

Comparison of Final 2015 – 2017 Measures and Objectives to the Proposed Modified Stage 2 and Stage 3 Measures and Objectives

Objective	Final 2015 - 2017 Measures and Objectives	ACI – 2017 Only Alternate Base Score Based on Modified Stage 2	ACI – Primary Base Score Based on Stage 3 (Can be used by those with 2015 Edition CEHRT)
Protect Patient Health Information	<p>Security Risk Analysis: Conduct or review a security risk analysis, including addressing the security (including encryption) of electronic personal health information created or maintained by CEHRT; implement security updates as necessary, and correct identified security deficiencies as part of the clinician’s risk management process.</p>	<p>Required: Counts towards base score, failure to meet measure results in failure of entire ACI category</p>	<p>Required: Counts towards base score, failure to meet measure results in failure of entire ACI category</p>
Electronic Prescribing		<p>Included in Base Score: must report at numerator (at least one patient) and denominator, but does not affect performance score</p>	<p>Included in Base Score: must report at numerator (at least one patient) and denominator, but does not affect performance score</p>
Clinical Decision Support (CDS)	<p>Measure 1: Implement five Clinical Decision Support (CDS) 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 clinicians scope of practice or patient population the CDS interventions must be related to high priority health conditions</p> <p>Measure 2: The clinician has enabled and implemented the functionality for drug-drug and drug-allergy checks for the entire EHR reporting period</p>	<p>Included in Base Score: Clinical Decision Support Interventions Measure: Implement three CDS interventions related to three CQMs at a relevant point in patient care for the entire performance period. Absent three CQMs related to a MIPS eligible clinician’s scope of practice or patient population, the CDS must be related to high priority health conditions.</p> <p>Drug Interaction and Drug-Allergy Checks Measure: The MIPS eligible clinician has enabled and implemented the functionality for drug-drug and drug-allergy checks for the entire performance period.</p>	<p>Not required</p>

<p>Computerized Clinician Order Entry (CPOE)</p>	<p>Measure 1: More than 60 percent of medication orders created by the eligible clinician or authorized clinicians of the eligible hospital, or CAH inpatient or emergency department (POS 21 or 23) during the EHR reporting period are recorded using computerized order entry</p> <p>Clinician exclusion: Any clinician who writes fewer than 100 medication orders during the EHR reporting period</p> <p>Measure 2: More than 30 percent of laboratory orders created by the eligible clinician or authorized clinicians of the eligible hospital, or CAH inpatient or emergency department (POS 21 or 23) during the EHR reporting period are recorded using computerized order entry</p> <p>Clinician exclusion: Any clinician who writes fewer than 100 laboratory orders during the EHR reporting period</p> <p>Measure 3: More than 30 percent of diagnostic imaging orders created by the eligible clinician or authorized clinicians of the eligible hospital, or CAH inpatient or emergency department (POS 21 or 23) during the EHR reporting period are recorded using computerized order entry</p> <p>Clinician exclusion: Any clinician who writes fewer than 100 diagnostic</p>	<p>Included in Base Score</p> <p>Medication Orders Measure: At least one medication order created by the MIPS eligible clinician is recorded using CPOE</p> <p>Laboratory Orders Measure: At least one laboratory order created by the MIPS eligible clinician is recorded using CPOE</p> <p>Diagnostic Imaging Orders Measure: At least one diagnostic imaging order created by the MIPS eligible clinician is recorded using CPOE</p>	<p>Not required</p>
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	<p>imaging orders during the EHR reporting period</p> <p>Alternate Exclusion for Measure 3: Clinicians scheduled to be in Stage 1 in 2016 may claim an exclusion for measure 3 (radiology orders) of the Stage 2 CPOE objective for an EHR reporting period in 2016</p>		
<p>Patient Electronic Access</p>	<p>Eligible Clinician Measure 1: More than 50 percent of all unique patients seen by the clinician during the EHR reporting period are provided timely access to view online, download and transmit to a third party their health information subject to the clinicians discretion to withhold certain information.</p> <p>Eligible Clinician Measure 2: For an EHR reporting period in 2016m at least one patient seen by the eligible clinician during the EHR reporting period (or patient-authorized representative) views, downloads or transmits to a third party his or her health information during the EHR reporting period</p> <p>Eligible Clinician Exclusions: Any clinician who: Neither orders nor creates and of the information listed for inclusion as part of the measures; or Conducts 50 percent or more of his or her patient encounters in a county that does not have 50</p>	<p>Included in Base and Performance Scores:</p> <p>Patient Access Measure: At least one patient seen by the MIPS eligible clinician during the performance period is provided timely access to view online, download and transmit to a third party their health information subject to the MIPS eligible clinician’s discretion to withhold certain information.</p> <p>View, Download, Transmit (VDT) Measure: At least one patient seen by the MIPS eligible clinician during the performance period (or patient authorized representative) views, downloads or transmits their health information to a third party during the performance period.</p>	<p>Included in Base and Performance Scores:</p> <p>Patient Access Measure: For at least one unique patient seen by the clinician, (1) the patient (or patient-authorized representative) is provided timely access to view online, download, and transmit his or her health information, and (2) the clinician ensures the patient’s health information is available for the patient (or patient-authorized representative) to access using any application of his or her choice that is configured to meet the technical specifications of the Application Programming Interface (API) in the clinician’s CEHRT.</p> <p>Patient-Specific Education Measure: The clinician must use clinically relevant information from the CEHRT to identify patient-specific educational resources, and provide electronic access to those materials, to at least one unique patient seen by the clinician.</p>

	percent or more of its housing units supplied with 4Mbps broadband availability according to the latest information available from the FCC on the first day of the EHR reporting period.		
Coordination of Care through Patient Engagement			
Health Information Exchange	<p>Measure: The clinician, eligible hospital or CAH that transitions or refers their patient to another setting of care or clinician of care must (1) use Certified Electronic Healthcare Records Technology (CEHRT) to create a summary of care record and; (2) electronically transmit such summary to a receiving clinician for more than 10% of transitions of care and referrals</p> <p>Clinician exclusion: Any clinician who transfers a patient to another setting or refers a patient to another clinician fewer than 100 during the EHR reporting period</p>	<p>Included in Base and Performance Scores: Under objective 7, the <i>Health Information Exchange</i>, objective</p> <p>Health Information Exchange Measure: The MIPS eligible clinician that transitions or refers their patient to another setting of care or health care clinician: (1) Uses certified EHR technology to create summary of care record; and (2) electronically transmits such summary to a receiving health care clinician for at least one transition of care or referral</p> <p>Medication Reconciliation Measure: The MIPS eligible clinician performs medication reconciliation for at least one transition of care in which the patient is transitioned into the care of the MIPS eligible clinician</p>	<p>Included in Base and Performance Scores: Under objective 5, the Health Information Exchange, objective</p> <p>Patient Care Record Exchange Measure: For at least one transition of care or referral, the MIPS eligible clinician that transitions or refers their patient to another setting of care or health care clinician: (1) Creates a summary of care using certified EHR technology; and (2) electronically exchanges the summary of care record.</p> <p>Request/Accept Patient Care: For at least one transition of care or referral received or patient encounter in which the clinician has never before encountered the patient, the clinician received, or retrieves and incorporates into the patient's record, an electronic summary of care document.</p> <p>Clinical Information Reconciliation Measure: For at least one transition of care or referral received</p>

			<p>or patient encounter in which the clinician has never before encountered the patient, the clinician performs clinical information reconciliation. The clinician must implement clinical information reconciliation for the following three clinical information sets: (1) Medication— Review of the patient’s medication including the name, dosage, frequency, and route of each medication; (2) Medication Allergy— Review of the patient’s known medication allergies; and (3) Current Problem List—Review of the patient’s current and active diagnoses.</p>
<p>Secure Electronic Messaging (Eligible Clinician Only)</p>	<p>2016 EP Measure: For an EHR reporting period in 2016, for at least 1 patient seen by the eligible clinician during the EHR reporting period, a secure message was sent using the electronic messaging function of CEHRT to the patient (or patient-authorized representative) during the EHR reporting period.</p> <p>2017 EP Measure: For an EHR reporting period in 2017, for at least 5 percent of unique patients seen by the eligible clinician during the EHR reporting period, a secure message was sent using the electronic messaging function of CEHRT to the patient (or patient-authorized</p>	<p>See Coordination of Care Through Patient Engagement</p>	<p>See Coordination of Care Through Patient Engagement</p>

	<p>representative), or in response to a secure message sent by the patient (or patient-authorized representative) during the EHR reporting period.</p> <p>Eligible Clinician Exclusion: Any clinician who has no office visits during the EHR reporting period or conducts 50 percent or more of his or her patient encounters in a county with 50 percent or more of its housing units supplied with 4Mbps broadband availability according to the latest information available from the FCC on the first day of the EHR reporting period</p>		
<p>Patient Specific Education</p>	<p>Eligible Clinician Measure: Patient-specific education resources identified by CEHRT are provided to patients for more than 10 percent of all unique patients with office visits seen by the clinician during the EHR reporting period</p> <p>Exclusion: Any clinician who has no office visits during the EHR reporting period</p>	<p>Included in Base and Performance Scores: Counts towards base and performance scores. Under objective 6 <i>Coordination of Care Through Patient Engagement</i></p> <p>Patient Specific Education Measure: The MIPS eligible clinician must use clinically relevant information from certified EHR technology to identify patient-specific educational resources and provide access to those materials to at least one unique patient seen by the MIPS eligible clinician</p> <p>Secure Messaging Measure: For at least one unique patient seen by the MIPS eligible clinician during the performance period, a secure message</p>	<p>Included in Base and Performance Scores: Counts towards base and performance scores. Under objective 4 <i>Coordination of Care Through Patient Engagement</i></p> <p>View, Download, Transmit Measure: At least one unique patient (or patient-authorized representative) seen by the clinician during the performance period actively engages with the EHR made accessible by the clinician. A clinician may meet the measure by having a patient either (1) view, download, or transmit to a third party his or her health information; or (2) access his or her health</p>

		<p>was sent using the electronic messaging function of the CEHRT to the patient (or patient-authorized representative), or in response to a secure message sent by the patient (or patient authorized representative).</p>	<p>information through the use of an API that can be used by applications chosen by the patient and configured to the API in the clinician’s CEHRT; or (3) a combination of (1) and (2).</p> <p>Secure Messaging Measure: For at least one unique patient seen by the MIPS eligible clinician during the performance period, a secure message was sent using the electronic messaging function of the CEHRT to the patient (or patient-authorized representative), or in response to a secure message sent by the patient (or patient authorized representative).</p> <p>Patient-Generated Health Data Measure: Patient-generated health data or data from a non-clinical setting is incorporated into the CEHRT for at least one unique patient seen by the MIPS eligible clinician during the performance period</p>
Medication Reconciliation	<p>Measure: The eligible clinician performs medication reconciliation for more than 50 percent of transitions of care in which the patient is transitioned into the care of the eligible clinician, or admitted to the eligible hospital’s or CAH;s inpatient or emergency department (POS 21 or 23)</p> <p>Exclusion: Any eligible</p>	See Health Information Exchange objective	See Health Information Exchange objective

	<p>clinician who was not the recipient of any transitions of care during the EHR reporting period</p>		
<p>Public Health and Clinical Data Registry Reporting</p>	<p>Eligible clinicians required to meet two Measures</p> <p>Measure 1: Immunization Registry Reporting: The eligible clinician, is in active engagement with a public health agency to submit immunization data</p> <p>Exclusion: Any eligible clinician meeting one or more of the following criteria may be excluded from the immunization registry reporting measure if the eligible clinician:</p> <p>Does not administer any immunizations to any of the populations for which data is collected by its jurisdiction’s immunization registry or immunization information system during the EHR reporting period</p> <p>Operates in a jurisdiction for which no immunization registry or immunization information system is capable of accepting the specific standards required to meet the CEHRT definition at the start of the EHR reporting period; OR</p> <p>Operates in a jurisdiction where no immunization registry or immunization information system has the declared readiness to receive immunization data from the eligible clinician at the start of the EHR</p>	<p>Immunization Registry Reporting Measure: The MIPS eligible clinician is in active engagement with a public health program. Previously adopted exclusions apply.</p> <p>Syndromic Surveillance Reporting Measure: The clinician is in active engagement with a public health agency to submit syndromic surveillance data</p> <p>Electronic Case Reporting Measure: The clinician is in active engagement with a public health agency to electronically submit case reporting of reportable conditions.</p> <p>Public Health Registry Measure: The clinician is in active engagement with a public health agency to submit data to public health registries.</p>	<p>Immunization Registry Reporting included. Counts towards Base and Performance Scores. Others optional</p> <p>Immunization Registry Reporting Measure: The clinician is in active engagement with a public health agency to submit immunization data and receive immunization forecasts and histories from the public health immunization registry/immunization information system (IIS)</p> <p>(Optional) Syndromic Surveillance Reporting Measure: The clinician is in active engagement with a public health agency to submit syndromic surveillance data from a non-urgent care ambulatory setting where the jurisdiction accepts syndromic data from such settings and the standards are clearly defined.</p> <p>(Optional) Electronic Case Reporting Measure: The clinician is in active engagement with a public health agency to electronically submit case reporting of reportable conditions.</p> <p>(Optional) Public Health Registry Measure: The clinician is in active engagement with a public health agency to submit data to public health registries.</p>

	<p>reporting period</p> <p>Measure 2 – Syndromic Surveillance Reporting: The eligible clinician is in active engagement with a public health agency to submit syndromic surveillance data</p> <p>Exclusion: Any eligible clinician meeting one or more of the following criteria may be excluded from the syndromic surveillance reporting measure if the eligible clinician:</p> <p>Is not in a category of clinicians from which ambulatory syndromic surveillance data is collected by their jurisdiction’s syndromic surveillance system;</p> <p>Operates in a jurisdiction for which no public health agency is capable of receiving electronic syndromic surveillance data from eligible clinicians in the specific standards required to meet the CEHRT definition at the start of the EHR reporting period; or</p> <p>Operates in a jurisdiction where no public health agency has declared readiness to receive syndromic surveillance data from eligible clinicians at the start of the EHR reporting period</p> <p>Measure 3 – Specialized Registry Reporting: The eligible clinician is in active engagement to submit data to a specialized registry</p>		<p>(Optional) Clinical Data Registry Measure – The clinician is in active engagement to submit data to a clinical data registry</p>
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	<p>Exclusions: Any eligible clinician meeting at least one of the following criteria may be excluded from the specialized registry reporting measure if the eligible clinician:</p> <p>Does not diagnose or treat any disease or condition associated with or collect relevant data that is required by a specialized registry in their jurisdiction during the EHR reporting period;</p> <p>Operates in a jurisdiction where no specialized registry is capable of accepting electronic registry transactions in the specific standards required to meet the CEHRT definition at the start of the EHR reporting period; or</p> <p>Operates in a jurisdiction where no specialized registry for which the eligible clinician has declared readiness to receive electronic registry transactions at the start of the EHR reporting period</p>		
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