CMS 2011 Electronic Health Record (EHR) Incentive Program Eligible Professionals Public Use File (PUF) Data Dictionary and Codebook

This is a provider-level file with the following variables. See the General Documentation for an overview of file contents, data source, information about suppression, and analytic utility.

EP_TYPE

This field indicates the type of the Eligibile Provider (EP).

Variable Value	Frequency	Frequency (%)
Chiropractors	266	0.919
Doctors of Dental Surgery or Dental Medicine	30	0.104
Doctors of Medicine or Osteopathy	26,150	90.319
Doctors of Optometry	998	3.447
Doctors of Podiatric Medicine	1,509	5.212

Note: Percentages may not add up to 100% due to rounding.

EP_SPEC

This variable indicates the specialty of the EP.

Variable Value	Frequency	Frequency (%)
ALLERGY/IMMUNOLOGY	168	0.580
ANESTHESIOLOGY	100	0.345
CARDIAC ELECTROPHYSIOLOGY	56	0.193
CARDIAC SURGERY	45	0.155
CARDIOVASCULAR DISEASE (CARDIOLOGY)	1,805	6.234
CHIROPRACTIC	266	0.919
COLORECTAL SURGERY	97	0.335
CRITICAL CARE (INTENSIVISTS)	45	0.155
DERMATOLOGY	438	1.513
DIAGNOSTIC RADIOLOGY	144	0.497
EMERGENCY MEDICINE	140	0.484
ENDOCRINOLOGY	379	1.309
FAMILY PRACTICE	6,371	22.005

Variable Value	Frequency	Frequency (%)
GASTROENTEROLOGY	1,136	3.924
GENERAL PRACTICE	175	0.604
GENERAL SURGERY	836	2.887
GERIATRIC MEDICINE	69	0.238
GYNECOLOGICAL/ONCOLOGY	39	0.135
HAND SURGERY	43	0.149
HEMATOLOGY	26	0.090
HEMATOLOGY/ONCOLOGY	343	1.185
INFECTIOUS DISEASE	159	0.549
INTERNAL MEDICINE	5,549	19.166
INTERVENTIONAL PAIN MANAGEMENT	136	0.470
INTERVENTIONAL RADIOLOGY	21	0.073
MEDICAL ONCOLOGY	100	0.345
NEPHROLOGY	576	1.989
NEUROLOGY	695	2.400
NEUROSURGERY	168	0.580
OBSTETRICS/GYNECOLOGY	1,381	4.770
OPHTHALMOLOGY	549	1.896
OPTOMETRY	977	3.374
ORTHOPEDIC SURGERY	974	3.364
OSTEOPATHIC MANIPULATIVE MEDICINE	25	0.086
OTOLARYNGOLOGY	605	2.090
PAIN MANAGEMENT	31	0.107
PEDIATRIC MEDICINE	96	0.332
PHYSICAL MEDICINE AND REHABILITATION	220	0.760
PLASTIC AND RECONSTRUCTIVE SURGERY	121	0.418
PODIATRY	1,529	5.281
PSYCHIATRY	183	0.632
PULMONARY DISEASE	558	1.927
RADIATION ONCOLOGY	49	0.169
RHEUMATOLOGY	292	1.009
SPORTS MEDICINE	15	0.052
SUPPRESSED	108	0.373
SURGICAL ONCOLOGY	24	0.083
THORACIC SURGERY	82	0.283
UROLOGY	830	2.867
VASCULAR SURGERY	179	0.618

CM1

This variable provides the percentage category implied by the numerator and denominator provided by the EP for CM 1. See Appendix A for more information on this variable.

Variable Value	Formatted Value	Frequency	Frequency (%)
-1	Excluded	4,134	14.278
4	Between 30-39.99%	826	2.853
5	Between 40-49.99%	947	3.271
6	Between 50-59.99%	1,326	4.580
7	Between 60-69.99%	1,588	5.485
8	Between 70-79.99%	2,359	8.148
9	Between 80-89.99%	3,690	12.745
10	Between 90-100%	14,083	48.641

Note: Percentages may not add up to 100% due to rounding.

CM2

This variable provides the response (Yes/No) provided by the EP for CM 2. See Appendix A for more information on this variable.

Variable Value	Formatted Value	Frequency	Frequency (%)
1	Yes	28,953	100.000

CM3

This variable provides the percentage category implied by the numerator and denominator provided by the EP for CM 3. See Appendix A for more information on this variable.

Variable Value	Formatted Value	Frequency	Frequency (%)
9	Between 80-89.99%	4,143	14.309
10	Between 90-100%	24,810	85.691

Note: Percentages may not add up to 100% due to rounding.

CM4

This variable provides the percentage category implied by the numerator and denominator provided by the EP for CM 4. See Appendix A for more information on this variable.

Variable Value	Formatted Value	Frequency	Frequency (%)
-1	Excluded	5,557	19.193
5	Between 40-49.99%	1,894	6.542
6	Between 50-59.99%	1,918	6.625
7	Between 60-69.99%	2,983	10.303
8	Between 70-79.99%	4,499	15.539
9	Between 80-89.99%	5,718	19.749
10	Between 90-100%	6,384	22.050

CM₅

This variable provides the percentage category implied by the numerator and denominator provided by the EP for CM 5. See Appendix A for more information on this variable.

Variable Value	Formatted Value	Frequency	Frequency (%)
9	Between 80-89.99%	2,273	7.851
10	Between 90-100%	26,680	92.149

Note: Percentages may not add up to 100% due to rounding.

CM6

This variable provides the percentage category implied by the numerator and denominator provided by the EP for CM 6. See Appendix A for more information on this variable.

Variable Value	Formatted Value	Frequency	Frequency (%)
9	Between 80-89.99%	3,124	10.790
10	Between 90-100%	25,829	89.210

Note: Percentages may not add up to 100% due to rounding.

CM7

This variable provides the percentage category implied by the numerator and denominator provided by the EP for CM 7. See Appendix A for more information on this variable.

Variable Value	Formatted Value	Frequency	Frequency (%)
6	Between 50-59.99%	960	3.316
7	Between 60-69.99%	1,454	5.022
8	Between 70-79.99%	2,247	7.761
9	Between 80-89.99%	4,420	15.266
10	Between 90-100%	19,872	68.635

CM8

This variable provides the percentage category implied by the numerator and denominator provided by the EP for CM 8. See Appendix A for more information on this variable.

Variable Value	Formatted Value	Frequency	Frequency (%)
-1	Excluded	2,183	7.540
6	Between 50-59.99%	936	3.233
7	Between 60-69.99%	1,177	4.065
8	Between 70-79.99%	2,099	7.250
9	Between 80-89.99%	4,560	15.750
10	Between 90-100%	17,998	62.163

Note: Percentages may not add up to 100% due to rounding.

CM9

This variable provides the percentage category implied by the numerator and denominator provided by the EP for CM 9. See Appendix A for more information on this variable.

Variable Value	Formatted Value	Frequency	Frequency (%)
-1	Excluded	154	0.532
6	Between 50-59.99%	1,102	3.806
7	Between 60-69.99%	1,671	5.771
8	Between 70-79.99%	2,574	8.890
9	Between 80-89.99%	4,772	16.482
10	Between 90-100%	18,680	64.518

CM10

This variable provides the response (Yes/No) provided by the EP for CM 10. See Appendix A for more information on this variable.

Variable Value	Formatted Value	Frequency	Frequency (%)
1	Yes	28,953	100.000

CM11

This variable provides the response (Yes/No) provided by the EP for CM 11. See Appendix A for more information on this variable.

Variable Value	Formatted Value	Frequency	Frequency (%)
1	Yes	28,953	100.000

CM12

This variable provides the percentage category implied by the numerator and denominator provided by the EP for CM 12. See Appendix A for more information on this variable.

Variable Value	Formatted Value	Frequency	Frequency (%)
-1	Excluded	19,264	66.535
6	Between 50-59.99%	174	0.601
7	Between 60-69.99%	322	1.112
8	Between 70-79.99%	258	0.891
9	Between 80-89.99%	477	1.647
10	Between 90-100%	8,458	29.213

Note: Percentages may not add up to 100% due to rounding.

CM13

This variable provides the percentage category implied by the numerator and denominator provided by the EP for CM 13. See Appendix A for more information on this variable.

Variable Value	Formatted Value	Frequency	Frequency (%)
-1	Excluded	399	1.378
6	Between 50-59.99%	5,696	19.673
7	Between 60-69.99%	4,225	14.593
8	Between 70-79.99%	4,212	14.548
9	Between 80-89.99%	4,972	17.173
10	Between 90-100%	9,449	32.636

CM14

This variable provides the response (Yes/No) provided by the EP for CM 14. See Appendix A for more information on this variable.

Variable Value	Formatted Value	Frequency	Frequency (%)
1	Yes	28,953	100.000

CM15

This variable provides the response (Yes/No) provided by the EP for CM 15. See Appendix A for more information on this variable.

Variable Value	Formatted Value	Frequency	Frequency (%)
1	Yes	28,953	100.000

MM1

This variable provides the response (Yes/No) provided by the EP for MM 1. See Appendix A for more information on this variable.

Variable Value	Formatted Value	Frequency	Frequency (%)
-1	Excluded	11,180	38.614
1	Yes	11,829	40.856
. [missing]	Not Selected	5,944	20.530

MM2

This variable provides the response (Yes/No) provided by the EP for MM 2. See Appendix A for more information on this variable.

Variable Value	Formatted Value	Frequency	Frequency (%)
-1	Excluded	6,809	23.517
1	Yes	2,056	7.101
. [missing]	Not Selected	20,088	69.381

Note: Percentages may not add up to 100% due to rounding.

MM3

This variable provides the response (Yes/No) provided by the EP for MM 3. See Appendix A for more information on this variable.

Variable Value	Formatted Value	Frequency	Frequency (%)
-1	Excluded	3,399	11.740
1	Yes	20,637	71.278
. [missing]	Not Selected	4,917	16.983

Note: Percentages may not add up to 100% due to rounding.

MM4

This variable provides the percentage category implied by the numerator and denominator provided by the EP for MM 4. See Appendix A for more information on this variable.

Variable Value	Formatted Value	Frequency	Frequency (%)
-1	Excluded	889	3.070
5	Between 40-49.99%	465	1.606
6	Between 50-59.99%	606	2.093
7	Between 60-69.99%	767	2.646
8	Between 70-79.99%	1,114	3.848
9	Between 80-89.99%	1,849	6.386
10	Between 90-100%	13,246	45.750
. [missing]	Not Selected	10,017	34.597

MM5

This variable provides the response (Yes/No) provided by the EP for MM 5. See Appendix A for more information on this variable.

Variable Value	Formatted Value	Frequency	Frequency (%)
1	Yes	20,765	71.720
. [missing]	Not Selected	8,188	28.280

Note: Percentages may not add up to 100% due to rounding.

MM6

This variable provides the percentage category implied by the numerator and denominator provided by the EP for MM 6. See Appendix A for more information on this variable.

Variable Value	Formatted Value	Frequency	Frequency (%)
-1	Excluded	114	0.394
3	Between 20-29.99%	924	3.191
4	Between 30-39.99%	908	3.136
5	Between 40-49.99%	810	2.798
6	Between 50-59.99%	714	2.466
7	Between 60-69.99%	490	1.692
8	Between 70-79.99%	430	1.485
9	Between 80-89.99%	478	1.651
10	Between 90-100%	1,499	5.177
. [missing]	Not Selected	22,586	78.009

Note: Percentages may not add up to 100% due to rounding.

MM7

This variable provides the percentage category implied by the numerator and denominator provided by the EP for MM 7. See Appendix A for more information on this variable.

Variable Value	Formatted Value	Frequency	Frequency (%)
-1	Excluded	346	1.195
2	Between 10-19.99%	830	2.867
3	Between 20-29.99%	674	2.328

Variable Value	Formatted Value	Frequency	Frequency (%)
4	Between 30-39.99%	577	1.993
5	Between 40-49.99%	646	2.231
6	Between 50-59.99%	675	2.331
7	Between 60-69.99%	630	2.176
8	Between 70-79.99%	414	1.430
9	Between 80-89.99%	474	1.637
10	Between 90-100%	5,949	20.547
. [missing]	Not Selected	22,586	78.009

MM8

This variable provides the percentage category implied by the numerator and denominator provided by the EP for MM 8. See Appendix A for more information on this variable.

Variable Value	Formatted Value	Frequency	Frequency (%)
2	Between 10-19.99%	2,956	10.210
3	Between 20-29.99%	2,086	7.205
4	Between 30-39.99%	1,520	5.250
5	Between 40-49.99%	1,263	4.362
6	Between 50-59.99%	1,318	4.552
7	Between 60-69.99%	1,292	4.462
8	Between 70-79.99%	1,196	4.131
9	Between 80-89.99%	1,180	4.076
10	Between 90-100%	1,969	6.801
. [missing]	Not Selected	14,173	48.952

Note: Percentages may not add up to 100% due to rounding.

MM9

This variable provides the percentage category implied by the numerator and denominator provided by the EP for MM 9. See Appendix A for more information on this variable.

Variable Value	Formatted Value	Frequency	Frequency (%)
-1	Excluded	786	2.715
6	Between 50-59.99	566	1.955
7	Between 60-69.99	704	2.432

Variable Value	Formatted Value	Frequency	Frequency (%)
8	Between 70-79.99	1,082	3.737
9	Between 80-89.99	2,009	6.939
10	Between 90-100	7,389	25.521
. [missing]	Not Selected	16,417	56.702

MM10

This variable provides the percentage category implied by the numerator and denominator provided by the EP for MM 10. See Appendix A for more information on this variable.

Variable Value	Formatted Value	Frequency	Frequency (%)
-1	Excluded	632	2.183
6	Between 50-59.99	214	0.739
7	Between 60-69.99	364	1.257
8	Between 70-79.99	373	1.288
9	Between 80-89.99	526	1.817
10	Between 90-100	2,147	7.415
. [missing]	Not Selected	24,697	85.300

Note: Percentages may not add up to 100 due to rounding.

EP_PMT_AMT

This variable contains total incentive payment made by Medicare EHR Program to the EP in 2011.

Variable Value ⁽¹⁾ (\$)	Frequency	Frequency (%)
0	13,516	46.683
18,000	15,437	53.317

Appendix A

Table 1. Measures in the CMS 2011 Medicare EHR Incentive Program Eligible Professionals PUF

Measure Name	Short Variable Name	Measure Category	Objective Title	Objective Description	Measure Description
Core Measure 1	CM1	Meaningful Use Core Measures	CPOE for Medication Orders	Use computerized provider order entry (CPOE) for medication orders directly entered by any licensed healthcare professional who can enter orders into the medical record per state, local and professional guidelines.	More than 30% of all unique patients with at least one medication in their medication list seen by the EP have at least one medication order entered using Computerized Provider Order Entry (CPOE).
Core Measure 2	CM2	Meaningful Use Core Measures	Drug Interaction Checks	Implement drug-drug and drug-allergy interaction checks	The EP has enabled this functionality for the entire EHR reporting period.
Core Measure 3	CM3	Meaningful Use Core Measures	Maintain Problem List	Maintain an up-to-date problem list of current and active diagnoses.	More than 80% of all unique patients seen by the EP have at least one entry or an indication that no problems are known for the patient recorded as structured data.
Core Measure 4	CM4	Meaningful Use Core Measures	ePrescribing	Generate and transmit permissible prescriptions electronically (eRx).	More than 40% of all permissible prescriptions written by the EP are transmitted electronically using certified EHR technology.
Core Measure 5	CM5	Meaningful Use Core Measures	Active Medication List	Maintain active medication list.	More than 80% of all unique patients seen by the EP have at least one entry (or an indication that the patient is not currently prescribed any medication) recorded as structured data.

Measure Name	Short Variable Name	Measure Category	Objective Title	Objective Description	Measure Description
Core Measure 6	СМ6	Meaningful Use Core Measures	Medication Allergy List	Maintain active medication allergy list.	More than 80% of all unique patients seen by the EP have at least one entry (or an indication that the patient has no known medication allergies) recorded as structured data.
Core Measure 7	CM7	Meaningful Use Core Measures	Record Demographics	Record all of the following demographics: Preferred language, Gender, Race, Ethnicity, Date of birth	More than 50% of all unique patients seen by the EP have demographics recorded as structured data.
Core Measure 8	CM8	Meaningful Use Core Measures	Record Vital Signs	Record and chart changes in vital signs:Height, Weight, Blood pressure, Calculate and display body mass index (BMI), Plot and display growth charts for children 2-20 years, including BMI.	More than 50% of all unique patients age 2 and over seen by the EP, height, weight and blood pressure are recorded as structure data.
Core Measure 9	CM9	Meaningful Use Core Measures	Record Smoking Status	Record smoking status for patients 13 years old or older.	More than 50% of all unique patients 13 years old or older seen by the EP have smoking status recorded as structured data.
Core Measure 10	CM10	Meaningful Use Core Measures	Clinical Quality Measures	Report ambulatory clinical quality measures to CMS.	Successfully report to CMS ambulatory clinical quality measures selected by CMS in the manner specified by the CMS.
Core Measure 11	CM11	Meaningful Use Core Measures	Clinical Decision Support Rule	Implement one clinical decision support rule relevant to specialty or high clinical priority along with the ability to track compliance with that rule.	Implement one clinical decision support rule.

Measure Name	Short Variable Name	Measure Category	Objective Title	Objective Description	Measure Description
Core Measure 12	CM12	Meaningful Use Core Measures	Electronic Copy of Health Information	Provide patients with an electronic copy of their health information (including diagnostic test results, problem list, medication lists, medication allergies), upon request.	More than 50% of all patients who request an electronic copy of their health information are provided it within 3 business days.
Core Measure 13	CM13	Meaningful Use Core Measures	Clinical Summaries	Provide clinical summaries for patients for each office visit.	Clinical summaries provided to patients for more than 50% of all office visits within 3 business days.
Core Measure 14	CM14	Meaningful Use Core Measures	Electronic Exchange of Clinical Information	Capability to exchange key clinical information (for example, problem list, medication list, allergies, diagnostic test results), among providers of care and patient authorized entities electronically.	Performed at least one test of certified EHR technology's capacity to electronically exchange key clinical information.
Core Measure 15	CM15	Meaningful Use Core Measures	Protect Electronic Health Information	Protect electronic health information created or maintained by the certified EHR technology through the implementation of appropriate technical capabilities.	Conduct or review a security risk analysis per 45 CFR 164.308 (a)(1) and implement security updates as necessary and correct identified security deficiencies as part of its risk management process.
Menu Measure 1	MM1	Meaningful Use Menu Measures	Immunization Registries Data Submission	Capability to submit electronic data to immunization registries or immunization information systems and actual submission in accordance with applicable law and practice.	Performed at least one test of certified EHR technology's capacity to submit electronic data to immunization registries and follow up submission if the test is successful (unless none of the immunization registries to which the eligible hospital or CAH submits such information have the capacity to receive the information electronically).

Measure Name	Short Variable Name	Measure Category	Objective Title	Objective Description	Measure Description
Menu Measure 2	MM2	Meaningful Use Menu Measures	Syndromic Surveillance Data Submission	Capability to submit electronic syndromic surveillance data to public health agencies and actual submission in accordance with applicable law and practice.	Performed at least one test of certified EHR technology's capacity to provide electronic syndromic surveillance data to public health agencies and follow-up submission if the test is successful (unless none of the public health agencies to which an EP submits such information have the capacity to receive the information electronically).
Menu Measure 3	ММ3	Meaningful Use Menu Measures	Drug Formulary Checks	Implement drug formulary checks	The EP has enabled this functionality and has access to at least one internal or external drug formulary for the entire EHR reporting period.
Menu Measure 4	MM4	Meaningful Use Menu Measures	Clinical Lab Test Results	Incorporate clinical lab-test results into EHR as structured data.	More than 40% of all clinical lab tests results ordered by the EP during the EHR reporting period whose results are in either in a positive/negative or numerical format are incorporated in certified EHR technology as structured data.
Menu Measure 5	MM5	Meaningful Use Menu Measures	Patient Lists	Generate lists of patients by specific conditions to use for quality improvement, reduction of disparities, research or outreach.	Generate at least one report listing patients of the EP with a specific condition.
Menu Measure 6	ММ6	Meaningful Use Menu Measures	Patient Reminders	Send reminders to patients per patient preference for preventive/follow up care.	More than 20% of all unique patients 65 years or older or 5 years old or younger were sent an appropriate reminder during the EHR reporting period.

Measure Name	Short Variable Name	Measure Category	Objective Title	Objective Description	Measure Description
Menu Measure 7	MM7	Meaningful Use Menu Measures	Patient Electronic Access	Provide patients with timely electronic access to their health information (including lab results, problem list, medication lists and allergies) within 4 business days of the information being available to the EP.	At least 10% of all unique patients seen by the EP are provided timely (available to the patient within four business days of being updated in the certified EHR technology) electronic access to their health information subject to the EP's discretion to withhold certain information.
Menu Measure 8	MM8	Meaningful Use Menu Measures	Patient- specific Education Resources	Use certified EHR technology to identify patient-specific education resources and provide those resources to the patient if appropriate.	More than 10% of all unique patients seen by the EP during the EHR reporting period are provided patient-specific education resources.
Menu Measure 9	ММ9	Meaningful Use Menu Measures	Medication Reconciliation	The EP who receives a patient from another setting of care or provider of care or believes an encounter is relevant should perform medication reconciliation.	The EP performs medication reconciliation for more than 50% of transitions of care in which the patient is transitioned into the care of the EP.
Menu Measure 10	MM10	Meaningful Use Menu Measures	Transition of Care Summary	The EP who transitions their patient to another setting of care or provider of care or refers their patient to another provider of care should provide summary of care record for each transition of care or referral.	The EP who transitions or refers their patient to another setting of care or provider of care provides a summary of care record for more than 50% of transitions of care and referrals.

Table 2. Numerators and Denominators for Measures in the CMS 2011 Medicare EHR Incentive Program Eligible Professionals PUF

Measure Name	Numerator Description	Denominator Description
Core Measure 1	The number of patients in the denominator that have at least one medication order entered using CPOE.	Number of unique patients with at least one medication in their medication list seen by the EP during the EHR reporting period.
Core Measure 3	Number of patients in the denominator who have at least one entry or an indication that no problems are known for the patient recorded as structured data in their problem list.	Number of unique patients seen by the EP during the EHR reporting period.
Core Measure 4	Number of prescriptions in the denominator generated and transmitted electronically.	Number of prescriptions written for drugs requiring a prescription in order to be dispensed other than controlled substances during the EHR reporting period.
Core Measure 5	Number of patients in the denominator who have a medication (or an indication that the patient is not currently prescribed any medication) recorded as structured data.	Number of unique patients seen by the EP during the EHR reporting period.
Core Measure 6	Number of unique patients in the denominator who have at least one entry (or an indication that the patient has no known medication allergies) recorded as structured data in their medication allergy list.	Number of unique patients seen by the EP during the EHR reporting period.
Core Measure 7	Number of patients in the denominator who have all the elements of demographics (or a specific exclusion if the patient declined to provide one or more elements or if recording an element is contrary to state law) recorded as structured data.	Number of unique patients seen by the EP during the EHR reporting period.
Core Measure 8	Number of patients in the denominator who have at least one entry of their height, weight and blood pressure are recorded as structured data.	Number of unique patients age 2 or over seen by the EP during the EHR reporting period.
Core Measure 9	Number of patients in the denominator with smoking status recorded as structured data.	Number of unique patients age 13 or older seen by the EP during the EHR reporting period.

Measure Name	Numerator Description	Denominator Description
Core Measure 12	Number of patients in the denominator who receive an electronic copy of their electronic health information within three business days.	Number of patients of the EP who request an electronic copy of their electronic health information four business days prior to the end of the EHR reporting period.
Core Measure 13	Number of office visits in the denominator for which a clinical summary of Is provided within three business days.	Number of office visits for the EP during the EHR reporting period.
Menu Measure 4	Number of lab test results whose results are expressed in a positive or negative affirmation or as a number which are incorporated as structured data.	Number of lab tests ordered during the EHR reporting period by the EP whose results are expressed in a positive or negative affirmation or as a number.
Menu Measure 6	Number of patients in the denominator who were sent the appropriate reminder.	Number of unique patients 65 years old or older or 5 years older or younger.
Menu Measure 7	Number of patients in the denominator who have timely (available to the patient within four business days of being updated in the certified EHR technology) electronic access to their health information online.	Number of unique patients seen by the EP during the EHR reporting period.
Menu Measure 8	Number of patients in the denominator who are provided patient education specific resources.	Number of unique patients seen by the EP during the EHR reporting period.
Menu Measure 9	Number of transitions of care in the denominator where medication reconciliation was performed.	Number of transitions of care during the EHR reporting period for which the EP was the receiving party of the transition.
Menu Measure 10	Number of transitions of care and referrals in the denominator where a summary of care record was provided.	Number of transitions of care and referrals during the EHR reporting period for which the EP was the transferring or referring provider.

Table 3. Exclusion Criteria for Measures in the CMS 2011 Medicare EHR Incentive Program Eligible Professionals PUF

Measure Name	Exclusion Description/Criteria	
Core Measure 1	Any EP who writes fewer than 100 prescriptions during the EHR reporting period would be excluded from this requirement.	
Core Measure 4	Any EP who writes fewer than 100 prescriptions during the EHR reporting period would be excluded from this requirement.	
Core Measure 8	An EP who sees no patients 2 years or older would be excluded from this requirement.	
Core Measure 8	An EP who believes all three vital signs of height, weight, and blood presure have no relevance to their scope of practice.	
Core Measure 9	An EP who sees no patients 13 years or older would be excluded from this requirement.	
Core Measure 12	An EP who has no requests from patients or their agents for an electronic copy of patient health information during the EHR reporting period would be excluded from this requirement.	
Core Measure 13	Any EP who has no office visits during the EHR reporting period would be excluded from this requirement.	
Menu Measure 1	An EP who does not perform immunizations during the EHR reporting period would be excluded from this requirement.	
Menu Measure 1	If there is no immunization registry that has the capacity to receive the information electronically, an EP would be excluded from this requirement.	
Menu Measure 2	If an EP does not collect any reportable syndromic information on their patients during the EHR reporting period, then the EP is excluded from this requirement.	
Menu Measure 2	If there is no public health agency that has the capacity to receive the information electronically, then the EP is excluded from this requirement.	
Menu Measure 3	Any EP who writes fewer than 100 prescriptions during the EHR reporting period can be excluded from this requirement.	
Menu Measure 4	Any EP who orders no lab tests whose results are either in a positive/negative or numeric format during the EHR reporting period would be excluded from this requirement.	
Menu Measure 6	Any EP who has no patients 65 years old or older or 5 years old or younger with records maintained using certified EHR technology is excluded from this requirement.	
Menu Measure 7	Any EP who neither orders nor creates lab tests or information that would be contained in the problem list, medication list, or medication allergy list during the EHR reporting period would be excluded from this requirement.	
Menu Measure 9	An EP who was not on the receiving end of any transition of care during the EHR reporting period would be excluded from this requirement.	
Menu Measure 10	An EP who does not transfer a patient to another setting or refer a patient to another provider during the EHR reporting period would be excluded from this requirement.	