Eligible Hospital and Critical Access Hospital (CAH) Attestation Worksheet for Modified Stage 2 of the Medicare Electronic Health Record (EHR) Incentive Program in 2015

The Eligible Hospital and CAH Attestation Worksheet is for eligible hospitals and CAHs in the EHR Incentive Program in 2015. This worksheet 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 the CMS system.

For each objective with a percentage-based measure, certified EHR technology 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 objectives.

Note: There are several alternate exclusions and specifications for certain measures in 2015, which some Stage 1 providers may not otherwise be able to meet because they require the implementation of certified EHR technology beyond the functions required for Stage 1. In order to provide complete and accurate information for certain measures, eligible hospitals and CAHs may also have to include information from paper-based patient records or from records maintained in uncertified EHR technology.

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 to meet at least two public health measures, and eligible hospitals and CAHs scheduled to be in Stage 2 to meet three public health measures.
- 2. **16 out of 29** of the clinical quality measures (CQMs)

EHR Reporting Period: For 2015, eligible hospitals and CAHs may use an EHR reporting period from the beginning of the federal fiscal year to the end of the calendar year (October 1, 2014 through December 31, 2015). For eligible hospitals and CAHs, the action may occur at any point during that time as long as it is no earlier than October 1, 2014 and no later than the date of attestation for their 2015 EHR reporting period.

Meaningful Use Objectives and Measures

Must fill out for each of the 9 objectives including 2 public health measures for eligible hospitals and CAHs previously scheduled to be in Stage 1 in 2015 and 3 public health measures for eligible hospitals and CAHs previously scheduled to be in Stage 2 in 2015.

#	Measure Information	Measure Values	
1	Objective: Protect electronic 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 in Certified EHR Technology in accordance with requirements in 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 CAHs risk management process. Note: This measure only requires a yes/no answer.		
	Numerator: N/A Denominator: N/A	YES No	
2	Objective: Use clinical decision support to improve performance on high-priority he conditions. Note: EPs must satisfy both measures in order to meet the objective. Measure 1: Implement five clinical decision support interventions related to four or clinical quality measures at a relevant point in patient care for the entire EHR repor period. Absent four clinical quality measures related to an eligible hospital or CAH's of practice or patient population, the clinical decision support interventions must b related to high-priority health conditions. For an EHR reporting period in 2015 only an eligible hospital or CAH who is schedule participate in Stage 1 in 2015 may satisfy the following in place of measure 1: Alternate Objective: Implement one clinical decision support rule relevant to specia high priority hospital condition, along with the ability to track compliance with that Alternate Measure 1: Implement one clinical decision support rule. Measure 2: The eligible hospital or CAH has enabled and implemented the function for drug-drug and drug allergy interaction checks for the entire EHR reporting period Exclusion for Measure 2: For the second measure, any EP who writes fewer than 10 medication orders during the EHR reporting period Note: This measure only requires a yes/no answer.		
	Does the exclusion apply to you?	Yes No No	
	Numerator Measure 1 (or Alternate Measure 1): N/A Denominator Measure 1: N/A	YES NO	
	Numerator Measure 2: N/A		
	Denominator Measure 2: N/A	NO YES	

#	Measure Information	Measure Values
3	Objective: Use computerized provider order entry (CPOE) for medication, laboratory and radiology orders directly entered by any licensed healthcare professional who can enter orders into the medical record per state, local and professional guidelines. Note: Eligible hospitals and CAHs must satisfy all three measures in order to meet the objective. Measure 1: More than 60 percent of medication orders created by authorized providers of the eligible hospital's or CAH's inpatient or emergency department (POS 21 or 23) during the EHR reporting period are recorded using computerized provider entry. Alternate Measure 1: For Stage 1 providers in 2015, more than 30 percent of all unique patients with at least one medication in their medication list admitted to the eligible hospital's or CAH's inpatient or emergency department (POS 21 or 23) during the EHR reporting period have at least one medication order entered using CPOE; or more than 30 percent of medication orders created by the authorized providers of the eligible hospital or CAH for patients admitted to their inpatient or emergency departments (POS 21 or 23) during the EHR reporting period, are recorded using computerized provider order entry. Measure 2: More than 30 percent of laboratory orders created by authorized providers of the eligible hospital's or CAH's inpatient or emergency department (POS 21 or 23) during the EHR reporting period are recorded using computerized provider order entry. Measure 3: More than 30 percent of radiology orders created by authorized providers of the eligible hospital's or CAH's inpatient or emergency department (POS 21 or 23) during the EHR reporting period are recorded using computerized provider order entry. Measure 3: More than 30 percent of radiology orders created by authorized providers of the eligible hospital's or CAH's inpatient or emergency department (POS 21 or 23) during the EHR reporting period are recorded using computerized provider order entry. Alternate Exclusion Measure 2: Providers scheduled to be in S	
	reporting period in 2015.	Ves No
	Does the alternative exclusion for Measure 2 apply to you? Does the alternative exclusion for Measure 3 apply to you?	Yes No No Yes No
	Numerator 1 (Medication): Number of orders in the denominator recorded using CPOE. Denominator 1 (Medication): 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 EUR reporting period.	
	the EHR reporting period. Numerator 2 (Laboratory): Number of orders in the denominator recorded using CPOE. Denominator 2 (Laboratory): 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.	

#	Measure Information	Measure Values
	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 prescriptions electronic Measure: More than 10 percent of hospital discharge medication orders for per prescriptions (for new and changed prescriptions) are queried for a drug formul transmitted electronically using CEHRT. Exclusion: Any eligible hospital or CAH that does not have an internal pharmacy accept electronic prescriptions and is not located within 10 miles of any pharma accepts electronic prescriptions at the start of their EHR reporting period. Alternate Exclusion: The eligible hospital or CAH may claim an exclusion for the objective and measure if for an EHR reporting period in 2015 they were either stone demonstrate Stage 1 which does not have an equivalent measure, or if they as scheduled to demonstrate Stage 2 but did not select the Stage 2 eRx menu objective and EHR reporting period in 2015.	
	Does the exclusion apply to you?	Yes No
	Does the alternative exclusion apply to you?	Yes No
	Numerator: The number of prescriptions in the denominator generated, queried for a drug formulary, and transmitted electronically.	
	Denominator: 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 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. Alternate Exclusion: Provider may claim an exclusion for the Stage 2 measure that requires the electronic transmission of a summary of care document if for an EHR reporting period in 2015, they were scheduled to demonstrate Stage 1, which does no have an equivalent measure.	
	Does the alternate exclusion apply to you?	Yes No
	Numerator 1: 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 1: Number of transitions of care and referrals during the EHR reporting period for which the eligible hospital's	

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	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 identify patient-specific education resources and provide those resources to the patient. Measure: More than 10 percent of all unique patients admitted to the eligible hospital's or CAH's inpatient or emergency department (POS 21 or 23) are provided patient-specific education resources identified by CEHRT. Alternate Exclusion: Provider may claim an exclusion for the measure of the Stage 2 Patient Specific Education objective if for an EHR reporting period in 2015 they were scheduled to demonstrate Stage 1 but did not intend to select the Stage 1 Patient Specific Education menu objective.	
	Does the alternate exclusion apply to you?	Yes No No
	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	Objective: The eligible hospital or CAH who receives a patient from another setting of care or provider of care or believes an encounter is relevant performs medication reconciliation. Measure: 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). Alternate Exclusion: Provider may claim an exclusion for the measure of the Stage 2 Medication Reconciliation objective if for an EHR reporting period in 2015 they were scheduled to demonstrate Stage 1 but did not intend to select the Stage 1 Medication Reconciliation menu objective.	
	Does the alternate exclusion apply to you?	Yes No
	Numerator: The number of transitions of care in the denominator where medication reconciliation was performed. Denominator: 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. Note: Eligible hospitals and CAHs must satisfy both measures in order to meet the objective. 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	

#	Measure Information	Measure Values
	provided timely access to view online, download and transmit to a third party their health information. Measure 2: For an EHR reporting period in 2015, at least 1 patient who is discharged from the inpatient or emergency department (POS 21 or 23) of an eligible hospital or CAH (or patient authorized representative) views, downloads, or transmits to a third party his or her health information during the EHR reporting period. Exclusion for Measure 2: 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 period. Alternate Exclusion: Providers may claim an exclusion for the second measure if for an EHR reporting period in 2015 they were scheduled to demonstrate Stage 1, which does	
	not have an equivalent measure. Does the exclusion apply to you?	Yes No
	Does the alternate exclusion apply to you?	Yes No
	Numerator 1: 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.	
	Denominator 1: 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.	
	Numerator 2: The number of patients (or patient-authorized representative) in the denominator who view, download, or transmit to a third party their health information.	
	Denominator 2: 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.	
9 (Objective 10 in the final rule; 495.22 (e)(10)(ii)(C))	pjective: The eligible hospital or CAH is in active engagement with a public health agency submit electronic public health data from CEHRT except where prohibited and in cordance with applicable law and practice. easure Option 1 – Immunization Registry Reporting: The eligible hospital or CAH is in tive engagement with a public health agency to submit immunization data. easure Option 2 – Syndromic Surveillance Reporting: The eligible hospital or CAH is in tive engagement with a public health agency to submit syndromic surveillance data. easure Option 3 – Specialized Registry Reporting: The eligible hospital or CAH is in active agagement to submit data to a specialized registry. easure Option 4 – Electronic Reportable Laboratory Result Reporting: The eligible aspital or CAH is in active engagement with a public health agency to submit electronic portable laboratory (ELR) results. Immunization Registry Reporting clusion 1: Does not administer any immunizations to any of the populations for which it is collected by their jurisdiction's immunization registry or immunization information stem during the EHR reporting period	

#	Measure Information	Measure Values
	Exclusion 2: Operates in a jurisdiction for which no immunization reinformation system is capable of accepting the specific standards of CEHRT definition at the start of the EHR reporting period; or Exclusion 3: Operates in a jurisdiction where no immunization regint information system has declared readiness to receive immunization hospital or CAHs at the start of the EHR reporting period. Syndromic Surveillance Exclusion 4: Does not have an emergency or urgent care department.	required to meet the istry or immunization on data from the eligible
	Exclusion 5: Operates in a jurisdiction for which no public health as receiving electronic syndromic surveillance data from eligible hosp specific standards required to meet the CEHRT definition at the staperiod	gency is capable of pitals or CAHs in the
	Exclusion 6: Operates in a jurisdiction where no public health agent readiness to receive syndromic surveillance data from eligible hos start of the EHR reporting period. Specialized Registry Reporting :	•
	Exclusion 7: Does not diagnose or treat any disease or condition a collect relevant data that is collected by, a specialized registry in the EHR reporting period; Exclusion 8: Operates in a jurisdiction for which no public health as	heir jurisdiction during
	accepting electronic registry transactions in the specific standards CEHRT definition at the start of the EHR reporting period. Exclusion 9: Operates in a jurisdiction where no public health regis	required to meet the
	eligible hospital or CAH is eligible has declared readiness to receive transactions at the beginning of the EHR reporting period. Laboratory Result Reporting	e electronic registry
	Exclusion 10: Does not perform or order laboratory tests that are rejurisdiction during the EHR reporting period. Exclusion 11: Operates in a jurisdiction for which no public health	agency is capable of
	accepting the specific ELR standards required to meet the CEHRT of the EHR reporting period. Exclusion 12: Operates in a jurisdiction where no public health age	ency has declared
	readiness to receive electronic reportable laboratory results from CAHs at the start of the EHR reporting period. Alternate Exclusions:	
	 Eligible hospitals/CAHs scheduled to be in Stage 1: Must attest to a the Public Health Reporting Objective Measures 1-4. May claim an Alternate Exclusion for Measure 1, Measure 2, N 	Measure 3 or Measure 4.
	 An Alternate Exclusion may only be claimed for up to the provider must either attest to or meet the exclusion requires measure described in 495.22 (e)(10)(ii)(C). Eligible hospitals/CAHs scheduled to be in Stage 2: Must attest to a 	ments for the remaining
	the Public Health Reporting Objective Measures 1-4.	

Measure).

• May claim an alternate exclusion for Measure 3 (Specialized Registry Reporting

#	Measure Information	Measure Values
	Does exclusion 1 apply to you?	Yes No
	Does exclusion 2 apply to you?	Yes No
	Does exclusion 3 apply to you?	Yes No
	Does exclusion 4 apply to you?	Yes No
	Does exclusion 5 apply to you?	Yes No
	Does exclusion 6 apply to you?	Yes No
	Does exclusion 7 apply to you?	Yes No
	Does exclusion 8 apply to you?	Yes No
	Does exclusion 9 apply to you?	Yes No
	Does exclusion 10 apply to you?	Yes No
	Does exclusion 11 apply to you?	Yes No
	Does exclusion 12 apply to you?	Yes No
	Does an alternate exclusion apply to you?	Yes No
	Does a second alternate exclusion apply to you? (Stage 1 providers only)	Yes No
	Does a third alternate exclusion apply to you? (Stage 1 providers only)	Yes No
	Measure 1 - Immunization Registry Reporting	YES NO
	Measure 2 - Syndromic Surveillance Reporting	YES NO
	Measure 3 - Specialized Registry Reporting (1)	YES NO
	Measure 4 - Electronic Reportable Laboratory Result Reporting	YES NO
	For providers who choose to report to more than one Specialized Reproviders in 2015 would only need to meet two measures.)	
	Measure 3 - Specialized Registry Reporting (2)	YES NO
	Measure 3 - Specialized Registry Reporting (3)	YES NO