## Eligible Hospital and Critical Access Hospital (CAH) Attestation Worksheet for Modified Stage 2 of the Medicare Electronic Health Record (EHR) Incentive Program in 2016

The Eligible Hospital and CAH Attestation Worksheet is for eligible hospitals and CAHs in Modified Stage 2 of the Medicare EHR Incentive Program, and allows them to log their meaningful use measures on this page to use as a reference when attesting for the Medicare EHR Incentive Program in CMS' Registration and Attestation system.

For each objective with a percentage-based measure, EHR technology certified to the 2014 edition (or 2015 edition, if available) must include the capability to electronically record the numerator and denominator and generate a report including the numerator, denominator, and resulting percentage for these measures. However, eligible hospitals and CAHs may use additional data to calculate numerators and denominators and to generate reports on all measures for the Modified Stage 2 objectives.

*Note*: Many of the alternate exclusions that were available in 2015 are not available in 2016. In order to provide complete and accurate information for certain measures, providers scheduled to be in an earlier stage of the programs or who did not intend to include a measure in their activities of meaningful use may claim an alternate exclusion.

Eligible hospitals and CAHs can enter their meaningful use criteria in the blue boxes. Each measure's objective is included to help eligible hospitals and CAHs 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.

Eligible hospitals and CAHs must report on the following:

- 1. **9 objectives**, which includes one consolidated public health reporting objective with measure options requiring eligible hospitals and CAHs scheduled to be in Stage 1 and Stage 2 to meet three public health measures.
- 2. **16 out of 29** of the clinical quality measures (CQMs)

EHR Reporting Period: For 2016, in Modified Stage 2, the EHR reporting period is a 90 day reporting period within the calendar year.

## **Meaningful Use Objectives and Measures**

Must fill out for each of the 9 objectives including 3 public health measures for eligible hospitals and CAHs previously scheduled to be in Stage 1 or Stage 2 in 2016.

#	Measure Information	Measure Values
1	Objective: Protect electronic protected health information created or maintained by the CEHRT through the implementation of appropriate technical capabilities.  Measure: 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 eligible hospital or CAH's risk management process.  Note: This measure only requires a yes/no answer.	
	Numerator: N/A	VEC N
	Denominator: N/A	YES No
2	Objective: Use clinical decision support to improve performance on high priority health conditions.  Note: Eligible hospitals and CAHs must satisfy both measures in order to meet the objective.  Measure 1: Implement five clinical decision support interventions related to four or more clinical quality measures at a relevant point in patient care for the entire EHR reporting period. Absent four clinical quality measures related to an eligible hospital or CAH's scope of practice or patient population, the clinical decision support interventions must be related to high-priority health conditions.  Note: This measure only requires a yes/no answer.  Measure 2: The eligible hospital or CAH has enabled and implemented the functionality for drug-drug and drug-allergy interaction checks for the entire EHR reporting period.  Note: This measure only requires a yes/no answer.	
	Numerator Measure 1 (or Alternate Measure 1): N/A  Denominator Measure 1: N/A	YES NO
	Numerator Measure 2: N/A	NEC NO
	Denominator Measure 2: N/A	YES NO
3	Objective: Use computerized provider order entry (CPOE) for medic radiology orders directly entered by any licensed healthcare profess orders into the medical record per state, local and professional guid Note: Eligible hospitals and CAHs must satisfy all three measures in cobjective.	sional who can enter delines.

#	Measure Information	Measure Values
	Measure 1: More than 60 percent of medication orders created by the eligible hospital's or CAH's inpatient or emergency department EHR reporting period are recorded using computerized provider or Measure 2: More than 30 percent of laboratory orders created by a the eligible hospital's or CAH's inpatient or emergency department EHR reporting period are recorded using computerized provider or Alternate Exclusion Measure 2: Eligible hospitals and CAHs schedule may claim an exclusion for measure 2 (laboratory orders) of the State an EHR reporting period in 2016.  Measure 3: More than 30 percent of radiology orders created by acceptible hospital's or CAH's inpatient or emergency department (PO EHR reporting period are recorded using computerized provider or Alternate Exclusion Measure 3: Eligible hospitals and CAHs schedule may claim an exclusion for measure 3 (radiology orders) of the Stage EHR reporting period in 2016.	(POS 21 or 23) during the der entry. authorized providers of (POS 21 or 23) during the der entry. ed to be in Stage 1 in 2016 age 2 CPOE objective for authorized providers of the S 21 or 23) during the der entry. ed to be in Stage 1 in 2016
	Does the alternative exclusion for Measure 2 apply to you?	Yes No
	Does the alternative exclusion for Measure 3 apply to you?	Yes No
	<b>Numerator 1 (Medication):</b> Number of orders in the denominator recorded using CPOE.	
	<b>Denominator 1 (Medication):</b> Number of medication orders created by authorized providers in the eligible hospital's or CAH's inpatient or emergency department (POS 21 or 23) during the EHR reporting period.	
	Numerator 2 (Laboratory): Number of orders in the denominator recorded using CPOE.	
	<b>Denominator 2 (Laboratory):</b> Number of laboratory orders created by authorized providers in the eligible hospital's or CAH's inpatient or emergency department (POS 21 or 23) during the EHR reporting period.	
	Numerator 3 (Radiology): Number of orders in the denominator recorded using CPOE.	
	Denominator 3 (Radiology): Number of radiology orders created by authorized providers in the eligible hospital's or CAH's inpatient or emergency department (POS 21 or 23) during the EHR reporting period.	
4	Objective: Generate and transmit permissible discharge prescription Measure: More than 10 percent of hospital discharge medication of prescriptions (for new and changed prescriptions) are queried for a transmitted electronically using CEHRT.  Exclusion: Any eligible hospital or CAH that does not have an internacept electronic prescriptions and is not located within 10 miles of accepts electronic prescriptions at the start of their EHR reporting in the start of the star	rders for permissible drug formulary and al pharmacy that can fany pharmacy that

#	Measure Information	Measure Values
	Alternate Exclusion: The eligible hospital or CAH may claim an exclusion for the eRx objective and measure for an EHR reporting period in 2016 if they were either scheduled to demonstrate Stage 1 in 2016, or if they are scheduled to demonstrate Stage 2 but did not intend to select the Stage 2 eRx objective for an EHR reporting period in 2016.	
	Does the exclusion apply to you?	Yes No No
	Does the alternative exclusion apply to you?	Yes No No
	<b>Numerator:</b> The number of prescriptions in the denominator generated, queried for a drug formulary and transmitted electronically.	
	<b>Denominator:</b> 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.	
5	Objective: The eligible hospital or CAH 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.  Measure: The eligible hospital or CAH 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 percent of transitions of care and referrals.	
	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.  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.	
6	Objective: Use clinically relevant information from CEHRT to identife education resources and provide those resources to the patient.  Measure: More than 10 percent of all unique patients admitted to CAH's inpatient or emergency department (POS 21 or 23) are provideducation resources identified by CEHRT.	the eligible hospital's or
	Numerator: Number of patients in the denominator who are subsequently 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.	
7	<b>Objective:</b> The eligible hospital or CAH who receives a patient from provider of care or believes an encounter is relevant performs med	_

#	Measure Information	Measure Values	
	<b>Measure:</b> 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).		
	<b>Numerator:</b> The number of transitions of care in the denominator where medication reconciliation was performed.		
	<b>Denominator:</b> 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.		
8	Objective: Provide patients the ability to view online, download, and transmit their health information within 36 hours of hospital discharge.  Measure 1: 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 2: At least one patient seen by the EP during the EHR reporting period (or patier authorized representative) views, downloads, or transmits his or her health information third party during the EHR reporting period.  Exclusion: Any eligible hospital or CAH that is located 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.		
	Does the exclusion apply to you?	Yes No	
	Does the alternate exclusion for Measure 2 apply to you?	Yes No	
	<b>Numerator 1:</b> 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.		
	<b>Denominator 1:</b> 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.		
	<b>Numerator 2:</b> The number of patients (or patient-authorized representative) in the denominator who view, download, or transmit to a third party their health information.		
	<b>Denominator 2:</b> 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.		
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9	Objective: The eligible hospital or CAH is in active engagement with submit electronic public health data from CEHRT except where pro with applicable law and practice.  Measure 1: Immunization Registry Reporting: The eligible hospital contains a public health agency to submit immunization data.	hibited and in accordance or CAH is in active	

#	Measure Information	Measure Values
	Measure 1 Exclusions: Any eligible hospital or CAH meeting one of criteria may be excluded from the syndromic surveillance report	
	hospital or CAH— <b>Exclusion 1 (for Measure 1):</b> Does not administer any immunizati populations for which data is collected by its jurisdiction's immu	
	immunization information system during the EHR reporting peri- <b>Exclusion 2 (for Measure 1):</b> Operates in a jurisdiction for which immunization information system is capable of accepting the specific	no immunization registry or
	meet the CEHRT definition at the start of the EHR reporting peri <b>Exclusion 3 (for Measure 1):</b> Operates in a jurisdiction where no	od, or
	immunization information system has declared readiness to rece the eligible hospital or CAH at the start of the EHR reporting per	eive immunization data from
	Note: This measure only requires a yes/no answer.  Measure 2: Syndromic Surveillance Reporting: The eligible hospi engagement with a public health agency to submit syndromic su	
	Measure 2 Exclusions: Any eligible hospital or CAH meeting one of criteria may be excluded from the syndromic surveillance report hospital or CAH—	or more of the following
	Exclusion 1 (for Measure 2): Does not have an emergency or urge Exclusion 2 (for Measure 2): Operates in a jurisdiction for which is capable of receiving electronic syndromic surveillance data from	no public health agency is
	CAHs in the specific standards required to meet the CEHRT defir reporting period, or	nition at the start of the EHR
	<b>Exclusion 3 (for Measure 2):</b> Operates in a jurisdiction where no declared readiness to receive syndromic surveillance data from the start of the EHR reporting period.	
	Note: This measure only requires a yes/no answer.  Measure 3: Specialized Registry Reporting: The eligible hospital of engagement to submit data to a specialized registry.	or CAH is in active
	Measure 3 Exclusions: Any eligible hospital or CAH meeting at least criteria may be excluded from the specialized registry reporting hospital, or CAH—	_
	<b>Exclusion 1 (for Measure 3):</b> Does not diagnose or treat any disease with, or collect relevant data that is required by a specialized reg	
	during the EHR reporting period, <b>Exclusion 2 (for Measure 3):</b> Operates in a jurisdiction for which is capable of accepting electronic registry transactions in the speci	fic standards required to
	meet the CEHRT definition at the start of the EHR reporting peri- <b>Exclusion 3 (for Measure 3):</b> Operates in a jurisdiction where no state eligible hospital or CAH is eligible has declared readiness to read the start of the eligible hospital or CAH is eligible has declared readiness to read the start of the EHR reporting periods.	specialized registry for which
	transactions at the beginning of the EHR reporting period. <b>Alternate Exclusion For Measure 3:</b> Eligible hospitals/CAHs may c exclusion for measure 3 (specialized registry reporting) for an EH	
	2016.  Note: This measure only requires a yes/no answer.	1 O

#	Measure Information	Measure Values
	Measure 4: Electronic Reportable Laboratory Result Reporting: The in active engagement with a public health agency to submit electro (ELR) results.  Measure 4 Exclusions: Any eligible hospital or CAH meeting at least criteria may be excluded from the specialized registry reporting methospital, or CAH—  Exclusion 1 (for Measure 4): Does not perform or order laboratory to their jurisdiction during the EHR reporting period,  Exclusion 2 (for Measure 4): Operates in a jurisdiction for which no capable of accepting the specific ELR standards required to meet the start of the EHR reporting period, or  Exclusion 3 (for Measure 4): Operates in a jurisdiction where no public declared readiness to receive electronic reportable laboratory results or CAHs at the start of the EHR reporting period.  Note: This measure only requires a yes/no answer.	onic reportable laboratory one of the following easure if the eligible tests that are reportable in public health agency is ne CEHRT definition at
	Does exclusion 1 for Measure 1 apply to you?	Yes No
	Does exclusion 2 for Measure 1 apply to you?	Yes No
	Does exclusion 3 for Measure 1 apply to you?	Yes No
	Does exclusion 1 for Measure 2 apply to you?	Yes No
	Does exclusion 2 for Measure 2 apply to you?	Yes No
	Does exclusion 3 for Measure 2 apply to you?	Yes No
	Does exclusion 1 for Measure 3 apply to you?	Yes No
	Does exclusion 2 for Measure 3 apply to you?	Yes No
	Does exclusion 3 for Measure 3 apply to you?	Yes No
	Does the alternate exclusion for Measure 3 apply to you?	Yes No
	Does exclusion 1 for Measure 4 apply to you?	Yes No
	Does exclusion 2 for Measure 4 apply to you?	Yes No
	Does exclusion 3 for Measure 4 apply to you?	Yes No
	Numerator 1: N/A	
	Denominator 1: N/A	YES NO
	Numerator 2: N/A	
	Denominator 2: N/A	YES NO
	Numerator 3: N/A	
	Denominator 3: N/A	YES NO
	Numerator 4: N/A	
	Denominator 4: N/A	YES NO