

Florida Medicaid Electronic Health Record (EHR) Incentive Program

What You Need to Know to Participate

Objectives and Measures

- Eligible Professionals (EPs) are required to attest to a single set of objectives and measures referred to as Modified Stage 2. This objective and measure set replaces the core and menu objectives structure of previous stages.
- For EPs, there are **10** objectives.
- In Program Year 2017 (PY17), EPs must attest to objectives and measures using EHR technology certified to the 2014 Edition, the 2015 Edition, or a combination of the two.

EHR Reporting Period

- The EHR reporting period for PY17 will be a minimum of any continuous 90-day period between January 1, 2017 and December 31, 2017.
- If PY17 is the EPs first year reporting meaningful use (MU), Clinical Quality Measures (CQMs) must be reported for a 90-day period. For subsequent year reporting, CQMs must be reported for the full year.

Modified Stage 2 Measures

For complete information of Modified Stage 2 measures for PY17, visit

https://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/Downloads/TableofContents_EP_Medicaid_ModifiedStage2.pdf

Objectives for PY17	Measures for EPs in PY17
<p>Objective 1: Protect Patient Health Information</p>	<p>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 electronic protected health information (ePHI) created or maintained in certified electronic health record technology (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 EP’s risk management process.</p>
<p>Objective 2: Clinical Decision Support</p>	<p><i>EPs must satisfy both the following measures in order to meet the objective:</i></p> <p>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 EP’s scope of practice or patient population, the clinical decision support interventions must be related to high priority health conditions.</p> <p>Measure 2: The EP has enabled and implemented the functionality for drug-drug and drug-allergy interaction checks for the entire EHR reporting period.</p> <ul style="list-style-type: none"> • Exclusion: For the second measure, any EP who writes fewer than 100 medication orders during the EHR reporting period.

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<p>Objective 3: Computerized Provider Order Entry (CPOE)</p>	<p><i>An EP, through a combination of meeting the thresholds and exclusions (or both), must satisfy all three measures for this objective.</i></p> <p>Measure 1: More than 60 percent of medication orders created by the EP during the EHR reporting period are recorded using CPOE.</p> <ul style="list-style-type: none"> • Exclusion for Measure 1: Any EP who writes fewer than 100 medication orders during the EHR reporting period. <p>Measure 2: More than 30 percent of laboratory orders created by the EP during the EHR reporting period are recorded using CPOE.</p> <ul style="list-style-type: none"> • Exclusion for Measure 2: Any EP who writes fewer than 100 laboratory orders during the EHR reporting period. <p>Measure 3: More than 30 percent of radiology orders created by the EP during the EHR reporting period are recorded using CPOE.</p> <ul style="list-style-type: none"> • Exclusion for Measure 3: Any EP who writes fewer than 100 radiology orders during the EHR reporting period.
<p>Objective 4: Electronic Prescribing</p>	<p>Measure: More than 50 percent of permissible prescriptions written by the EP are queried for a drug formulary and transmitted electronically using CEHRT.</p> <p>Exclusions: Any EP who</p> <ul style="list-style-type: none"> • Writes fewer than 100 permissible prescriptions during the EHR reporting period; or • Does not have a pharmacy within his or her organization and there are no pharmacies that accept electronic prescriptions within 10 miles of the EP's practice location at the start of his or her EHR reporting period.
<p>Objective 5: Health Information Exchange</p>	<p>Measure: The EP 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.</p> <p>Exclusion: Any EP who transfers a patient to another setting or refers a patient to another provider less than 100 times during the EHR reporting period.</p>
<p>Objective 6: Patient Specific Education</p>	<p>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 EP during the EHR reporting period.</p> <p>Exclusion: Any EP who has no office visits during the EHR reporting period.</p>
<p>Objective 7: Medication Reconciliation</p>	<p>Measure: The EP performs medication reconciliation for more than 50 percent of transitions of care in which the patient is transitioned into the care of the EP.</p> <p>Exclusion: Any EP who was not the recipient of any transitions of care during the EHR reporting period.</p>

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<p>Objective 8: Patient Electronic Access (VDT)</p>	<p>Measure 1: More than 50 percent of all unique patients seen by the EP during the EHR reporting period are provided timely access to view online, download, and transmit (VDT) to a third party their health information subject to the EP's discretion to withhold certain information.</p> <ul style="list-style-type: none"> • Exclusion for Measure 1: Any EP who neither orders nor creates any of the information listed for inclusion as part of the measures except for "Patient Name" and "Provider's name and office contact information." <p>Measure 2: For an EHR reporting period in 2017, more than 5 percent of unique patients seen by the EP during the EHR reporting period (or his or her authorized representatives) view, download or transmit to a third party their health information during the EHR reporting period.</p> <ul style="list-style-type: none"> • Exclusion for Measure 2: Any EP who: <ul style="list-style-type: none"> ○ Neither orders nor creates any of the information listed for inclusion as part of the measures except for "Patient Name" and "Provider's name and office contact information"; or ○ Conducts 50 percent or more of his or her patient encounters 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 <i>EHR reporting period</i>.
<p>Objective 9: Secure Messaging</p>	<p>Measure: For an EHR reporting period in 2017, for more than 5 percent of unique patients seen by the EP during the EHR reporting period, a secure message was sent using the electronic messaging function of CEHRT to the patient (or the patient-authorized representative), or in response to a secure message sent by the patient (or the patient-authorized representative) during the EHR reporting period.</p> <p>Exclusion: Any EP who has no office visits during the EHR reporting period, or any EP who conducts 50 percent or more of his or her patient encounters 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.</p>
<p>Objective 10: Public Health Reporting</p>	<p><i>EPs must meet 2 of the 3 measures.</i></p> <p>Measure Option 1 – Immunization Registry Reporting: The EP is in active engagement with a public health agency to submit immunization data.</p> <ul style="list-style-type: none"> • Exclusions for Measure 1: Any EP meeting one or more of the following criteria may be excluded from the immunization registry reporting measure if the EP: <ul style="list-style-type: none"> ○ 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; ○ 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

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	<ul style="list-style-type: none"> ○ Operates in a jurisdiction where no immunization registry or immunization information system has declared readiness to receive immunization data from the EP at the start of the EHR reporting period. <p>Measure Option 2 – Syndromic Surveillance Reporting: The EP is in active engagement with a public health agency to submit syndromic surveillance data.</p> <ul style="list-style-type: none"> • Exclusions for Measure 2: Any EP meeting one or more of the following criteria may be excluded from the syndromic surveillance reporting measure if the EP: <ul style="list-style-type: none"> ○ Is not in a category of providers from which ambulatory syndromic surveillance data is collected by their jurisdiction's syndromic surveillance system; ○ Operates in a jurisdiction for which no public health agency is capable of receiving electronic syndromic surveillance data from EPs in the specific standards required to meet the CEHRT definition at the start of the EHR reporting period; or ○ Operates in a jurisdiction where no public health agency has declared readiness to receive syndromic surveillance data from EPs at the start of the EHR reporting period. <p>Measure Option 3 – Specialized Registry Reporting: The EP is in active engagement to submit data to a specialized registry.</p> <ul style="list-style-type: none"> • Exclusions for Measure 3: Any EP meeting at least one of the following criteria may be excluded from the specialized registry reporting measure if the EP: <ul style="list-style-type: none"> ○ Does not diagnose or treat any disease or condition associated with, or collect relevant data that is collected by, a specialized registry in their jurisdiction during the EHR reporting period; ○ Operates in a jurisdiction for which 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 ○ Operates in a jurisdiction where no specialized registry for which the EP is eligible has declared readiness to receive electronic registry transactions at the beginning of the EHR reporting period.

For questions, email MedicaidHIT@AHCA.MyFlorida.com, visit www.AHCA.MyFlorida.com/MedicaidEHR, or call 1-855-231-5472