

MEDICAID PROMOTING INTEROPERABILITY PROGRAM ELIGIBLE HOSPITALS AND CRITICAL ACCESS HOSPITALS OBJECTIVES AND MEASURES FOR 2019

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Eligible Hospital and Critical Access Hospital Objectives	
Protect Patient Health Information	Protect electronic protected health information (ePHI) created or maintained by the certified electronic health record (CEHRT) through the implementation of appropriate technical, administrative and physical safeguards.
Electronic Prescribing	Generate and transmit permissible discharge prescriptions electronically.
Clinical Decision Support	Implement clinical decision support (CDS) interventions focused on improving performance on high-priority health conditions.
Computerized Provider Order Entry	Use computerized provider order entry (CPOE) for medication, laboratory, and diagnostic imaging orders directly entered by any licensed healthcare professional, credentialed medical assistant, or a medical staff member credentialed to and performing the equivalent duties of a credentialed medical assistant, who can enter orders into the medical record per state, local, and professional guidelines.
Patient Electronic Access to Health Information	The eligible hospital or critical access hospital (CAH) provides patients (or patient authorized representative) with timely electronic access to their health information and patient-specific education.
Coordination of Care through Patient Engagement	Use CEHRT to engage with patients or their authorized representatives about the patient's care.
Health Information Exchange	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.
Public Health and Clinical Data Registry Reporting	The eligible hospital or CAH is in active engagement with a public health agency (PHA) or clinical data registry (CDR) to submit electronic public health data in a meaningful way using CEHRT, except where prohibited, and in accordance with applicable law and practice.

