



Meaningful Use Supporting Documentation

Eligible Professional
Program Year 2018
Stage 3 Objectives

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pennsylvania

DEPARTMENT OF HUMAN SERVICES

General Instructions

- Documentation should support all information entered into 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.

General Instructions

- Documentation should be de-identified and HIPAA compliant.
- Groups may submit dashboards or reports containing individual data for multiple providers as long as the report is broken out by name or individual NPI numbers.

CMS Specification Sheets are updated frequently. The links in this document represent the documentation available at the time of publication and will be updated as new information becomes available. For the most up to date information use: https://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/Downloads/TableofContents_EP_Medicaid_Stage3_2018.pdf

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. Supporting documentation may be requested based on the answers from your attestation(s).

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

➤ Objective 1- Protect Patient Health Information

Required Documentation

A completed copy of the annually conducted or reviewed security risk analysis and corrective action plan (if negative findings are identified) that ensures that you are protecting private health information. Report should be dated within the calendar year of your Meaningful Use reporting period and should include evidence to support that 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.) A single report submitted for a physician group of applying providers can be used. A list of EP's names and NPI numbers for which this analysis applies should accompany the report.

*Security Risk Assessment Tool can be found at:

<http://www.healthit.gov/providers-professionals/security-risk-assessment>.

Documentation to Support an Exclusion

No exclusion available for this measure.

➤ Objective 2 – Electronic Prescribing (eRx)

Required Documentation

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

Documentation to an Support Exclusion

Dashboard or report from the EHR or from an external data source demonstrating fewer than 100 prescriptions were written during the EHR reporting period.

-OR-

Documentation showing the provider did not have a pharmacy within the organization and there were no pharmacies accepting electronic prescriptions within 10 miles of the EP's practice location at the start of the EHR reporting period.

Objective 3 – 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 conditions may be requested post pay. A list of EP's names and NPI numbers for which this analysis applies should accompany the report.

Measure 2: Dashboard or screenshot showing when the drug-drug and drug-allergy interaction checks occurred. A single report submitted for a physician group of applying providers can be used. A list of EP's names and NPI numbers for which this analysis applies should accompany the report.

Documentation to Support an Exclusion

Dashboard or report from the EHR system or from an external data source demonstrating fewer than 100 medication orders were written during the EHR reporting period.

▶ Objective 4 – 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

For each measure of the objective being excluded, a dashboard or report from the EHR or from an external data source demonstrating fewer than 100 orders were written during the EHR reporting period.

Objective 5 – Patient Electronic Access

Required Documentation

Measure 1 and Measure 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

An explanation supporting there were no office visits during the EHR reporting period.

-OR-

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. Check this site to see if you qualify: <http://www.broadbandmap.gov/>

Objective 6 – Coordination of Care

Required Documentation

Measure 1, Measure 2 and Measure 3: 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

An explanation supporting there were no office visits during the EHR reporting period.

-OR-

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. Check this site to see if you qualify: <http://www.broadbandmap.gov/>

Objective 7 – Health Information Exchange

Required Documentation

Measure 1, Measure 2 and Measure 3: Dashboard or report generated from the EHR system supporting the numerator and denominator for each measure.

Documentation to Support an Exclusion

Measure 1 and Measure 2:

Dashboard or report generated from the EHR system supporting a denominator of less than 100.

-OR-

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. Check this site to see if you qualify: <http://www.broadbandmap.gov/>

Measure 3: Dashboard or report generated from the EHR system supporting a denominator of less than 100.

Objective 8- Public Health

Stage 3

- Must pass at least 2 of the 4 Public Health Measures
- May meet the requirements for the Public Health Measures by attesting to two public health or clinical data registries
- If you cannot successfully attest to two (2) Measures, then you must complete the remaining Measures with a combination of either successfully attesting to the measure or qualifying for the Exclusion in order to pass the Public Health Objective

(In MAPIR you will see the term 'Public Health Options' instead of 'Public Health Measures')

CMS Specification Sheet: https://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/Downloads/MedicaidEPStage3_2018_Obj8.pdf

Objective 8a- Public Health- Immunization

Required Documentation

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

Documentation to Support an Exclusion

Exclusion 1: Does not administer any immunizations to any of the populations for which data is collected by their jurisdiction's immunization registry or IIS during the Promoting Interoperability (PI) reporting period;

-OR-

Exclusion 2: Operates in a jurisdiction for which no immunization registry or IIS is capable of accepting the specific standards required to meet the CEHRT definition at the start of the PI reporting period; or

-OR-

Exclusion 3: Operates in a jurisdiction where no immunization registry or IIS has declared readiness to receive immunization data as of 6 months prior to the start of the PI reporting period.

Objective 8b- Public Health- Syndromic Surveillance

Required Documentation

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

Documentation to Support an Exclusion

Exclusion 1: Is not in a category of providers from which ambulatory syndromic surveillance data is collected by their jurisdiction's syndromic surveillance system

-OR-

Exclusion 2: Operates in a jurisdiction for which no PHA 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 PI reporting period

-OR-

Exclusion 3: Operates in a jurisdiction where no PHA has declared readiness to receive syndromic surveillance data from EPs as of 6 months prior to the start of the PI reporting period

Objective 8c- Public Health- Electronic Case Reporting

Required Documentation

Confirmation/acknowledgement from the Electronic Case Reporting registry indicating registration of intent, completion of test or ongoing submission during the EHR reporting period, with provider group indicated.

Documentation to Support an Exclusion

Exclusion 1: Does not treat or diagnose any reportable diseases for which data is collected by their jurisdiction's reportable disease system during the PI reporting period;

-OR-

Exclusion 2: Operates in a jurisdiction for which no PHA is capable of receiving electronic case reporting data in the specific standards required to meet the CEHRT definition at the start of the PI reporting period;

-OR-

Exclusion 3: Operates in a jurisdiction where no PHA has declared readiness to receive electronic case reporting data as of six months prior to the start of the PI reporting period.

➤ Objective 8d- Public Health Registry

Required Documentation

Confirmation/acknowledgement from the Public Health Registry indicating registration of intent, completion of test or ongoing submission during the EHR reporting period, with provider group indicated.

Documentation to Support an Exclusion

Exclusion 1: Does not diagnose or directly treat any disease or condition associated with a public health registry in their jurisdiction during the PI reporting period

-OR-

Exclusion 2: Operates in a jurisdiction for which no PHA is capable of accepting electronic registry transactions in the specific standards required to meet the CEHRT definition at the start of the PI reporting period

-OR-

Exclusion 3: Operates in a jurisdiction where no PHA for which the eligible hospital or critical access hospital (CAH) is eligible has declared readiness to receive electronic registry transactions as of six months prior to the start of the PI reporting period.

CMS Specification Sheet: https://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/Downloads/MedicaidEPStage3_2018_Obj8.pdf

▶ Objective 8e- Public Health- Clinical Data Registry

Required Documentation

Confirmation/acknowledgement from the clinical data registry indicating registration of intent, completion of test or ongoing submission during the reporting period, with provider group indicated.

Documentation to Support an Exclusion

Exclusion 1: Does not diagnose or directly treat any disease or condition associated with a CDR in their jurisdiction during the PI reporting period

-OR-

Exclusion 2: Operates in a jurisdiction for which no CDR is capable of accepting electronic registry transactions in the specific standards required to meet the CEHRT definition at the start of the PI reporting period

-OR-

Exclusion 3: Operates in a jurisdiction where no CDR for which the eligible hospital or CAH is eligible has declared readiness to receive electronic registry transactions as of six months prior to the start of the PI reporting period.

CMS Specification Sheet: https://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/Downloads/MedicaidEPStage3_2018_Obj8.pdf

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 Sheet:

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