## 2017 Modified Stage 2 Meaningful Use Objectives Overview Massachusetts Medicaid EHR Incentive Program

September 19 & 20, 2017

Today's presenters:
Brendan Gallagher
Thomas Bennett



## Agenda

- New for Program Year 2017
- Meaningful Use (MU) Objectives Overview:
  - 1. Protect Patient Health Information (Security Risk Analysis)
  - 2. Clinical Decision Support (CDS)
  - 3. Computerized Provider Order Entry (CPOE)
  - 4. Electronic Prescribing (eRx)
  - 5. Health Information Exchange (HIE) previously known as "Summary of Care"
  - 6. Patient-Specific Education
  - 7. Medication Reconciliation
  - 8. Patient Electronic Access (Patient Portal)
  - 9. Secure Electronic Messaging
  - 10. Public Health Reporting



## New for Program Year (PY) 2017

#### **Timeline**

- EHR reporting period of any continuous 90-day period within CY 2017
- Last possible reporting period: October 3, 2017 December 31, 2017
- Deadline to attest for PY 2017: March 31, 2018

## Requirements

- All Modified Stage 2 participants, as well as Stage 3 participants, will use any continuous
   90-day period within calendar year 2017 for their EHR reporting period
- Measures must be achieved within the calendar year
  - Can no longer include actions taken after CY but before date of attestation
- Certain measure threshold percentages have increased
- Alternate Exclusions are NOT available for PY 2017
- Number of CQMs required decreased from 9 to 6; reporting CQMs across 3 domains no longer required



## Objective 1: Protect Patient Health Information (PHI)

Protect electronic health information (PHI) created or maintained by CEHRT through implementation of appropriate technical capabilities



#### Measure

Conduct or review security risk analysis (SRA), including:

- Address security to include encryption of ePHI
- Implement security updates & correct identified security deficiencies as part of EP's risk management process (Mitigation plan)

#### No Exclusions

\* \* New for PY 2017 \* \*

SRA must be conducted or reviewed within the calendar year of the EHR reporting period (Jan 1 – Dec 31, 2017)



## Objective 2: Clinical Decision Support (CDS)

Use clinical decision support (CDS) to improve performance on high-priority health conditions



#### Measure 1

Implement 5 CDS interventions related to 4 or more CQMs for entire EHR reporting period

#### Measure 2

Enable and implement drug-drug & drug-allergy interaction checks for entire EHR reporting period

#### **Exclusion for Measure 2**

Any EP who writes fewer than 100 medication orders during EHR reporting period



## Objective 3: Computerized Provider Order Entry (CPOE)

Use CPOE for medication, laboratory and radiology orders entered by licensed healthcare professional who can enter orders into medical record per state, local, and professional guidelines



Measure 1 More than 60% of medication orders created

during EHR reporting period recorded using CPOE

Measure 2 More than 30% of laboratory orders during...

Measure 3 More than 30% of radiology orders during...

Exclusions – Any EP who during EHR reporting period:

Measure 1: writes fewer than 100 med orders

Measure 2: writes fewer than 100 lab orders

Measure 3: writes fewer than 100 radiology orders



## Objective 4: Electronic Prescribing (eRx)

## Generate and transmit permissible prescriptions electronically (eRx)



#### Measure

More than 50% of permissible prescriptions written by the EP are queried for a drug formulary and transmitted electronically using CEHRT.

#### **Exclusions**

- EP writes fewer than 100 prescriptions during EHR reporting period
- No pharmacy within organization and no pharmacies accepting eRx within 10 miles of EP's practice at start of reporting period



## Objective 5: Health Information Exchange (HIE)

EP who transitions or refers their patient to another setting of care or another provider of care provides a summary care record for each transition of care or referral



#### Measure

- use CEHRT to create a summary of care record; and
- electronically transmit each summary to a receiving provider for more than 10% of transitions of care and referrals

#### **Exclusion**

Any EP who transfers patient to another setting or refers patient to another provider less than 100 times during EHR reporting period

\* \* New for PY 2017 \* \*

Exchange must occur within the calendar year



## Objective 6: Patient Specific Education

Use clinically relevant information from CEHRT to identify patient-specific education resources and provide those resources to the patient



#### Measure

Patient specific education identified by CEHRT is provided to more than 10% of all unique patients with office visits seen in EHR reporting period

\*Use EHR-identified education resources

#### **Exclusion**

Any EP who has no office visits during EHR reporting period



## Objective 7: Medication Reconciliation

EP who receives a patient from another setting of care or provider of care or believes an encounter is relevant performs a medication reconciliation



#### Measure

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

Any EP who is not a recipient of any transitions of care during the EHR reporting period



## Objective 8: Patient Electronic Access

Provide patients the ability to view online, download and transmit their health information within 4 business days of info being available to EP



#### Measure 1

More than 50% of all unique patients seen during EHR reporting period are provided timely access to view online, download, and transmit their health information

#### Measure 2

5% of unique patients seen by EP during EHR reporting period view, download, or transmit their health information to third party during the EHR reporting period

## \* \* New for PY 2017 \* \*

Measure 2 requirement increased from 1 patient to at least 5% of unique patients



## Objective 8: Patient Electronic Access

#### **Exclusion Measure 1**

 Any EP who neither orders nor creates any of the information listed for inclusion as part of the measure, except "Patient Name" or "Provider's Name and Office Contact Information"



#### **Exclusion Measure 2**

- Any EP who neither orders nor creates any of the information listed for inclusion as part of the measure, except "Patient Name" or "Provider's Name and Office Contact Information"
- More than half of the EP's encounters are in an a county that does not have 50% or more of its housing units with 4Mbps broadband



## Objective 9: Secure Electronic Messaging

# Use secure electronic messaging to communicate with patients on relevant health Information



#### Measure

A secure message was sent to more than 5% of unique patients seen during EHR reporting period using the electronic messaging function of CEHRT to the patient, or in response to a secured message sent by a patient during the EHR reporting period

#### **Exclusion**

Any EP who has no office visits during EHR reporting period, or more than half of EP's encounters are in an a county that does not have 50% or more of its housing units with 4Mbps broadband

#### \* \* New for PY 2017 \* \*

Threshold increases from 1 patient to at least 5% of unique patients. All actions must occur within program year.



## Objective 10: Public Health Reporting

EP is in active engagement with public health agency to submit electronic public health data from CEHRT



#### Measure 1

Immunization Registry: EP is in active engagement with a public health agency to submit immunization data

#### Measure 2

Syndromic Surveillance: Required for EPs who practice in a freestanding Urgent Care facility

#### Measure 3

Specialized Registry: EP is in active engagement to submit data to a specialized registry



## Objective 10: Public Health Reporting

## Exclusion Measure 1 – Immunization Registry

- EP does not administer any immunizations to any of the populations for which data is collected in the area
  - Massachusetts has MIIS registry, so the other two exclusions are not applicable



## Exclusions Measure 2 – Syndromic Surveillance

 Required for EPs who practice in a freestanding Urgent Care facility. Other EPs may take an exclusion

## Exclusions Measure 3 – Specialized Registry

- Any EP who does not diagnose or treat diseases or conditions associated with data required by specialized registry in the area
  - Massachusetts has a cancer registry, so the other two exclusions are not applicable



## Disclaimer

This presentation was current at the time it was presented, published or uploaded onto the web. This presentation was prepared as a service to the public and is not intended to grant rights or impose obligations. This presentation may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage attendees to review the specific statutes, regulations, and other interpretive materials for a full and accurate statement of their contents.



