Preparing for Meaningful Use
Stage 3 Objectives
(Eligible Hospitals/CAHs)

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- Lindsay Riel, Project Coordinator
- Nicholas Howe, Senior Analyst
- Stacy Saltzberg, Senior Analyst
Agenda

- Customer Communication
- Timelines & Planning
- Customer Resources
- Objective Measures Overview
- Points to Remember
Customer Communication

- Emails to ARRA-MU Contact
- Stage 3 Master ‘M’ task
- ARRA Bulletin Board - Subscribe!
- Quarterly Newsletter - Subscribe!
ARRA/Meaningful Use Contacts

Review Contacts to Ensure You Receive Important Notifications

In the coming months, MEDITECH will communicate important updates related to Stage 3 of Meaningful Use. Please review below to ensure your organization receives this valuable information:

- Electronic notifications will be sent to all designated ARRA/MU contact(s). Verify **setup has been completed** for correct individuals at your organization.
- Don't let emails end up in a spam folder; add **newslettercs@meditech.com** to your address book. Our notifications come from "MEDITECH Client Services," and we only send communications related to your role.
- Notifications are also posted on our **ARRA Bulletin Board**. Click the email subscribe button on the top right side of the page to receive an alert when the page is updated.

Your attention to this matter will ensure communications are reaching the correct person.
Welcome to the Bulletin Board. Here you will find the latest ARRA communications from MEDITECH to help you meet Meaningful Use requirements. Organized by date, customers can easily click on the topic of interest below to learn more.

Please utilize the Email Subscribe to This Page functionality (upper right-hand corner of the page) to ensure you are always notified when this page is updated and aware of the latest news from MEDITECH.

Customers: General communications related to ARRA are also distributed via email to users designated as the ARRA-MU Contact for each organization. Please ensure your IT administrator has set this up for users who would like to receive these notifications and don't forget to add newsletters@meditech.com to your address book to prevent our emails from going to your Spam folder.

<table>
<thead>
<tr>
<th>Sent On Date</th>
<th>Platforms</th>
<th>Affected Areas/Applications</th>
<th>Topics of Interest</th>
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<tbody>
<tr>
<td>12/22/16</td>
<td>All</td>
<td>All</td>
<td>CMS encourages providers to review the 2016 Program Requirements on the EHR Incentive Programs website in preparation for 2016 attestation (open from January 3 - February 28, 2017).</td>
</tr>
<tr>
<td>12/14/16</td>
<td>All</td>
<td>All</td>
<td>Meaningful Use Stage 3 December Update</td>
</tr>
<tr>
<td>12/13/16</td>
<td>All</td>
<td>All</td>
<td>ARRA/MU (EH) Quarterly Newsletter (Subscribe here)</td>
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</table>
Client Services Newsletters

Subscribe below to receive Client Services newsletters. We offer a wide array of quarterly communications, targeting application support contacts, technical staff, physicians, and C-level executives.

Click here to find out which newsletter(s) is most applicable to your role.

Email Address

First Name

Last Name

Specialty Newsletters

- Service Highlights (C-level)
- Physician Connection
- ARRA/Meaningful Use (EH)
- Technical
- Security

Client Services Application Newsletters

- Patient Care
- Clinical
Timelines

- Stage 3 is **required** in 2018, optional in 2017
- **Hardware Evaluations** - *TECH task*
- Update schedule
- Certification timeline - 5.67, 6.08, 6.15, 6.16
- Objective best practices timeline
- Objective education sessions timeline
- 2018 CQM requirements based on IPPS rule, to be released in 2017
MEDITECH’s Core HCIS:

- Admissions
- Health Information Management (Medical Records & Abstracting)
- Management Information System
- Pharmacy
- Laboratory Information Systems
- Departmental/Radiology or Imaging and Therapeutic Services
- Order Entry or Order Management
- Patient Care Inquiry/Clinical Review or Enterprise Medical Record
- Nursing or Patient Care Systems
- Physician Care Manager
- ePrescribing (requires DrFirst for prescription transactions)
- Data Repository (requires IMO for nomenclature mapping)
Planning

Modular Solutions

MEDITECH or OV certified solution **required**
- Patient and Consumer Health Portal
- CCD Interface Suite with Direct Messaging
- Public Health/Clinical Registry Reporting Interfaces

MEDITECH or OV certified solution **optional**
- Emergency Department Management
- Scanning and Archiving (optional for Patient Generated Health Data)
Third Party Vendor Requirements

- Intelligent Medical Objects (IMO)
- HISP - *must be certified to new edge protocols*
- Dr First
- Content for InfoButton
- Non-MEDITECH Portal requires Secure Messaging solution

Third Party Vendor (Optional)

- Content for Patient Education
- Security Analysis
A HISP that is certified for the following criteria - in conjunction with your MEDITECH certified products - must be in place for a base EHR, needed for Meaningful Use attestation.

- 170.315.h.1 – Direct Project OR
- 170.315.h.2 – Direct Project, Edge Protocol, XDR/XDM

*It is important to verify your organization’s HISP or HIE/HISP is certified to meet this new criteria.*
Planning

Interface Considerations

● Application Programming Interface (API) *new*
● Public Health
  ○ Syndromic update
  ○ Immunization update
  ○ Electronic Case Reporting *new*
  ○ Health Care Surveys *new*
● eRx update
● CCD update
● Patient Ed for Non-MEDITECH portal *new*
Questions?
Meditech Resources

- **Regulatory**
- **Frequently Asked Questions** - ARRA mailbox
- **Certification Information**
- Platform Landing Page: 6.1, 6.0, C/S & MG
  - Objective best practices and reports
  - CQM best practices and reports
  - Change Logs
  - Education
  - Presentations

*Remember to Subscribe!*
ARRA RESOURCES
Learn how to make Meaningful Use a reality.
- ARRA FAQs
- ARRA Bulletin Board
- EHR Incentive Program Audit
- Certification
- Eligible Professionals ARRA Resources
- Eligible Hospitals ARRA Best Practices
  - 6.1 6.0 Client/Server MAGIC

MACRA RESOURCES
Become familiar with the Quality Payment Program.
- MACRA FAQs
- MACRA Bulletin Board
- Merit-Based Incentive Payment System (MIPS) Resources
  - Quality (Coming Soon)
  - Advancing Care Information (Coming Soon)
  - Improvement Activities
ARRA Frequently Asked Questions

Welcome to MEDITECH's ARRA Frequently Asked Questions section. Here you will find answers to commonly asked ARRA questions to help our customers prepare for meeting ARRA and Meaningful Use. The Frequently Asked Questions are organized by Meaningful Use-related topics below.

Please utilize the Email Subscribe to This Page functionality [envelope icon in top right corner] to ensure you are always aware of the latest ARRA/ Meaningful Use FAQ's from MEDITECH. Please note, you will only get notified on the pages that you actually subscribe to. We recommend subscribing to this page.

Please click on the link(s) below to see all of the FAQ's for any given topic:

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<th>Active Medication List updated 08/10/11</th>
<th>e-Prescribing updated 02/05/14</th>
<th>Problem List updated 04/07/14</th>
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<td>Advance Directives updated 08/11/11</td>
<td>EHR Incentive Program Audits updated 11/18/13</td>
<td>Protect Electronic Health Information updated 10/23/14</td>
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<td>Imaging Results updated 02/05/14</td>
<td>Quality Reporting updated 10/07/15</td>
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<td>Infobutton updated 06/19/14</td>
<td>Record Demographics updated 08/22/14</td>
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<td>Laboratory Results to Ordering Provider updated 04/29/13</td>
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Below we have provided links to CMS and ONC's Frequently Asked Questions areas. In addition, be sure to check out MEDITECH's 6.0 Client/Server MAGIC Best Practices pages which provide detailed documentation and reports to help customers meet ARRA functional and clinical quality measures and achieve maximum ARRA reimbursements.

Can't find the information you are looking for? Send an e-mail to the ARRA group at MEDITECH and please include as much detail as you can regarding your question.
ARRA RESOURCES
Learn how to make Meaningful Use a reality.

ARRA FAQs
ARRA Bulletin Board
EHR Incentive Program Audit
Certification
Eligible Professionals ARRA Resources
Eligible Hospitals ARRA Best Practices

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Quality (Coming Soon)
Advancing Care Information (Coming Soon)
Improvement Activities
2014 Edition Certification

MEDITECH's inpatient and ambulatory products are 2014 Edition compliant and have been certified by the Drummond Group, an ONC-ACB, in accordance with the applicable certification criteria adopted by the Secretary of Health and Human Services. This certification does not represent an endorsement by the U.S. Department of Health and Human Services.

MEDITECH's Costs and Limitations Disclosure statement applies to all inpatient and ambulatory products listed below.

Surveillance is a central component of the Office of National Coordinator (ONC) Health IT Certification program and is in place to ensure the certified software continues to comply with the criteria to which it was certified.

MAGIC 2014 Edition

COMPLETE EHR INPATIENT

Please choose the Complete EHR Inpatient ONLY if you used 100% MEDITECH certified solutions to meet Meaningful Use.

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<th>MEDITECH MAGIC Electronic Health Record v.5.66 (05/16/13)</th>
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Eligible Hospitals

Best Practices

Objectives Documents & Reports

Clinical Quality Measure Documents and Reports
To select the appropriate specification use the document
Getting Started with Clinical Quality Measures

Useful Links
IMO Resources
UMLS Licensing for Clinical Quality Measures
CMS Issues RFI on Inpatient Quality Reporting Readiness Beyond Meaningful Use
CMS Resources

- **Stage 3 Final Rule** - October 2015
- **Stage 3 Modified Rule** - November 2016
- **Medicaid Stage 3 Specification Sheets**
- **Medicaid Stage 3 Program Requirements**
- **Medicare & Dual-Eligible Stage 3 Specification Sheets**
- **Medicare & Dual-Eligible Stage 3 Program Requirements**
- **Stage 3 Measure Tables for EHs and CAHs** (Medicare/Dual-eligible)
- **Centralized Repository Webpage**
Questions?
<table>
<thead>
<tr>
<th>Objective Name</th>
<th>Measure Name</th>
<th>Medicaid</th>
<th>Medicare &amp; Dual-Eligible</th>
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<td>Y/N Attestation</td>
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<td>2. Enable drug-drug / drug-allergy checking</td>
<td>2. Y/N attestation</td>
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<td>2. Lab Orders</td>
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<td></td>
<td>3. Imaging Orders</td>
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<td>e-Prescribing</td>
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<td>1. Patient Access</td>
<td>&gt;80%</td>
<td>1. &gt;50%</td>
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<td></td>
<td>2. Patient Education</td>
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<td>&gt;5%</td>
<td>1. One patient</td>
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<tr>
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<td>2. Secure Messaging</td>
<td>&gt;5%</td>
<td>2. &gt;5%</td>
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<td>3. PGHD</td>
<td>&gt;5%</td>
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<td>1. Send Summary of Care</td>
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<td>1. &gt;10%</td>
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<td>2. Request/Accept Summary of Care</td>
<td>&gt;40%</td>
<td>2. &gt;10%</td>
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<td></td>
<td>3. Clinical Information Reconciliation</td>
<td>&gt;80%</td>
<td>3. &gt;50%</td>
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<td>Public Health and Clinical Data Registry Reporting</td>
<td>Implement Public Health Interfaces</td>
<td>Report on 4 interfaces</td>
<td>Report on 3 interfaces</td>
</tr>
</tbody>
</table>
Protect Patient Health Information

Objective

Security Risk Analysis Measure

- All Participants: Complete or review one each CY
- New for Stage 3: *Implementation of appropriate technical, administrative, and physical safeguards*
- Third party vendor: Can be used to conduct analysis or review, however not required

Resources

- Technical staff to review security and implement corrections
- [Stage 3 Tip Sheet for Medicare & Dual-Eligible Hospitals](#)
- [Stage 3 Tip Sheet for Medicaid Hospitals](#)
Clinical Decision Support Objective

Clinical Decision Support Highlights


● Medicare & Dual-Eligible Hospitals: No longer required to report this objective

● No changes to objective measures
Clinical Decision Support Objective

Measure 1: Clinical Decision Support Interventions

● Implement 5 CDSi
● Application: Any clinical application
● Resources
  ○ Clinical staff to determine interventions
  ○ Technical staff to create notifications

Measure 2: Drug Interaction and Drug-Allergy Checks

● Implement functionality for entire EHR reporting period
● Application: Physician Ordering/PHA
● Resources
  ○ Clinical staff to build and train staff
Med, Lab and Diagnostic Imaging Order Measures

- Required for EHs/CAHs attesting to Medicaid Only
- Medicare and dual-eligible hospitals no longer required to report on this measure
- > 60% for each type of order
- *Lab and Imaging increase from 30%*
- Applications: POM/OM, PHA, LAB, ITS/RAD
- Resources
  - Clinical staff for build and staff training
Electronic Prescribing (eRX) Objective

e-Prescribing Measure

- **All Participants:** > 25% of discharge medications must be electronically transmitted, *Increase from 10%*
- Application: RXM
- Third party vendor: Dr First required
- Requires update to MEDITECH interface
- Resources
  - Clinical staff for build and training of staff
  - Technical staff to test and troubleshoot interface
Questions?
Measure 1: Provide Patient Access

- *Medicare & Dual-Eligible Hospitals*: 50% of patients have access to their health information via view, download, transmit and API applications
- *Medicaid Hospitals*: 80% of patients have access to their health information via view, download, transmit and API applications
- Patient health information must be made available to the patient within 36 hours of its availability to the provider.
Patient Electronic Access to Health Information Objective

**Provide Patient Access Highlights**

- Any 3rd party application selected by a patient to request their health information must meet the specifications of MEDITECH’s API - *options are not limited to specific 3rd party applications*

- Required: MT Portal, CCD with direct, API

- Third party vendor: HISP

- Resources:
  - Technical staff for interface/Direct/API testing and troubleshooting
  - Clinical staff for build
Application Programming Interface (API)

API Information

- A software-to-software interface
- MEDITECH is developing a set of web based APIs
- Will adhere to the Argonaut Project HL7 FHIR standards
- Infrastructure to support MU3 criteria will be included in the 2015 edition certified release - configuration required
- As MEDITECH finalizes our security strategy and completes testing with early adopters, guidance and recommendations will be shared.
Measure 2: Patient-Specific Education

Medicare & Dual-Eligible Hospitals

● 10% of patients receive education
● Education must be suggested by the CEHRT based on problem list or medication list & provided electronically

Medicaid Hospitals

● 35% of patients receive education
● Education must be suggested by the CEHRT based on problem list or medication list & provided electronically
Patient-Specific Education Measure Highlights

- Required: MT Portal and CCD with Direct
- Applications: NUR/PCS, EPS/EMR
- Third party vendor: Content, not required
- Resources: Clinical staff for build and training
- Non-MEDITECH portal will require an interface to send the education. Contact Marketing Consultant for information.
Questions?
Measure 1: View, Download Transmit (VDT)

- **Medicare & Dual-Eligible Hospitals**: At least 1 patient must VDT data or access data via API application

- **Medicaid Hospitals**: > 5% of patients must VDT data or access data via API application

Medicaid, Medicare & Dual-Eligible Hospitals

- Required: MT Portal, CCD with Direct, and API
- Patient selected application must meet EHR’s technical specs
- Resources - Technical staff for interface testing
Measure 2: Secure Messaging

- *All Participants*: > 5% of patients receive a message from a provider
- Required: MT Portal and CCD with direct
- Application: PCM, PHM
- Resources
  - Technical staff for interface testing & troubleshooting
  - Clinical staff for message composition
- Non-MEDITECH portal will require a 3rd party solution
Coordination of Care through Patient Engagement Objective

Measure 3: Patient Generated Health Data

- *All Participants*: > 5% of patients have health data
- Scanning solution OR enable providers to receive a message from a patient with a link to an internet address where the patient may have uploaded or documented their health information.
- Required: MT Portal/PCM or SCA
- Application: SCA or PCM/PHM
- Resources
  - Staff training will be needed
Questions?
Health Information Exchange Objective

Measure 1: Patient Care Record Exchange Measure

- **Medicare & Dual-Eligible Hospitals**: > 10% of patients have a CCD sent
- **Medicaid Hospitals**: > 50% of patients have a CCD sent

Medicaid, Medicare & Dual-Eligible Hospitals

- Required: CCD interface
- Application: Clinical and Administrative applications
- Third party vendor: HISP for Direct
- Resources: Clinical staff to build CCD, technical staff to test and troubleshoot interface, Direct, or other solution.
Measure 2: Request/Accept Patient Care Record Measure

- **Medicare & Dual-Eligible Hospitals**: > 10% of new patients have a CCD received and incorporated
- **Medicaid Hospitals**: > 40% of new patients have a CCD received and incorporated

Medicaid, Medicare & Dual-Eligible Hospitals

- Required: CCD interface or Direct
- Application: EPS/EMR, DPT/ITS
- Third party vendor: HISP for Direct messaging
- Resources: Clinical staff to train staff, technical staff to test and troubleshoot interface, Direct, or other solution
Health Information Exchange Objective

**Measure 3: Clinical Information Reconciliation Measure**

- *Medicare & Dual-Eligible Hospitals*: >50% of new patients have clinical information reconciled
- *Medicaid Hospitals*: >80% of new patients have clinical information reconciled

**Medicaid, Medicare & Dual-Eligible Hospitals**

- Problem list, home medications, medication allergies
- Application: RXM/AOM, EPS/EMR, PHA, PCM
- Third party vendor: IMO for problem list, FSV for allergies and home medications
- Resources: Clinical staff to train clinicians
Questions?
6 Public Health Options

- Immunization Registry Reporting Measure
- Syndromic Surveillance Reporting Measure
- Case Reporting Measure
- Public Health Registry Reporting Measure
- Clinical Data Registry Reporting Measure
- Electronic Reportable Laboratory Result Reporting Measure
Public Health Reporting Objective

Medicare & Dual-Eligible Hospitals
- Report on 3 measures or claim exclusions
- Exclusions do not count towards total

Medicaid Hospitals
- Report on 4 measures or claim exclusions
- Exclusions do not count towards total
Public Health Reporting Objective

Highlights

- For **new** interfaces - *contact your Marketing Consultant for pricing*
- Updates to previously licensed interfaces - *no additional cost*
- Resources
  - Clinical staff for data capture and mapping
  - Technical staff for interface testing and troubleshooting
Public Health Reporting Objective

MEDITECH’s Public Health Solutions

- Immunizations *(Update & Additional Interface)*
- Syndromic Surveillance *(Update)*
- Electronic Reportable Lab Results *(No Changes)*
- Electronic Case Reporting *(NEW - availability TBD)*
- Health Care Surveys *(NEW - availability TBD)*
- Antimicrobial Use & Resistance *(NEW - availability TBD)*

* CMS [Centralized Repository webpage](#) coming in 2017 - will include entities that accept electronic public health data.
Public Health Reporting Objective

Antimicrobial Use & Resistance (AUR) Highlights

- Reporting will not require an interface
- SQL report solution
- Requires manual mapping - *Yearly updates*
- SQL report generated monthly and upload to the National Healthcare Safety Network (NHSN) website
- Visit the [CDC/NHSN website](https://www.cdc.gov/nhsn/) for additional information & registration requirements
Questions?
Points to remember

Timeline and Changes

- Stage 3 required in 2018; full calendar year
- CQMs full year 2017 and 2018
- New rule changes: Medicare and dual-eligible no longer report on CPOE and CDSi objectives
- New rule changes: Thresholds lowered for Medicare and dual-eligible for Stage 3
Points to remember

Interface Considerations

- Application Programming Interface (API)
- Public Health
  - Syndromic update
  - Immunization update
  - New reports/interfaces
- eRx update
- CCD update
- Patient Education for Non-MEDITECH portal
Questions?
THANK YOU!