



Meaningful Use Supporting Documentation

Eligible Hospitals and CAHs

Program Year 2017

Modified Stage 2 Objectives

Table of Contents

[Objective 0- ONC Questions](#)

[Objective 1- Protect Patient Health Information](#)

[Objective 2- Clinical Decision Support](#)

[Objective 3- Computerized Provider Order Entry \(CPOE\)](#)

[Objective 4- Electronic Prescribing](#)

[Objective 5- Health Information Exchange](#)

[Objective 6- Patient Specific Education](#)

[Objective 7- Medication Reconciliation](#)

[Objective 8- Patient Electronic Access](#)

[Objective 9- Public Health](#)

[Objective 9 Option 1-Public Health Immunization](#)

[Objective 9 Option 2-Public Health Syndromic Surveillance](#)

[Objective 9 Option 3-Public Health Specialized Registry](#)

[Objective 9 Option 4-Public Health Electronic Reportable Laboratory Result Reporting](#)

[Clinical Quality Measures](#)

[General Instructions](#)

General Instructions

- Documentation should support **all** information entered in the Meaningful Use (MU) section of the MAPIR application.
- Where measures allow, use of sample data from within your "live" system is appropriate.
- For percentage-based measures, your Certified EHR product will electronically record the numerator and denominator and generate a report including the numerator, denominator and percentage.
- Documentation should be de-identified and HIPAA compliant.
- For documentation that includes Protected Health Information (PHI), you may upload the report(s) in PDF format directly to the MAPIR application.

Objective 0 – ONC questions

Required Documentation

The Office of National Coordinator, the federal entity that certifies electronic health systems, has added several questions to the attestation process. This is new for Program Year 2017. Supporting documentation may be requested based on the answers from your attestation(s).

Click [here](#) to review the ONC questions.

CMS Specification Sheets are updated frequently. For the most up to date information use:

[https://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/Stage2MedicaidModified Require](https://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/Stage2MedicaidModifiedRequire)

Once on the main CMS Promoting Interoperability (PI) page, click on the applicable Program Year for Medicaid Requirements

Objective 1: Protect Patient Health Information

Required Documentation

Eligible hospitals must conduct or review a security risk analysis of CEHRT including addressing encryption/security of data and implement updates as necessary at least once each calendar year and attest to conducting the analysis or review. Corrective action plan (if negative findings are identified) should be included, ensuring you're protecting private health information. Report should include evidence to support it was generated for that provider's system (e.g., identified by National Provider Identifier (NPI), CMS Certification Number (CCN), provider name, practice name, etc.).

*Security Risk Assessment Tool can be found [here](#).

Documentation to Support an Exclusion

No exclusion available for this measure.

CMS Specification Sheets are updated frequently. For the most up to date information use:

https://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/Stage2MedicaidModified_Require

Once on the main CMS Promoting Interoperability (PI) page, click on the applicable Program Year for Medicaid Requirements

Objective 2: Clinical Decision Support

Required Documentation

Measure 1: Screenshots of all five clinical decision support rules being implemented and what clinical quality measures (CQMs) they relate to. If choosing clinical decision support rules not related to CQMs, an explanation of the relation to the high-priority health

Measure 2: Dashboard or screenshot showing when the drug-drug and drug-allergy interaction checks occurred.

Documentation to Support an Exclusion for Measure 2

No exclusion available for this objective.

CMS Specification Sheets are updated frequently. For the most up to date information use:

<https://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/Stage2MedicaidModified>

Require

Once on the main CMS Promoting Interoperability (PI) page, click on the applicable Program Year for Medicaid Requirements

Objective 3: Computerized Provider Order Entry (CPOE)

Required Documentation

Dashboard or report generated from the EHR system or from an external data source supporting each of the three numerators and denominators.

Documentation to Support an Exclusion

No exclusion available for this objective.

CMS Specification Sheets are updated frequently. For the most up to date information use:

<https://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/Stage2MedicaidModified>

[Require](#)

Once on the main CMS Promoting Interoperability (PI) page, click on the applicable Program Year for Medicaid Requirements

Objective 4: Electronic Prescribing

Required Documentation

Dashboard or report from the EHR system supporting the numerator and denominator.

Documentation to Support an Exclusion

Documentation showing the provider did not have an internal pharmacy that can accept electronic prescriptions and is not located within 10 miles of any pharmacy that accepts electronic prescriptions at the start of their EHR reporting period.

CMS Specification Sheets are updated frequently. For the most up to date information use:

https://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/Stage2MedicaidModified_Require

Once on the main CMS Promoting Interoperability (PI) page, click on the applicable Program Year for Medicaid Requirements

Objective 5: Health Information Exchange

Required Documentation

Dashboard or report generated from the EHR system supporting the numerator and denominator.

Documentation to Support an Exclusion

No exclusion available for this objective.

CMS Specification Sheets are updated frequently. For the most up to date information use:

https://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/Stage2MedicaidModified_Require

Once on the main CMS Promoting Interoperability (PI) page, click on the applicable Program Year for Medicaid Requirements

Objective 6: Patient Specific Education

Required Documentation

Dashboard or report generated from the EHR system or from an external data source supporting the numerator and denominator.

Documentation to Support an Exclusion

No exclusion available for this objective.

CMS Specification Sheets are updated frequently. For the most up to date information use:

https://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/Stage2MedicaidModified_Require

Once on the main CMS Promoting Interoperability (PI) page, click on the applicable Program Year for Medicaid Requirements

Objective 8: Patient Electronic Access (VDT)

Required Documentation

Measure 1 and 2: Dashboard or report generated from the EHR system or from an external data source supporting the numerator and denominator for each measure.

Documentation to Support an Exclusion

Measure 2 Only: Screenshot showing less than 50% of the housing units in the county having 4 Mbps broadband availability as of the 1st day of the reporting period.

CMS Specification Sheets are updated frequently. For the most up to date information use:

https://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/Stage2MedicaidModified_Require

Once on the main CMS Promoting Interoperability (PI) page, click on the applicable Program Year for Medicaid Requirements

Objective 9: Public Health Reporting

- All eligible hospitals and CAH's must meet three measures. An eligible hospital or CAH may report to more than one specialized registry and may count specialized registry reporting more than once to meet the required number of measures for the objective.

Objective 9 Option 1: Public Health Immunization

Required Documentation for Immunization

Confirmation/acknowledgement from the immunization registry indicating registration of intent, completion of test or ongoing submission during the EHR reporting period, with the eligible hospital/CAH provider indicated.

Documentation to Support an Exclusion

Exclusion 1: Signed letter or email indicating no immunizations were administered during the reporting period.

-OR-

Exclusion 2: Documentation showing no immunization registry or immunization information system can accept specific standards required to meet the CEHRT definition at the start of the reporting period.

-OR-

Exclusion 3: Screenshot of the Immunization Registry's Declaration of Readiness indicating it is unable to receive immunization data.

CMS Specification Sheets are updated frequently. For the most up to date information use:

https://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/Stage2MedicaidModified_Require

Once on the main CMS Promoting Interoperability (PI) page, click on the applicable Program Year for Medicaid Requirements

Objective 9 Option 2: Syndromic Surveillance

Required Documentation for Syndromic Surveillance

Confirmation/acknowledgement from the Syndromic Surveillance registry indicating registration of intent, completion of test or ongoing submission during the reporting period, with the eligible hospital/CAH provider indicated.

Documentation to Support an Exclusion

Exclusion 1: Signed letter or email stating provider does not have an emergency or urgent care department.

-OR-

Exclusion 2: Documentation showing no public health agency could receive electronic syndromic surveillance data from EH or CAHs in the specific standards required to meet the CEHRT definition at the start of the reporting period.

-OR-

Exclusion 3: Screenshot of the Department of Health's Declaration of Readiness indicating it was unable to receive syndromic surveillance data at the start of the reporting period.

CMS Specification Sheets are updated frequently. For the most up to date information use:

https://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/Stage2MedicaidModified_Require

Once on the main CMS Promoting Interoperability (PI) page, click on the applicable Program Year for Medicaid Requirements

Objective 9 Option 3: Specialized Registry

Required Documentation for Specialized Registry

Confirmation/acknowledgement from the Specialized registry indicating registration of intent, completion of test or ongoing submission during the reporting period, with the eligible hospital/CAH provider indicated.

Documentation to Support an Exclusion

Exclusion 1: Signed letter or email indicating that the EH or CAHs does not diagnose or treat patients for which they would need to submit data to the Specialized Registry.

-OR-

Exclusion 2: Documentation showing no specialized registry could accept electronic registry transactions in the specific standards required to meet the CEHRT definition at the start of the reporting period.

-OR-

Exclusion 3: Screenshot of the Department of Health's Declaration of Readiness indicating it was unable to receive electronic registry transactions at the beginning of the EHR reporting period.

CMS Specification Sheets are updated frequently. For the most up to date information use:

https://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/Stage2MedicaidModified_Require

Once on the main CMS Promoting Interoperability (PI) page, click on the applicable Program Year for Medicaid Requirements

Objective 9 Option 4-Electronic Reportable Laboratory Result Reporting

Required Documentation

Confirmation/acknowledgement from the Electronic Reportable Laboratory Results Reporting indicating registration of intent, completion of test, or ongoing submission during the reporting period, with the eligible hospital/CAH provider indicated.

Documentation to Support an Exclusion

Exclusion 1: Signed letter or email indicating that the EH or CAHs does not perform or order laboratory tests that they would need to submit data to the Electronic Reportable Laboratory Registry.

-OR-

Exclusion 2: Documentation showing no specialized registry could accept electronic laboratory result transactions in the specific standards required to meet the CEHRT definition at the start of the reporting period.

-OR-

Exclusion 3: Screenshot of the Department of Health's Declaration of Readiness indicating it was unable to receive electronic laboratory result transactions at the beginning of the EHR reporting period.

CMS Specification Sheets are updated frequently. For the most up to date information use:

https://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/Stage2MedicaidModified_Require

Once on the main CMS Promoting Interoperability (PI) page, click on the applicable Program Year for Medicaid Requirements

Clinical Quality Measures

Required Documentation

Dashboard or report generated from the EHR system or from an external data source supporting the numerator, denominator, exclusions and exceptions for each measure attested to in the application.

CMS Specification Sheets are updated frequently. For the most up to date information use:

https://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/Stage2MedicaidModified_Require

Once on the main CMS Promoting Interoperability (PI) page, click on the applicable Program Year for Medicaid Requirements