

Eligible Hospital, Critical Access Hospital, and Dual-Eligible Hospital Attestation Worksheet for Modified Stage 2 of the Medicare Promoting Interoperability Program in 2018

July 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 the [QualityNet system Secure Portal](#) to attest to the Modified Stage 2 program requirements of the Medicare Promoting Interoperability (PI) Program for a PI reporting period in 2018.

Note: This worksheet differs in format and presentation when compared with the User Guide and portal.

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 for these measures. However, eligible hospitals, CAHs, and dual-eligible hospitals may use additional data to calculate numerators and denominators and to generate reports on all measures for the objectives.

Eligible hospitals, CAHs, and dual-eligible hospitals may enter their meaningful use 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 as such. 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. **Seven objectives**, including one consolidated public health reporting objective requiring eligible hospitals, CAHs, and dual-eligible hospitals to meet at least three public health measures.
2. Electronically report four self-selected 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.

Meaningful Use Objectives and Measures

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

#	Measure Information	Measure Values
1	<p>Objective: Protect electronic protected health information (ePHI) created or maintained by the certified electronic health record technology (CEHRT) through the implementation of appropriate technical capabilities.</p> <p>Measure: <u>Security Risk Analysis:</u> 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 CEHRT 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 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 10 percent of hospitals 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 is not located within 10 miles of any pharmacy that accepts electronic prescriptions 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?	
	Denominator: Number of new or changed permissible prescriptions written for drugs requiring a prescription in order to be dispensed for patients discharged during the PI Reporting Period.	
	Numerator: The number of prescriptions in the denominator generated, queried for a drug formulary, and transmitted electronically.	
3	<p>Objective: The eligible hospital or CAH who transitions their patient to another setting of care or provider or refers their patient to another provider provides a summary care record for each transition of care or referral.</p> <p>Measure: <u>Health Information Exchange:</u> 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 transmit such summary to a receiving provider for more than 10 percent of transitions of care and referrals.</p>	<p><input type="text"/></p>
	Denominator: Number of transitions of care and referrals during the PI reporting period for which the eligible hospitals or CAHs	

#	Measure Information	Measure Values
	inpatient or emergency department (POS 21 or 23) was the transferring or referring provider.	
	Numerator: 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"/>
4	<p>Objective: Use clinically relevant information from CEHRT to identify patient-specific education resources and provide those resources to the patient.</p> <p>Measure: <u>Patient-Specific Education:</u> More than 10 percent of all unique patients admitted to the eligible hospitals or CAHs inpatient or emergency department (POS 21 or 23) during the PI reporting period are provided patient-specific education resources identified by CEHRT.</p>	
	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.	<input type="text"/>
	Numerator: Number of patients in the denominator who are subsequently provided patient-specific education resources identified by CEHRT.	<input type="text"/>
5	<p>Objective: The eligible hospital or CAH that receives a patient from another setting of care or provider or believes an encounter is relevant performs medication reconciliation.</p> <p>Measure: <u>Medication Reconciliation:</u> 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 hospitals or CAHs inpatient or emergency department (POS 21 or 23).</p>	
	Denominator: Number of transitions of care during the EHR reporting period for which the eligible hospitals or CAHs inpatient or emergency department (POS 21 or 23) was the receiving party of the transition.	<input type="text"/>
	Numerator: The number of transitions of care in the denominator where medication reconciliation was performed.	<input type="text"/>
6	<p>Objective: Provide patients the ability to view online, download, and transmit their health information within 36 hours of hospital discharge.</p> <p>Measure: <u>Provide Patient Access:</u> 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.</p> <p>Measure: <u>View, Download, or Transmit (VDT):</u> At least 1 patient (or patient-authorized representative) who is discharged from the inpatient or emergency department (POS 21 or 23) of an eligible hospital or CAH during the PI reporting period views, downloads, or transmits to a third party his or her health information during the PI reporting period.</p>	



#	Measure Information	Measure Values
	<p>VDT Exclusion: 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 PI reporting period.</p>	
	<p>Denominator Provide Patient Access: Number of unique patients discharged from an eligible hospital or CAH’s inpatient or emergency department (POS 21 or 23) during the PI reporting period.</p>	<input type="text"/>
	<p>Numerator Provide Patient Access: The number of patients in the denominator who have access to VDT their health information within 36 hours after the information is available to the eligible hospital or CAH.</p>	<input type="text"/>
	<p>Does the exclusion for VDT apply to you?</p>	<p>Yes <input type="radio"/> No <input type="radio"/></p>
	<p>Denominator VDT: Number of unique patients discharged from the inpatient or emergency department (POS 21 or 23) of the eligible hospital or CAH during the PI reporting period.</p>	<input type="text"/>
	<p>Numerator VDT: The number of patients (or patient-authorized representatives) in the denominator who view, download or transmit to a third party their health information.</p>	<input type="text"/>
<p>7</p>	<p>Objective: The eligible hospital or CAH is in active engagement with a public health agency to submit electronic public health data from 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.</p> <p>Note: This measure only requires a yes/no answer.</p> <p>Immunization Registry Reporting Exclusions: 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> <p>Exclusion 1: <u>Immunization Registry Reporting:</u> Does not administer any immunizations to any of the populations for which data is collected by its jurisdiction's immunization registry or immunization information system during the PI reporting period;</p> <p>Exclusion 2: <u>Immunization Registry Reporting:</u> 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</p> <p>Exclusion 3: <u>Immunization Registry Reporting:</u> Operates in a jurisdiction where no immunization registry or immunization information system has declared readiness to receive immunization data from the eligible hospital or CAH at the start of the PI reporting period.</p> <p>Measure 2: <u>Syndromic Surveillance Reporting:</u> The eligible hospital or CAH is in active engagement with a public health agency to submit syndromic surveillance data.</p> <p>Note: This measure only requires a yes/no answer</p> <p>Syndromic Surveillance Reporting Exclusions: Any eligible hospital or CAH meeting</p>	



#	Measure Information	Measure Values
	<p>one or more of the following criteria may be excluded from the syndromic surveillance reporting measure if the eligible hospital or CAH—</p> <p>Exclusion 1 <u>Syndromic Surveillance Reporting</u>: Does not have an emergency or urgent care department;</p> <p>Exclusion 2 <u>Syndromic Surveillance Reporting</u>: 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</p> <p>Exclusion 3 <u>Syndromic Surveillance Reporting</u>: Operates in a jurisdiction where no public health agency has declared readiness to receive syndromic surveillance data from eligible hospitals or CAHs at the start of the PI reporting period.</p> <p>Measure 3: <u>Specialized Registry Reporting</u>: The eligible hospital or CAH is in active engagement to submit data to a specialized registry.</p> <p>Note: This measure only requires a yes/no answer</p> <p>Specialized Registry Reporting Exclusions: Any eligible hospital or CAH meeting at least one of the following criteria may be excluded from the specialized registry reporting measure if the eligible hospital or CAH—</p> <p>Exclusion 1 <u>Specialized Registry Reporting</u>: Does not diagnose or treat any disease or condition associated with or collect relevant data that is required by a specialized registry in their jurisdiction during the PI reporting period;</p> <p>Exclusion 2 <u>Specialized Registry Reporting</u>: Operates in a jurisdiction for which no specialized 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>Specialized Registry Reporting</u>: Operates in a jurisdiction where no specialized registry for which the eligible hospital or CAH is eligible has declared readiness to receive electronic registry transactions at the beginning of the PI reporting period.</p> <p>Measure 4: <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 (ELR) results.</p> <p>Note: This measure only requires a yes/no answer</p> <p>ELR Result Reporting Exclusions: Any eligible hospital or CAH meeting one or more of the following criteria may be excluded from the ELR result reporting measure if the eligible hospital or CAH—</p> <p>Exclusion 1 <u>ELR 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>ELR 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>ELR Result Reporting</u>: 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 PI reporting period.</p> <p>Note: This measure only requires a yes/no answer</p>	
	Does exclusion 1 for Immunization Registry Reporting apply to you?	Yes <input type="radio"/> No <input type="radio"/>



#	Measure Information	Measure Values
	Does exclusion 2 for Immunization Registry Reporting apply to you?	Yes <input type="radio"/> No <input type="radio"/>
	Does exclusion 3 for Immunization Registry Reporting apply to you?	Yes <input type="radio"/> No <input type="radio"/>
	Denominator Immunization Registry Reporting: N/A	YES <input type="checkbox"/> NO <input type="checkbox"/>
	Numerator Immunization Registry Reporting: N/A	
	Does exclusion 1 for Syndromic Surveillance Reporting apply to you?	Yes <input type="radio"/> No <input type="radio"/>
	Does exclusion 2 for Syndromic Surveillance Reporting apply to you?	Yes <input type="radio"/> No <input type="radio"/>
	Does exclusion 3 for Syndromic Surveillance Reporting apply to you?	Yes <input type="radio"/> No <input type="radio"/>
	Denominator Syndromic Surveillance Reporting: N/A	YES <input type="checkbox"/> NO <input type="checkbox"/>
	Numerator Syndromic Surveillance Reporting: N/A	
	Does exclusion 1 for Specialized Registry Reporting apply to you?	Yes <input type="radio"/> No <input type="radio"/>
	Does exclusion 2 for Specialized Registry Reporting apply to you?	Yes <input type="radio"/> No <input type="radio"/>
	Does exclusion 3 for Specialized Registry Reporting apply to you?	Yes <input type="radio"/> No <input type="radio"/>
	Denominator Specialized Registry Reporting: N/A	YES <input type="checkbox"/> NO <input type="checkbox"/>
	Numerator Specialized Registry Reporting: N/A	
	Does exclusion 1 for ELR Result Reporting apply to you?	Yes <input type="radio"/> No <input type="radio"/>
	Does exclusion 2 for ELR Result Reporting apply to you?	Yes <input type="radio"/> No <input type="radio"/>
	Does exclusion 3 for ELR Result Reporting apply to you?	Yes <input type="radio"/> No <input type="radio"/>
	Denominator ELR Result Reporting: N/A	YES <input type="checkbox"/> NO <input type="checkbox"/>
	Numerator ELR Result Reporting: N/A	