



Breaking Down the Most Complicated MU Measures

Contact us today:
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EHR Concepts takes pride in giving our clients resourceful information to prepare you for the next steps of Meaningful Use and other incentive programs.





May 20 2014 Proposed Rule

Table 2: Proposed CEHRT Systems Available for Use in 2014

If you were scheduled to demonstrate:	You would be able to attest for Meaningful Use:		
	Using 2011 Edition CEHRT to do:	Using 2011 & 2014 Edition CEHRT to do:	Using 2014 Edition CEHRT to do:
Stage 1 in 2014	2013 Stage 1 objectives and measures*	2013 Stage 1 objectives and measures* -OR- 2014 Stage 1 objectives and measures*	2014 Stage 1 objectives and measures
Stage 2 in 2014	2013 Stage 1 objectives and measures*	2013 Stage 1 objectives and measures* -OR- 2014 Stage 1 objectives and measures* -OR- Stage 2 objectives and measures*	2014 Stage 1 objectives and measures* -OR- Stage 2 objectives and measures

*Only providers that could not fully implement 2014 Edition CEHRT for the reporting period in 2014 due to delays in 2014 Edition CEHRT availability.



2014 Reminders

- In 2014, the reporting period is 90 days regardless of what stage you are in
- Medicare the reporting period can be any 1 calendar quarter
- Medicaid the reporting period can be 90 days/3 months (determined by state)
- If you have providers that have never attested before and 2014 is their first year, they must be submitted by Oct 2014
- Hardship Exception- Due to infrastructure, brand new EP, unforeseen circumstances, lack of patient interaction, providers not working at one location 50% of the time, or EHR vendor certification issues. If you did not **successfully** meet Meaningful Use in 2013 and you qualify for one of these hardships, need to apply and submit application no later July 1, 2014.



Core Measure 7- Provide patients the ability to VDT

Measure:

Electronic copy of Health Information: More than 50% of all unique patients seen by the EP 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 (Note- also have to now have portal for stage 1) Also, 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

Break down:

- 50% have to do what?
- Get your Patients engaged now!



Core Measure 12- Reminders

Measure:

More than 10% of patients with two or more office visits in the last two` years.

Break down:

- The two office visits occur in the past two years prior to the reporting period (not during.)
- Discuss patient queries you want to run and workflow to notify patients
- Task-list setup- Central vs. office staff
- Batch print
- Query issues



Core Measure 10- Lab Results

Measure:

More than 55% of labs ordered by EP whose results are pos/neg or numerical are in EHR as structured data. **Live on results interface

Break down:

- Labs needs to classified in the lab section in the Orderable Item dictionary. Loinc codes are not required for this measure but are required for CQMs.
- For results that do not match the original order- Allscripts is suggesting Perm deferral "results received on different order"



Core Measure 15- Summary of Care/TOC

Measure:

Summary of Care for TOC: Three parts to this measure:

- 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-mark summary of care given
- Summary of Care record must be electronically transmitted to a recipient using direct messaging for more than 10% of all transition/referrals
- Must conduct at least one successful electronic exchange of Summary of Care record with a different EHR developer than the sender's EHR

*Allscripts delivers one Direct address for every Provider that has a MU package license

CQM's

Measure:

CQM's- must submit 9 out of 64 and out of 3 different domains for Meaningful Use

- There are 9 Adult recommendations / 9 Pediatric recommendations from CMS
- Six domains:
 - Patient and Family Engagement
 - Patient Safety
 - Care Coordination
 - Population and Public Health
 - Efficient Use of Healthcare Resources
 - Clinical Processes/Effectiveness

Break down:

Mapping of CQM measures- Snomed/Loinc mappings prior to reporting period for Touchworks clients

Prepare now:

- Select CQM measures you plan to use
- Review POC workflows
- Create workflows around selected measures
- Decide on reminders and workflows around them
- Review hardship exceptions



Helpful Links:

- CQM's

http://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/Downloads/2014_CQM_PediatricRecommended_CoreSetTable.pdf

http://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/Downloads/2014_CQM_AdultRecommend_CoreSetTable.pdf

- Hardship Exception

http://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/Downloads/PaymentAdj_HardshipExcepTipSheetforEP.pdf

- MU Rule

http://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/Downloads/Stage2_MeaningfulUseSpecSheet_TableContents_EPs.pdf



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