Eligible Hospital and Critical Access Hospital (CAH) Attestation Worksheet for Modified Stage 2 of the Medicare Electronic Health Record (EHR) Incentive Program in 2016

The Eligible Hospital and CAH Attestation Worksheet is for eligible hospitals and CAHs in the EHR Incentive Program in 2016. This worksheet allows them to enter their meaningful use data to use as a reference when attesting for the Medicare EHR Incentive Program in the CMS system. Please note that this worksheet differs in format and presentation when compared to the Attestation User Guide and Attestation 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: In 2016, there are alternate exclusions for Objective 3 – Computerized Provider Order Entry (measures 2 and 3), Objective 4 – e-Prescribing (eRx) and Objective 9 - Public Health Reporting (measure 3). 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. Eligible hospitals and CAHs must meet three public health measures.
- 2. **16** clinical quality measures (CQMs) across 3 domains.

EHR Reporting Period: For 2016, the EHR Reporting period for returning participants is a full calendar year (January 1 – December 31, 2016). For first-time participants who have not successfully demonstrated meaningful use in a prior year, the EHR reporting period is any continuous 90-day period within the calendar year.

Meaningful Use Objectives and Measures Must fill out for each of the 9 objectives.

#	Measure Information	Measure Values
1	Objective: Protect electronic protected health information (ePHI) 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.	
		YES NO
2	Objective: Use clinical decision support to improve performance on high-priority health 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 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 eligible hospital or CAH's scope of practice or patient population, the clinical decision support interventions must be related to high-priority health conditions. Measure 2: The eligible hospital or CAH has enabled and implemented the functionality for drug-drug and drug-allergy interaction checks for the entire EHR reporting period. Note: These measures only require a yes/no answer.	
	Measure 1	YES NO
	Measure 2	YES NO

#	Measure Information	Measure Values
 Objective: Use computerized provider order entry (CPOE) for meradiology orders directly entered by any licensed healthcare proforders into the medical record per state, local and professional generative. Measure 1: More than 60 percent of medication orders created hof the eligible hospital's or CAH's inpatient or emergency departed during the EHR reporting period are recorded using computerized betwee the eligible hospital's or CAH's inpatient or emergency department or EHR reporting period are recorded using computerized provione the EHR reporting period are recorded using computerized provione the EHR reporting period are recorded using computerized provione the EHR reporting period are recorded using computerized provione the EHR reporting period are recorded using computerized provione the EHR reporting period are recorded using computerized provione the EHR reporting period are recorded using computerized provione the EHR reporting period are recorded using computerized provione the EHR reporting period are recorded using computerized provione the EHR reporting period are recorded using computerized provione the EHR reporting period are recorded using computerized provione the EHR reporting period are recorded using computerized proviones the EHR reporting period are recorded using computerized proviones the EHR reporting period are recorded using computerized proviones the EHR reporting period are recorded using computerized proviones the EHR reporting period are recorded using computerized proviones the EHR reporting period are recorded using computerized proviones the EHR reporting period are recorded using computerized proviones the EHR reporting period are recorded using computerized proviones the EHR reporting period are recorded using computerized proviones the EHR reporting period are recorded using computerized proviones the EHR reporting period are recorded using computerized proviones the EHR reporting period are recorded using computerized proviones the EHR reporting p		ssional who can enter idelines. order to meet the y authorized providers ent (POS 21 or 23) provider order entry. authorized providers of t (POS 21 or 23) during er order entry. suthorized providers of t (POS 21 or 23) during er order entry. 1 in 2016 may claim an bjective for an EHR e 1 in 2016 may claim
	Does the alternative exclusion for Measure 2 apply to you? Does the alternative exclusion for Measure 3 apply to you?	Yes No Vo
	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 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 laboratory orders in the eligible hospital's or recorded using CPOE.Denominator 3 (Radiology): Number of orders in the denominator recorded using CPOE.Denominator 3 (Radiology): Number of orders in the denominator recorded using CPOE.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.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.	

#	Measure Information	Measure Values
4	 Objective: Generate and transmit permissible discharge prescription Measure: More than 10 percent of hospital discharge medication prescriptions (for new and changed prescriptions) are queried for transmitted electronically using CEHRT. Exclusion: Any eligible hospital or CAH that does not have an inter accept electronic prescriptions and is not located within 10 miles accepts electronic prescriptions at the start of their EHR reporting Alternate Exclusion: The eligible hospital or CAH may claim an exclusion between the start of their EHR reporting Alternate Exclusion: The eligible hospital or CAH may claim an exclusion between the start of the st	orders for permissible a drug formulary and nal pharmacy that can of any pharmacy that period. usion for the eRx were either scheduled astrate Stage 2 but did
	Does the exclusion apply to you?	Yes O No O
	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 care or provider of care or refers their patient to another provider summary care record for each transition of care or referral. Measure: The eligible hospital or CAH that transitions or refers the setting of care or provider of care must (1) use CEHRT to create a record; and (2) electronically transmit such summary to a receivint than 10 percent of transitions of care and referrals. 	of care provides a eir patient to another summary of care
	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 or CAH's inpatient or emergency department (POS 21 or 23) was the transferring or referring provider.	

		Measure Values
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) during the EHR reporting period are provided patient-specific education resources identified by CEHRT.	
	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). 	
	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.	

#	Measure Information	Measure Values
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 provided timely access to view online, download and transmit to a third party their health information. Measure 2: For an EHR reporting period in 2016, 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 his or her health information to a third party 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. 	
	Does the exclusion apply to you?	Yes O No O
	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.	

#	Measure Information	Measure Values
9	Objective: The eligible hospital or CAH is in active engagement wit	
	to submit electronic public health data from CEHRT except where	prohibited and in
(Objective 10 in the	accordance with applicable law and practice.	hospital or CALL is in
final rule;	Measure Option 1 – Immunization Registry Reporting : The eligible active engagement with a public health agency to submit immunized active engagement with a public health agency to submit immunized active engagement with a public health agency to submit immunized active engagement with a public health agency to submit immunized active engagement with a public health agency to submit immunized active engagement with a public health agency to submit immunized active engagement with a public health agency to submit immunized active engagement with a public health agency to submit immunized active engagement with a public health agency to submit immunized active engagement with a public health agency to submit immunized active engagement with a public health agency to submit immunized active engagement with a public health agency to submit immunized active engagement with a public health agency to submit immunized active engagement with a public health agency to submit immunized active engagement with a public health agency to submit immunized active engagement with a public health agency to submit immunized active engagement with a public health agency to submit immunized active engagement with a public health agency to submit immunized active engagement with a public health agency to submit immunized active engagement with a public health agency to submit immunized active engagement with a public health agency to submit immunized active engagement with a public health agency to submit immunized active engagement with a public health agency to submit immunized active engagement with a public health agency to submit immunized active engagement with agency to submit immun	
495.22	Measure Option 2 – Syndromic Surveillance Reporting: The eligible	
(e)(10)(ii)(C))	active engagement with a public health agency to submit syndron	-
	Measure Option 3 – Specialized Registry Reporting: The eligible hospital or CAH is in active	
	engagement to submit data to a specialized registry.	
	Measure Option 4 – Electronic Reportable Laboratory Result Reporting: The eligible	
	hospital or CAH is in active engagement with a public health agency to submit electronic	
	reportable laboratory (ELR) results.	
	Immunization Registry Reporting	
	Exclusion 1: Does not administer any immunizations to any of the data is collected by their jurisdiction's immunization registry or im	
	system during the EHR reporting period	
	Exclusion 2: 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	
	Exclusion 3: Operates in a jurisdiction where no immunization registry or immunization	
	information system has declared readiness to receive immunization data from the eligible	
	hospital or CAHs at the start of the EHR reporting period.	
	Syndromic Surveillance	
	Exclusion 4 : Does not have an emergency or urgent care department Exclusion 5 : Operates in a jurisdiction for which no public health agency is capable of	
	receiving electronic syndromic surveillance data from eligible hospitals or CAHs in the	
	specific standards required to meet the CEHRT definition at the start of the EHR reporting	
	period	1 0
	Exclusion 6: Operates in a jurisdiction where no public health ager	icy has declared
	readiness to receive syndromic surveillance data from eligible hos	pitals or CAHs at the
	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 FUD reporting period.	heir jurisdiction during
	the EHR reporting period; Exclusion 8: Operates in a jurisdiction for which no specialized reg	istry is capable of
	accepting electronic registry transactions in the specific standards	
	CEHRT definition at the start of the EHR reporting period.	required to meet the
	Exclusion 9: Operates in a jurisdiction where no specialized registr	y for which the eligible
	hospital or CAH is eligible has declared readiness to receive electro	
	transactions at the beginning of the EHR reporting period.	
	Electronic Reportable Laboratory Result Reporting	
	Exclusion 10: Does not perform or order laboratory tests that are in	reportable in their
	jurisdiction during the EHR reporting period.	· · · · · ·
	Exclusion 11: Operates in a jurisdiction for which no public health	
	accepting the specific ELR standards required to meet the CEHRT	definition at the start of

readiness to receive electronic reportable laboratory results from CAHs at the start of the EHR reporting period. Alternate Exclusion Alternate Exclusion for Measure 3: Eligible hospitals and CAHs sche	 Exclusion 12: Operates in a jurisdiction where no public health agency has declared readiness to receive electronic reportable laboratory results from eligible hospitals or CAHs at the start of the EHR reporting period. Alternate Exclusion Alternate Exclusion for Measure 3: Eligible hospitals and CAHs scheduled to be in Stage 1 or Stage 2 in 2016 may claim an alternate exclusion for measure 3 (specialized registry) 	
Does exclusion 1 apply to you?	Yes 🔿 No 🔿	
Does exclusion 2 apply to you?	Yes O No O	
Does exclusion 3 apply to you?	Yes O No O	
Does exclusion 4 apply to you?	Yes 🔿 No 🔿	
Does exclusion 5 apply to you?	Yes 🔿 No 🔿	
Does exclusion 6 apply to you?	Yes O No O	
Does exclusion 7 apply to you?	Yes O No O	
Does exclusion 8 apply to you?	Yes O No O	
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 O No O	
Are you claiming an alternate exclusion for Measure 3?	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 Re	gistry.	
Measure 3 - Specialized Registry Reporting (2)	YES NO	
Measure 3 - Specialized Registry Reporting (3)	YES NO	