E-Guide

Meaningful Use for Dummies: Deciphering Stage 2 Requirements

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Final meaningful use stage 2 criteria indicates
*stronger focus on patient engagement, HIE. Check
out this chart to find out more about the meaningful
use program.*

Final Meaningful Use Stage 2 Criteria
By Jean DerGurahian

The Centers for Medicare & Medicaid Services (CMS) released the final
meaningful use stage 2 rule in late August 2012. The rule describes
requirements and criteria that eligible providers and hospitals must meet if
they want to participate in the incentive program and receive payments for
the use of electronic health record (EHR) systems.

While mostly unchanged from the proposed stage 2 rule, the final criteria
indicate a sharper focus on patient engagement and promote information
exchange among patients and providers, as well as physicians and hospitals.

One noticeable difference from the approach federal officials have taken to
stage 1 will occur in 2014, which is when the stage 2 program begins. In that
year, providers will have to begin using technology that is certified to new
certification and standards final rule, which has been defined by the Office of
the National Coordinator for Health IT (ONC). Vendors will be required to
make upgrades to their EHR systems and other IT to ensure it meets test
criteria.

Because all providers -- whether they are still implementing stage 1 criteria or
beginning stage 2 -- will be required to use this upgraded technology, for the
year 2014 they will only have to attest to meaningful use for a three-month
period, instead of the full year.

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Core meaningful use stage 2 criteria
Participants must meet, or qualify for an exclusion to, all of these
requirements. Eligible providers must meet 17 core measures and select
three out of six menu criteria. Eligible hospitals must meet 16 core measures
and choose three out of six menu criteria.

Requirement	EPs	Hospitals	Change from Stage 1
Use a computerized physician order entry (CPOE) system.	Use for more than 60% of medication, 30% laboratory, and 30% radiology orders.	Use for more than 60% of medication, 30% laboratory, and 30% radiology orders.	Increases from 30% of all orders.
Generate and transmit permissible prescriptions electronically (e-prescribing).	Using certified EHR technology, write and transmit electronically more than 50% of all permissible prescriptions.	N/A.	Increases from 40% of all prescriptions.
Record demographic information.	Record preferred language, insurance type, gender, race, ethnicity and date of birth for more than 80% of all unique patients.	Record preferred language, insurance type, gender, race, ethnicity, date of birth and (if applicable) date of death for more than 80% of all unique patients.	Increases from 50% of all patients.
Record and chart changes in vital signs.	For more than 80% of all unique patients 2 years of age and older,	For more than 80% of all unique patients 2 years of age and older,	Increases from 50% of all patients.

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Requirement	EPs	Hospitals	Change from Stage 1
	record height, weight and blood pressure; calculate and display body mass index, and plot and display growth charts for patients 2 years old to 20 years old, including BMI.	record height, weight and blood pressure; calculate and display body mass index, and plot and display growth charts for patients 2 years old to 20 years old, including BMI.	
Record smoking status for patients 13 years old or older.	Record for more than 80% of all unique patients.	Record for more than 80% of all unique patients.	Increases from 50% of all patients.
Use CDS to improve performance on high-priority health conditions.	Implement five clinical decision support interventions related to five or more clinical quality measures. In addition, enable and implement functionality for drug-drug and drug-allergy interaction checks.	Implement five clinical decision support interventions related to five or more clinical quality measures. In addition, enable and implement functionality for drug-drug and drug-allergy interaction checks.	Moves beyond simply implementing rule relevant to specialty or high clinical priority/ hospital condition.
Incorporate clinical lab-test results into EHR systems as structured data.	Incorporate into certified EHR technology more than 55% of all clinical lab-test results that are	Incorporate into certified EHR technology more than 55% of all clinical lab-test results that are	Moves from menu to core requirements. Increases from 40% of all test results.

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Requirement	EPs	Hospitals	Change from Stage 1
	given in a positive/negative or numerical format.	given in a positive/negative or numerical format.	
Generate lists of patients by specific conditions to use for quality improvement, reduction of disparities, and outreach.	Generate at least one report listing patients with a specific condition.	Generate at least one report listing patients with a specific condition.	Moves from menu to core requirements.
Send electronic reminders to patients per patient preference for preventive or follow-up care.	Send reminders to more than 10% of all unique patients seen at least twice by the EP in the 24 months prior to the reporting period.	N/A.	Moves from menu to core requirements.
Track medication orders using electronic medication administration recording.	N/A.	Track more than 10% of medication orders.	New.
Provide patients with timely electronic access to their health information.	Provide electronic access to the health information of more than 50% of all unique patients. See that more than 5% of	Provide online access to health information for more than 50% of patients, with more than 5% actually accessing the	Moves from menu to core requirements. Increases from 10% of all patients.

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Requirement	EPs	Hospitals	Change from Stage 1
	all unique patients view, download, or transmit to a third party their protected health information (PHI).	information.	
Let view online, download, and transmit information about a hospital admission.	N/A.	Offer this feature to more than 50% of patients. See that more than 5% of all unique patients view, download, or transmit to a third party their PHI.	New.
Provide clinical summaries for patients for each office visit.	Provide summaries for more than 50% of office visits.	N/A.	New.
Use EHR technology to identify patient-specific education resources, and provide those to the patient as appropriate.	Provide to more than 10% of patients.	Provide to more than 10% of patients.	Moves from menu to core requirements.
Provide online, secure patient messaging.	Ensure more than 5% send secure messages to their EP.	N/A.	New.
Perform medication	Do so for more than 50% of	Do so for more than 50% of	Moves from menu to core

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Requirement	EPs	Hospitals	Change from Stage 1
reconciliation at relevant encounters and at each transition of care.	encounters and transitions.	encounters and transitions.	requirements.
Provide summary care record for each transition of care and referral.	Do so for more than 50% of transitions and referrals. For 10% of transitions and referrals, transmission should be electronic, and at least one sent to a recipient using a different certified EHR technology vendor than the sender or successfully testing with CMS test EHR.	Do so for at least 50% of transitions and referrals. For 10% of transitions and referrals, transmission should be electronic, and at least one sent to a recipient using a different certified EHR technology vendor than the sender or successfully testing with CMS test EHR.	Moves from menu to core requirements. Adds interoperability requirement.
Submit electronic data to immunization registries, and actual submission where required and accepted.	Successfully submit data.	Successfully submit data.	Moves from menu to core requirements. Moves beyond simply testing the EHR system.
Provide electronic submission of reportable lab-test	N/A.	Successfully submit data.	New.

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Requirement	EPs	Hospitals	Change from Stage 1
results (as required by state or local law) to public health agencies, and actual submission where it can be received.			
Provide electronic syndromic surveillance data to public health agencies and actual transmission according to applicable law and practice.	N/A.	Successfully submit data.	Moves from menu to core requirements.
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 and implement security updates as necessary.	Conduct or review a security risk analysis and implement security updates as necessary.	No change.

Menu meaningful use stage 2 criteria

Hospitals and EPs both must choose three out of six menu criteria.

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Requirement	EPs	Hospitals	Change from Stage 1
Record advance directives for patients 65 years of age or older.	N/A.	Do so for more than 50% of patients 65 years of age or older.	No change.
Make imaging results and information.	Make more than 20% of all scans and tests whose result is an image accessible through certified EHR technology.	Make more than 20% of all scans and tests whose result is an image accessible through certified EHR technology.	New.
Record patient family health history as structured data.	Enter data for one or more first-degree relatives for more than 20% of all unique patients.	Enter data for one or more first-degree relatives for more than 20% of all unique patients.	New.
Generate and transmit permissible prescriptions electronically (e-prescribing).	N/A.	Compare more than 10% of hospital discharge medication orders for permissible prescriptions to at least one drug formulary and transmit the order electronically.	New.
Provide electronic syndromic surveillance data to public health agencies and actual	Successfully submit data.	N/A.	No change.

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Requirement	EPs	Hospitals	Change from Stage 1
transmission according to applicable law and practice.			
Identify and report cancer cases to a state cancer registry, except where prohibited, and in accordance with applicable law and practice.	Successfully submit data.	N/A.	New.
Identify and report specific cases to a specialized registry (other than a cancer registry), except where prohibited, and in accordance with applicable law and practice.	Successfully submit data.	N/A.	New.
Progress notes.	Enter electronic progress notes for more than 30% of unique patients.	Enter electronic progress notes for more than 30% of unique patients.	New.
Provide structured electronic lab results to EPs.	N/A.	Provide these for more than 20% of physicians.	New.

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Changes to Meaningful Use Stage 1 Criteria Under the New Rules

By Jean DerGurahian

CPOE: Denominator will mean the number of orders during the EHR reporting period (option begins in 2013)

Vital signs: Record blood pressure starting at age 3, no age limit for height/weight data. Blood pressure is separated from height/weight exclusions (option begins in 2013, required in 2014 and beyond)

Testing of health information exchange: Requirement is removed effective 2013.

Online access: Provide patients the ability to view online, download and transmit their health information (begins in 2014).
Public health: Add "except where prohibited" to current objectives for immunizations, reportable labs and syndromic surveillance. This clarifies the measure to meet varying state and local laws regarding what information may and may not be reported publicly.

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