a specialized registry sponsored by a national specialty society for which the EP is eligible, or the public health agencies in their jurisdiction; (2) The EP operates in a jurisdiction for which no specialized registry sponsored by a public health agency or by a national	immunization information system during the EHR reporting period; • 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 • Operates in a jurisdiction where no immunization registry or immunization information system has declared readiness to receive immunization data from the EP at the start of the EHR reporting period. Measure 2 Exclusions: Any EP meeting one or more of the following criteria may be excluded from the syndromic surveillance reporting measure if the EP-- • Is not in a category of providers from which ambulatory syndromic surveillance data is collected by their jurisdiction's syndromic surveillance system; • Operates in a jurisdiction for which no public health agency is capable of receiving electronic syndromic surveillance data from EPs in the specific standards required to meet the CEHRT definition at the start of the EHR reporting period; or • Operates in a jurisdiction where no public health agency has declared readiness to receive syndromic surveillance data from EPs at the start of the EHR reporting period. Measure 3 Exclusions: Any EP meeting at least one of the following criteria may be excluded from the specialized registry reporting measure if the EP -- • Does not diagnose or treat any disease or condition associated with, or collect relevant data that is collected by, a specialized registry in their jurisdiction during the EHR reporting period; • 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 • Operates in a jurisdiction where no specialized registry for which the EP is eligible has declared	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 (3) operates in a jurisdiction where no immunization registry or immunization information system has declared readiness to receive immunization data as of 6 months prior to the start of the EHR reporting period. Exclusion for EPs for Measure 2: Any EP meeting one or more of the following criteria may be excluded from the syndromic surveillance reporting measure if the EP: (1) Is not in a category of providers from which ambulatory syndromic surveillance data is collected by their jurisdiction's syndromic surveillance system; (2) operates in a jurisdiction for which no public health agency is capable of receiving electronic syndromic surveillance data from EPs in the specific standards required to meet the CEHRT definition at the start of the EHR reporting period; or (3) operates in a jurisdiction where no public health agency has declared readiness to receive syndromic surveillance data from EPs as of 6 months prior to the start of the EHR reporting period. **Exclusion for Measure 3: Any EP meeting one or more of the following criteria may be excluded from the case reporting measure if the EP: (1) Does not treat or diagnose any reportable diseases for which data is collected by their jurisdiction's reportable disease system during the EHR reporting period; (2) operates in a jurisdiction for which no public health agency is capable of receiving electronic case reporting data in the specific standards required to meet the CEHRT definition at the start of the EHR reporting period; or (3) operates in a jurisdiction where no public health agency has declared readiness to receive electronic case reporting data as of 6 months prior to the start of the EHR reporting period.** **Exclusions for Measure 4: Any EP meeting at least one of the following criteria may be excluded from the public health registry reporting measure if the EP: (1) Does not diagnose or directly treat any disease or condition associated with a public health registry in their jurisdiction during the EHR reporting period; (2) operates in a jurisdiction for which no public health agency is capable of accepting electronic registry transactions in the specific standards required to meet the CEHRT definition at the start of the EHR reporting**

Table B: Stage 2, Modified Stage 2, Stage 3 Comparison

Language changes are noted in **blue**.

Short Title	Requirement Information	Stage 2 PY 2014	Modified Stage 2 PY 2015, PY 2016, PY 2017	Stage 3 Starting PY 2017
Public Health and Clinical Data Registry Reporting (Clinical Data Registry added in Stage 3)		specialty society for which the EP is eligible is capable of receiving electronic specific case information in the specific standards required by CEHRT at the beginning of their EHR reporting period; (3) The EP operates in a jurisdiction where no public health agency or national specialty society for which the EP is eligible provides information timely on capability to receive information into their specialized registries; or (4) The EP operates in a jurisdiction for which no specialized registry sponsored by a public health agency or by a national specialty society for which the EP is eligible that is capable of receiving electronic specific case information in the specific standards required by CEHRT at the beginning of their EHR reporting period can enroll additional EPs.	readiness to receive electronic registry transactions at the beginning of the EHR reporting period. **2015 (Public Health Reporting) Alternate Exclusions:** EPs scheduled to be in Stage 1: Must attest to at least 1 measure from the Public Health Reporting Objective Measures 1-3. May claim an Alternate Exclusion for Measure 1, Measure 2, or Measure 3. An Alternate Exclusion may only be claimed for up to two measures, then the provider must either attest to or meet the exclusion requirements for the remaining measure described in 495.22 (e)(10)(i). EPs scheduled to be in Stage 2: Must attest to at least 2 measures from the Public Health Reporting Objective Measures 1-3. May claim an alternate exclusion for Measure 2 or Measure 3 (Syndromic Surveillance Measure or Specialized Registry Reporting Measure) or both. **Alternate Exclusions 2016 (Public Health Reporting):** Alternate Exclusion for Measure 2: EPs may claim an alternate exclusion for measure 2 (syndromic surveillance reporting) for an EHR reporting period in 2016. Alternate Exclusion for Measure 3: EPs may claim an alternate exclusion for measure 3 (specialized registry reporting) for an EHR reporting period in 2016.	**period; or (3) operates in a jurisdiction where no public health registry for which the EP is eligible has declared readiness to receive electronic registry transactions as of 6 months prior to the start of the EHR reporting period.** **Proposed Exclusions for Measure 5: Any EP meeting at least one of the following criteria may be excluded from the clinical data registry reporting measure if the EP: (1) Does not diagnose or directly treat any disease or condition associated with a clinical data registry in their jurisdiction during the EHR reporting period; (2) operates in a jurisdiction for which no clinical data 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 (3) operates in a jurisdiction where no clinical data registry for which the EP is eligible has declared readiness to receive electronic registry transactions as of 6 months prior to the start of the EHR reporting period.**

Table B: Stage 2, Modified Stage 2, Stage 3 Comparison

Language changes are noted in **blue**.

Short Title	Requirement Information	Stage 2	Modified Stage 2	Stage 3
		PY 2014	PY 2015, PY 2016, PY 2017	Starting PY 2017
Coordination of Care through Patient Engagement	Objective	N/A – New Stage 3 Objective		Use CEHRT to engage with patients or their authorized representatives about the patient's care.
	Measure	N/A		Providers must attest to all three measures and must meet the thresholds for at least two measures to meet the objective. Measure 1: During the EHR reporting period, more than 10% of all unique patients (or their authorized representatives) seen by the EP actively engage with the electronic health record made accessible by the provider and either: (1) View, download or transmit to a third party their health information; or (2) access their health information through the use of an API that can be used by applications chosen by the patient and configured to the API in the provider's CEHRT; or (3) a combination of (1) and (2). Measure 1 Threshold for 2017: The resulting percentage must be more than 5%. Measure 1 Threshold for 2018 and Subsequent Years: The resulting percentage must be more than 10%. Measure 2: For more than 25% of all unique patients seen by the EP during the EHR reporting period, a secure message was sent using the electronic messaging function of CEHRT to the patient (or the patient-authorized representative), or in response to a secure message sent by the patient or their authorized representative. For an EHR reporting period in 2017, the threshold for this measure is 5% rather than 25%. Measure 2 Threshold in 2017: The resulting percentage must be more than 5% in order for an EP to meet this measure Measure 2 Threshold in 2018 and Subsequent Years: The resulting percentage must be more than 25% in order for an EP to meet this measure. Measure 3: Patient generated health data or data from a nonclinical setting is incorporated into the CEHRT for more than 5% of all unique patients seen by the EP during the EHR reporting period.
	Exclusion(s)	N/A		Exclusions: A provider may exclude the measures if one of the following apply: An EP may exclude from the measure if they have no office visits during the EHR reporting period. Any EP that conducts 50% or more of his or her patient encounters in a county that does not have 50% or more of its housing units with 4Mbps broadband availability according to the latest information available from the FCC on the first day of the EHR reporting period may exclude the measure.

Table C STAGE 2 (PY 2014) RETIRED MEASURES			
Short Title	**Objective**	**Measure**	**Exclusion(s)**
Record Demographics	Record the following demographics: preferred language, gender, race, ethnicity, date of birth.	More than 80% of all unique patients seen by the EP have demographics recorded as structured data.	No exclusion.
Record Vital Signs	Record and chart changes in the following vital signs: height/length and weight (no age limit); blood pressure (ages 3 and over); calculate and display body mass index (BMI); and plot and display growth charts for patients 0-20 years, including BMI	More than 80% of all unique patients seen by the EP have blood pressure (for patients age 3 and over only) and height and weight (for all ages) recorded as structured data.	Any EP who: (1) Sees no patients 3 years or older is excluded from recording blood pressure. (2) Believes that all 3 vital signs of height/length, weight, and blood pressure have no relevance to their scope of practice is excluded from recording them. (3) Believes that height/length and weight are relevant to their scope of practice, but blood pressure is not, is excluded from recording blood pressure. (4) Believes that blood pressure is relevant to their scope of practice, but height/length and weight are not, is excluded from recording height/length and weight.
Record Smoking Status	Record smoking status for patients 13 years old or older.	More than 80% of all unique patients 13 years old or older seen by the EP have smoking status recorded.	Any EP that neither sees nor admits any patients 13 years old or older.
Clinical Summaries	Provide clinical summaries for patients for each office visit.	Clinical summaries provided to patients or patient-authorized representatives within one business day for more than 50 percent of office visits.	Any EP who has no office visits during the EHR reporting period.
Clinical Lab-Test Results	Incorporate clinical lab-test results into Certified EHR Technology as structured data.	More than 55% of all clinical lab tests results ordered by the EP during the EHR reporting period whose results are either in a positive/negative or numerical format are incorporated in Certified EHR Technology as structured data.	Any EP who orders no lab tests where results are either in a positive/ negative affirmation or numeric format during the EHR reporting period.
Patient Lists	Generate lists of patients by specific conditions to use for quality improvement, reduction of disparities, research, or outreach.	Generate at least one report listing patients of the EP with a specific condition.	No exclusion.
Preventive Care	Use clinically relevant information to identify patients who should receive reminders for preventive/follow-up care and send these patients the reminders, per patient preference.	More than 10 percent of all unique patients who have had 2 or more office visits with the EP within the 24 months before the beginning of the EHR reporting period were sent a reminder, per patient preference when available.	Any EP who has had no office visits in the 24 months before the EHR reporting period.
Electronic Notes	Record electronic notes in patient records	Enter at least one electronic progress note created, edited and signed by an EP for more than 30% of unique patients. The text of the electronic note must be text searchable and may contain drawings and other content.	Any EP who has no office visits during the EHR reporting period.
Imaging Results	Imaging results consisting of the image itself and any explanation or other accompanying information are accessible through CEHRT.	More than 10% of all scans and tests whose result is an image ordered by the EP for patients seen during the EHR reporting period are incorporated into or accessible through Certified EHR Technology.	Any EP who orders less than 100 tests whose result is an image during the EHR reporting period; or any EP who has no access to electronic imaging results at the start of the EHR reporting period.
Family Health History	Record patient family health history as structured data	More than 20 percent of all unique patients seen by the EP during the EHR reporting period have a structured data entry for one or more first-degree relatives.	Any EP who has no office visits during the EHR reporting period.