

Eligible Hospital, Critical Access Hospital, and Dual-Eligible Hospital Attestation Worksheet for Stage 3 of the Medicare Promoting Interoperability Program in 2018

June 2018

This worksheet is a resource for eligible hospitals, critical access hospitals (CAHs), and dual-eligible hospitals to log their meaningful use measures before using CMS' Registration and Attestation system to attest to the Stage 3 program requirements of the Medicare Promoting Interoperability (PI) Program.

Note: 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, EHR technology must include the capability to record the numerator and denominator electronically and generate a report including the numerator, denominator, and resulting percentage.

Eligible hospitals, CAHs, and dual-eligible hospitals can enter their PI criteria in the blue boxes. Each measure's objective is included to help eligible hospitals, CAHs, and dual-eligible hospitals enter the correct criteria. Certain measures do not require a numerator and denominator, but rather a yes/no answer, and are marked accordingly. Measures with exclusions have the exclusion description listed in the measure information section.

Eligible hospitals, CAHs, and dual-eligible hospitals must report on the following:

1. **Six objectives**, including one consolidated public health reporting objective with measure options requiring eligible hospitals, CAHs, and dual-eligible hospitals to meet three public health measures.
2. Electronically report four self-selected clinical quality measures (CQMs) of the available 16 CQMs under the PI Programs. As established in the 2015 EHR Incentive Programs Final Rule (80 FR 62894), reporting CQMs by attestation will no longer be an option for eligible hospitals and CAHs starting with the reporting periods in CY 2018, except in circumstances in which electronic reporting is not feasible.

PI Reporting Period: The PI reporting period for all participants is a minimum of any continuous 90-day period within the calendar year. Check the [Landing page](#) for up-to-date information on the attestation deadline.

Promoting Interoperability Objectives and Measures

Must fill out for each of the six objectives including three public health measures for eligible hospitals, CAHs, and dual-eligible hospitals.

| # | Measure Information | Measure Values |
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| 1 | <p>Objective: Protect electronic protected health information created or maintained by the certified electronic health record technology (CEHRT) through the implementation of appropriate technical, administrative, and physical safeguards.</p> <p>Measure: <u>Security Risk Analysis</u>: Conduct or review a security risk analysis in accordance with the requirements under 45 CFR 164.308(a)(1), including addressing the security (including encryption) of data created or maintained by CEHRT in accordance with requirements under 45 CFR 164.312(a)(2)(iv) and 45 CFR 164.306(d)(3), implement security updates as necessary, and correct identified security deficiencies as part of the eligible hospital’s or CAH’s risk management process.</p> <p>Note: This measure only requires a yes/no answer.</p> | <p>YES <input type="checkbox"/> NO <input type="checkbox"/></p> |
| | Denominator: N/A | |
| | Numerator: N/A | |
| 2 | <p>Objective: Generate and transmit permissible discharge prescriptions electronically.</p> <p>Measure: <u>e-Prescribing</u>: More than 25 percent of hospital discharge medication orders for permissible prescriptions (for new and changed prescriptions) are queried for a drug formulary and transmitted electronically using CEHRT.</p> <p>Exclusion: Any eligible hospital or CAH that does not have an internal pharmacy that can accept electronic prescriptions and there are no pharmacies that accept electronic prescriptions within 10 miles at the start of their PI reporting period.</p> | <p>Yes <input type="radio"/> No <input type="radio"/></p> |
| | Does the exclusion apply to you? | |
| | <p>Denominator: Number of new or changed prescriptions written for drugs requiring a prescription in order to be dispensed other than controlled substances for patients discharged during the PI reporting period.</p> <p>Note: Providers would continue to have the option to include or not include controlled substances that can be electronically prescribed.</p> | |
| | <p>Numerator: The number of prescriptions in the denominator generated, queried for a drug formulary, and transmitted electronically.</p> | |
| 3 | <p>Objective: Provide patients (or patient authorized representatives) with timely electronic access to their health information and patient-specific education.</p> <p>Measure: <u>Provide Patient Access</u>: For more than 50 percent of all unique patients discharged from the eligible hospital or CAH inpatient or emergency department (POS 21 or 23) of an eligible hospital or CAH:</p> <ul style="list-style-type: none"> The patient (or the patient authorized representative) is provided timely access to view online, download, and transmit his or her health information; and | |



| # | Measure Information | Measure Values |
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| | <ul style="list-style-type: none"> The provider ensures the patient’s health information is available for the patient (or patient authorized representative) to access using any application of their choice that is configured to meet the technical specifications of the application programming interfaces (API) in the provider’s CEHRT. <p>Measure: <u>Patient-Specific Education</u>: The eligible hospital or CAH must use clinically relevant information from CEHRT to identify patient-specific educational resources and provide electronic access to those materials to more than 10 percent of unique patients seen by the EP or discharged from the eligible hospital or CAH inpatient or emergency department (POS 21 or 23) during the PI reporting period.</p> <p>Exclusion for both measures: Any eligible hospital or CAH that is located in a county that does not have 50 percent or more of their housing units with 4Mbps broadband availability according to the latest information available from the FCC at the start of the PI reporting period.</p> | |
| | Does the exclusion apply to you? | Yes <input type="radio"/> No <input type="radio"/> |
| | Denominator <u>Provide Patient Access</u> : The number of unique patients discharged from an eligible hospital's or CAH's inpatient or emergency department (POS 21 or 23) during the PI reporting period. | <input type="text"/> |
| | Numerator <u>Provide Patient Access</u> : The number of patients in the denominator (or patient authorized representative) who are provided timely access to health information to view online, download and transmit to a third party and to access using an application of their choice that is configured to meet the technical specifications of the API in the provider’s CEHRT. | <input type="text"/> |
| | Does the exclusion apply to you? | Yes <input type="radio"/> No <input type="radio"/> |
| | Denominator <u>Patient Specific Education</u> : The number of unique patients discharged from an eligible hospital’s or CAH’s inpatient or emergency department (POS 21 or 23) during the PI reporting period. | <input type="text"/> |
| | Numerator <u>Patient Specific Education</u> : The number of patients in the denominator who were provided electronic access to patient-specific educational resources using clinically relevant information identified from CEHRT during the PI reporting period. | <input type="text"/> |
| 4 | <p>Objective: Use CEHRT to engage with patients or their authorized representatives about the patient’s care.</p> <p>Note: Eligible hospitals and CAHs must attest to all three measures and meet the thresholds for at least two measures to meet the objective.</p> <p>Measure: <u>View, Download or Transmit (VDT)</u>: During the PI reporting period, at least one unique patient (or their authorized representative) discharged from the eligible hospital or CAH inpatient or emergency department (POS 21 or 23) actively engage with the EHR made accessible by the provider and one of the following:</p> <ul style="list-style-type: none"> VDT to a third party their health information; or | |



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| <ul style="list-style-type: none"> • Access their health information through the use of an API that can be used by applications chosen by the patient and configured to the API in the provider's CEHRT; or • A combination of (1) and (2). <p>Measure: <u>Secure Messaging</u>: For more than 5 percent of all unique patients discharged from the eligible hospital or CAH inpatient or emergency department (POS 21 or 23) during the PI 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).</p> <p>Measure: <u>Patient Generated Health Data</u>: Patient generated health data or data from a non-clinical setting is incorporated into the CEHRT for more than 5 percent of all unique patients discharged from the eligible hospital or CAH inpatient or emergency department (POS 21 or 23) during the PI reporting period.</p> <p>Exclusion for all three measures: Any eligible hospital or CAH will be excluded from the measure if it is located in a county that does not have 50 percent or more of their housing units with 4Mbps broadband availability according to the latest information available from the FCC at the start of the PI reporting period.</p> | |
| Does the exclusion apply to you? | Yes <input type="radio"/> No <input type="radio"/> |
| Denominator: <u>VDI</u>: Number of unique patients discharged from an eligible hospital or CAH inpatient or emergency department (POS 21 or 23) during the PI reporting period. | <input type="text"/> |
| Numerator: <u>VDI</u>: The number of unique patients (or their authorized representatives) in the denominator who have viewed online, downloaded, or transmitted to a third party the patient's health information during the PI reporting period and the number of unique patients (or their authorized representatives) in the denominator who have accessed their health information through the use of an API during the PI reporting period. | <input type="text"/> |
| Does the exclusion apply to you? | Yes <input type="radio"/> No <input type="radio"/> |
| Denominator: <u>Secure Messaging</u>: Number of unique patients discharged from an eligible hospital or CAH inpatient or emergency department (POS 21 or 23) during the PI reporting period. | <input type="text"/> |
| Numerator: <u>Secure Messaging</u>: The number of patients in the denominator for whom a secure electronic message is sent to the patient (or patient authorized representative) or in response to a secure message sent by the patient (or patient authorized representative), during the PI reporting period. | <input type="text"/> |
| Does the exclusion apply to you? | Yes <input type="radio"/> No <input type="radio"/> |
| Denominator: <u>Patient Generated Health Data</u>: Number of unique patients discharged from an eligible hospital or CAH inpatient or emergency department (POS 21 or 23) during the PI reporting period. | <input type="text"/> |
| Numerator: <u>Patient Generated Health Data</u>: The number of patients in the denominator for whom data from non-clinical | <input type="text"/> |



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| | settings, which may include patient generated health data, is captured through the CEHRT into the patient record during the PI reporting period. | |
| 5 | <p>Objective: The eligible hospital or CAH provides a summary of care record when transitioning or referring their patient to another setting of care, receives or retrieves a summary of care record upon the receipt of a transition or referral or upon the first patient encounter with a new patient, and incorporates summary of care information from other providers into their EHR using the functions of CEHRT.</p> <p>Note: Eligible hospitals and CAHs must attest to all three measures and meet the thresholds for at least two measures to meet the objective.</p> <p>Measure: <u>Send a Summary of Care:</u> For more than 10 percent of transitions of care and referrals, the eligible hospital or CAH that transitions or refers their patient to another setting of care or provider must (1) use CEHRT to create a summary of care record; and (2) electronically exchange the summary of care record.</p> <p>Exclusion for Send a Summary of Care measure: Any eligible hospital or CAH will be excluded from the measure if it is located in a county that does not have 50 percent or more of their housing units with 4Mbps broadband availability according to the latest information available from the FCC at the start of the PI reporting period.</p> <p>Measure: <u>Request/Accept Summary of Care:</u> For more than 10 percent of transitions or referrals received and patient encounters in which the provider has never before encountered the patient, the eligible hospital or CAH incorporates into the patient’s EHR an electronic summary of care document.</p> <p>Exclusions for Request/Accept Summary of Care measure: An eligible hospital or CAH may be excluded from the measure if any of the following apply:</p> <p>Exclusion 1: Request/Accept Summary of Care: Any eligible hospital or CAH for whom the total of transitions or referrals received and patient encounters in which the provider has never before encountered the patient, is fewer than 100 during the PI reporting period is excluded from this measure.</p> <p>Exclusion 2: Request/Accept Summary of Care: Any eligible hospital or CAH that is located in a county that does not have 50 percent or more of their housing units with 4Mbps broadband availability according to the latest information available from the FCC at the start of the PI reporting period.</p> <p>Measure: <u>Clinical Information Reconciliation:</u> For more than 50 percent of transitions or referrals received and patient encounters in which the provider has never before encountered the patient, the eligible hospital or CAH performs a clinical information reconciliation. The provider must implement clinical information reconciliation for the following three clinical information sets:</p> <ol style="list-style-type: none"> 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. 3) Current problem list - Review of the patient’s current and active diagnoses. <p>Exclusion for Clinical Information Reconciliation measure: Any eligible hospital or CAH for whom the total of transitions or referrals received and patient encounters in which the provider has never before encountered the patient is fewer than 100 during the PI reporting period is excluded from this measure.</p> | |



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| | Does the exclusion for <u>Send a Summary of Care</u> apply to you? | Yes <input type="radio"/> No <input type="radio"/> |
| | Denominator: <u>Send a Summary of Care</u> : Number of transitions of care and referrals during the PI 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. | <input type="text"/> |
| | Numerator: <u>Send a Summary of Care</u> : The number of transitions of care and referrals in the denominator where a summary of care record was created using CEHRT and exchanged electronically. | <input type="text"/> |
| | Does exclusion 1 for <u>Request/Accept Summary of Care</u> apply to you? | Yes <input type="radio"/> No <input type="radio"/> |
| | Does exclusion 2 for <u>Request/Accept Summary of Care</u> apply to you? | Yes <input type="radio"/> No <input type="radio"/> |
| | Denominator: <u>Request/Accept Summary of Care</u> : Number of patient encounters during the PI reporting period for which an eligible hospital or CAH was the receiving party of a transition or referral or has never before encountered the patient and for which an electronic summary of care record is available. | <input type="text"/> |
| | Numerator: <u>Request/Accept Summary of Care</u> : Number of patient encounters in the denominator where an electronic summary of care record received is incorporated by the provider into the CEHRT. | <input type="text"/> |
| | Does the exclusion for <u>Clinical Information Reconciliation</u> apply to you? | Yes <input type="radio"/> No <input type="radio"/> |
| | Denominator: <u>Clinical Information Reconciliation</u> : Number of transitions of care or referrals during the PI reporting period for which the eligible hospital or CAH inpatient or emergency department (POS 21 or 23) was the recipient of the transition or referral or has never before encountered the patient. | <input type="text"/> |
| | Numerator: <u>Clinical Information Reconciliation</u> : The number of transitions of care or referrals in the denominator where the following three clinical information reconciliations were performed: medication list, medication allergy list, and current problem list. | <input type="text"/> |
| 6 | <p>Objective: The eligible hospital or CAH is in active engagement with a public health agency or clinical data registry to submit electronic public health data in a meaningful way using CEHRT, except where prohibited, and in accordance with applicable law and practice.</p> <p>Measure: <u>Immunization Registry Reporting</u>: The eligible hospital or CAH 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>Note: This measure only requires a yes/no answer.</p> <p>Exclusions for Immunization Registry Reporting measure: Any eligible hospital or CAH meeting one or more of the following criteria may be excluded from the immunization registry reporting measure if the eligible hospital or CAH—</p> | |

Exclusion 1: Immunization Registry Reporting: Does not administer any immunizations to any of the populations for which data is collected by their jurisdiction’s immunization registry or immunization information system during the PI reporting period;

Exclusion 2: Immunization Registry Reporting: 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 PI reporting period; or

Exclusion 3: Immunization Registry Reporting: Operates in a jurisdiction where no immunization registry or immunization information system has declared readiness to receive immunization data as of six months prior to the start of the PI reporting period.

Measure: Syndromic Surveillance Reporting: The eligible hospital or CAH is in active engagement with a public health agency to submit syndromic surveillance data from an urgent care setting.

Note: This measure only requires a yes/no answer.

Syndromic Surveillance Reporting Exclusions: Any eligible hospital or CAH meeting one or more of the following criteria may be excluded from the syndromic surveillance reporting measure if the eligible hospital or CAH—

Exclusion 1: Syndromic Surveillance Reporting: Does not have an emergency or urgent care department;

Exclusion 2: Syndromic Surveillance Reporting: 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 PI reporting period; or

Exclusion 3: Syndromic Surveillance Reporting: Operates in a jurisdiction where no public health agency has declared readiness to receive syndromic surveillance data from eligible hospitals or CAHs as of six months prior to the start of the PI reporting period.

Measure: Electronic Case Reporting: The eligible hospital or CAH is in active engagement with a public health agency to submit case reporting of reportable conditions.

Note: This measure only requires a yes/no answer.

Electronic Case Reporting is required beginning in 2018.

Exclusions for Electronic Case Reporting measure: Any eligible hospital or CAH meeting one or more of the following criteria may be excluded from the case reporting measure if the eligible hospital or CAH—

Exclusion 1: Electronic Case Reporting: Does not treat or diagnose any reportable diseases for which data is collected by their jurisdiction’s reportable disease system during the PI reporting period;

Exclusion 2: Electronic Case Reporting: Operates in a jurisdiction for which no public health agency is capable of receiving electronic case reporting data in the specific standards required to meet the CEHRT definition at the start of the PI reporting period; or

Exclusion 3: Electronic Case Reporting: Operates in a jurisdiction where no public health agency has declared readiness to receive electronic case reporting data as of six months prior to the start of the PI reporting period.

Measure: Public Health Registry Reporting: The eligible hospital or CAH is in active engagement with a public health agency to submit data to public health registries.

Note: This measure only requires a yes/no answer.

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| <p>Exclusions for Public Health Registry Reporting measure: Any eligible hospital or CAH meeting at least one of the following criteria may be excluded from the public health registry reporting measure if the eligible hospital or CAH—</p> <p>Exclusion 1: <u>Public Health Registry Reporting</u>: Does not diagnose or directly treat any disease or condition associated with a public health registry in their jurisdiction during the PI reporting period;</p> <p>Exclusion 2: <u>Public Health Registry Reporting</u>: Operates in a jurisdiction for which no public health agency is capable of accepting electronic registry transactions in the specific standards required to meet the CEHRT definition at the start of the PI reporting period; or</p> <p>Exclusion 3: <u>Public Health Registry Reporting</u>: Operates in a jurisdiction where no public health registry for which the eligible hospital or CAH is eligible has declared readiness to receive electronic registry transactions as of six months prior to the start of the PI reporting period.</p> <p>Measure: <u>Clinical Data Registry Reporting</u>: The eligible hospital or CAH is in active engagement to submit data to a clinical data registry.</p> <p>Note: This measure only requires a yes/no answer.</p> <p>Exclusions for Clinical Data Registry Reporting measure: Any eligible hospital or CAH meeting at least one of the following criteria may be excluded from the clinical data registry reporting measure if the eligible hospital or CAH—</p> <p>Exclusion 1: <u>Clinical Data Registry Reporting</u>: Does not diagnose or directly treat any disease or condition associated with a clinical data registry in their jurisdiction during the PI reporting period;</p> <p>Exclusion 2: <u>Clinical Data Registry Reporting</u>: Operates in a jurisdiction for which no clinical data registry is capable of accepting electronic registry transactions in the specific standards required to meet the CEHRT definition at the start of the PI reporting period; or</p> <p>Exclusion 3: <u>Clinical Data Registry Reporting</u>: Operates in a jurisdiction where no clinical data registry for which the eligible hospital or CAH is eligible has declared readiness to receive electronic registry transactions as of six months prior to the start of the PI reporting period.</p> <p>Measure: <u>Electronic Reportable Laboratory Result Reporting</u>: The eligible hospital or CAH is in active engagement with a public health agency to submit electronic reportable laboratory results.</p> <p>Note: This measure only requires a yes/no answer.</p> <p>Exclusions for Electronic Reportable Laboratory Result Reporting measure: Any eligible hospital or CAH meeting one or more of the following criteria may be excluded from the electronic reportable laboratory result reporting measure if the eligible hospital or CAH—</p> <p>Exclusion 1: <u>Electronic Reportable Laboratory Result Reporting</u>: Does not perform or order laboratory tests that are reportable in their jurisdiction during the PI reporting period;</p> <p>Exclusion 2: <u>Electronic Reportable Laboratory Result Reporting</u>: Operates in a jurisdiction for which no public health agency is capable of accepting the specific ELR standards required to meet the CEHRT definition at the start of the PI reporting period; or</p> <p>Exclusion 3: <u>Electronic Reportable Laboratory Result Reporting</u>: Operates in a jurisdiction where no public health agency has declared readiness to receive electronic reportable laboratory results from an eligible hospital or CAH as of six months prior to the start of the PI reporting period.</p> | |
| <p>Does exclusion 1 for <u>Immunization Registry Reporting</u> apply to you?</p> | <p>Yes <input type="radio"/> No <input type="radio"/></p> |



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| Does exclusion 2 for <u>Immunization Registry Reporting</u> apply to you? | Yes <input type="radio"/> No <input type="radio"/> |
| Does exclusion 3 for <u>Immunization Registry Reporting</u> apply to you? | Yes <input type="radio"/> No <input type="radio"/> |
| Denominator: <u>Immunization Registry Reporting</u> : N/A | YES <input type="checkbox"/> NO <input type="checkbox"/> |
| Numerator: <u>Immunization Registry Reporting</u> : N/A | |
| Does exclusion 1 for <u>Syndromic Surveillance Reporting</u> apply to you? | Yes <input type="radio"/> No <input type="radio"/> |
| Does exclusion 2 for <u>Syndromic Surveillance Reporting</u> apply to you? | Yes <input type="radio"/> No <input type="radio"/> |
| Does exclusion 3 for <u>Syndromic Surveillance Reporting 2</u> apply to you? | Yes <input type="radio"/> No <input type="radio"/> |
| Denominator: <u>Syndromic Surveillance Reporting</u> : N/A | YES <input type="checkbox"/> NO <input type="checkbox"/> |
| Numerator: <u>Syndromic Surveillance Reporting</u> : N/A | |
| Does exclusion 1 for <u>Electronic Case Reporting</u> apply to you? | Yes <input type="radio"/> No <input type="radio"/> |
| Does exclusion 2 for <u>Electronic Case Reporting</u> apply to you? | Yes <input type="radio"/> No <input type="radio"/> |
| Does exclusion 3 for <u>Electronic Case Reporting</u> apply to you? | Yes <input type="radio"/> No <input type="radio"/> |
| Denominator Measure: <u>Electronic Case Reporting</u> : N/A | YES <input type="checkbox"/> NO <input type="checkbox"/> |
| Numerator Measure: <u>Electronic Case Reporting</u> : N/A | |
| Does exclusion 1 for <u>Public Health Registry Reporting</u> apply to you? | Yes <input type="radio"/> No <input type="radio"/> |
| Does exclusion 2 for <u>Public Health Registry Reporting</u> apply to you? | Yes <input type="radio"/> No <input type="radio"/> |
| Does exclusion 3 for <u>Public Health Registry Reporting</u> apply to you? | Yes <input type="radio"/> No <input type="radio"/> |
| Denominator: <u>Public Health Registry Reporting</u> : N/A | YES <input type="checkbox"/> NO <input type="checkbox"/> |
| Numerator: <u>Public Health Registry Reporting</u> : N/A | |
| Does exclusion 1 for <u>Clinical Data Registry Reporting</u> apply to you? | Yes <input type="radio"/> No <input type="radio"/> |
| Does exclusion 2 for <u>Clinical Data Registry Reporting</u> apply to you? | Yes <input type="radio"/> No <input type="radio"/> |
| Does exclusion 3 for <u>Clinical Data Registry Reporting</u> apply to you? | Yes <input type="radio"/> No <input type="radio"/> |
| Denominator: <u>Clinical Data Registry Reporting</u> : N/A | YES <input type="checkbox"/> NO <input type="checkbox"/> |
| Numerator: <u>Clinical Data Registry Reporting</u> : N/A | |
| Does exclusion 1 for <u>Electronic Reportable Laboratory Result Reporting</u> apply to you? | Yes <input type="radio"/> No <input type="radio"/> |
| Does exclusion 2 for <u>Electronic Reportable Laboratory Result Reporting</u> apply to you? | Yes <input type="radio"/> No <input type="radio"/> |
| Does exclusion 3 for <u>Electronic Reportable Laboratory Result Reporting</u> apply to you? | Yes <input type="radio"/> No <input type="radio"/> |
| Denominator: <u>Electronic Reportable Laboratory Result Reporting</u> : N/A | YES <input type="checkbox"/> NO <input type="checkbox"/> |



