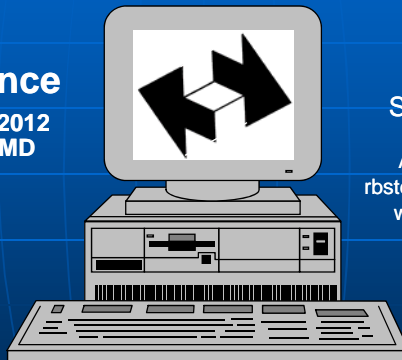


Stage 2 Meaningful Use: Issues and Strategies

**HBMA
Fall Conference**

September 12-14, 2012
National Harbor, MD



Presented by
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Meaningful Use Goals

- **Engage Patients and Families**
 - Provide Access to Data
 - Tools to Support Informed Decisions
- **Improve Care Coordination**
 - Exchange Data with Other Providers
- **Improve Population and Public Health**
 - Communicate with Public Agencies
- **Ensure Privacy and Security**
 - Data Transparency
 - Supporting Policies, Procedures, and Technology

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Meaningful Use Issues



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Certified EHR Limitations

- Stage 1 MU Measures Only
 - Significant Missing Pieces
 - Workflow
 - Patient Service
 - Charting (Stage 2)
 - Imaging (Stage 2)
- Stage 2 EHR Certification
 - Vendor Response
 - Time to Implement



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Certified EHR Limitations

- EHR Measuring MU
 - Data Driven or
 - Checklists
- EHR Design Issues
 - Targeted Practice/HCO Size
 - Duplicate Entry
 - Modularization
- Some EHR Support Selected CQMs



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MU Strategic Issues

- Eligible Provider vs. HCO Focus
- Critical Path for MU
- Provider and HCO Disruptions
- Patient Confusion
 - Split EPs
 - Family Members

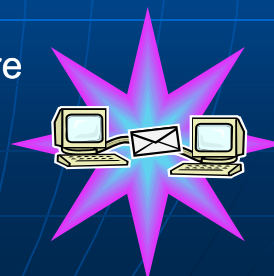


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Tactical Issues

- Rollout Strategy
 - Selecting EP
 - MU Critical Path and EHR Stages
- Patients Served by Multiple Eligible Providers
- Structured vs. Unstructured Information
- Supporting MU Among “Selected Patients”
 - Selection Strategy and Criteria
 - Clinical Care Issues and Exposure
- Dealing with “Other Patients”



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MU Related Medical Professional Liability Exposure

- Critical Path of EHR and MU Implementation
 - Workarounds
 - Confusion Among Providers and Patients
- Selection of MU Menu Options
- Attaining and Holding MU Measures
- Implied Standards of Care
- Selected MU/EHR Patients



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Calendar Issues

- 90 Day Reporting Period for First Payment Year
- 90 Day Reporting Period for Stage 2 in 2014



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MU as Part of EHR Utilization Goals



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Setting Goals to Measure Results

- Goals
 - Select Measures
 - Pre-Implementation Measurement
- Interim Measurement/Tolerance
 - Frequency of Measurement
 - Performance Level to Go Forward
 - Reasons to Delay
 - Remediation Strategy
 - Fix Previous Installation(s)



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What Will You Measure?

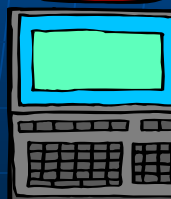
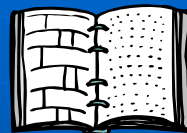
- Patient Flow
- Physician Productivity
- Decrease in EHR Transition Support
 - Training
 - Mentoring
 - Scribes
- Staff Productivity
- MU Measures

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Goal Attainment Steps

- Plan for Use
 - Practice Rollout Steps
 - MU Attainment
- Go/NoGo Decision Points
 - Initial Use
 - Expand Use for Initial Provider
 - Expand to Other Doctors
 - Expand to Other Offices/Locations



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Meaningful Use Stage 1



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MU Stage 1 - 2011

- Eligible Providers (EP)
 - 15 MU Core Measures
 - 5 of 10 Menu Set Measures
- Electronic Submission 2012 Onward



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Meaningful Use 1 at A Glance

- Collect
 - Demographics – Language, Gender, Race, DOB, Ethnicity (Date/Cause of Death for EH)
 - Diagnoses, Medications, Vitals, Allergies
 - Smoking Status
 - Prescriptions and DUR
- Share
 - Electronic Prescriptions (EP Only)
 - Provide Patient Electronic Copy of
 - Patient Health Information
 - Discharge Instructions
 - Clinical Summary
 - (Test) Exchange of Clinical Information



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Meaningful Use 1 at A Glance

- Support
 - Protect and Secure PHI
 - Use One Clinical Decision Support Rule
 - Report Clinical Quality Measures (CQM)
 - Changes in Stage 2



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EP CQM Requirements

- 3 Core CQMs (with 3 Alternates)
 - NQF0013 – Hypertension BP
 - NQF0028 – Tobacco Preventive Care
 - NQF0421 – Adult Weight Screening
- 3 Alternative Core CQMs
 - NQF0024 – Child Weight Assessment
 - NQF0041 – Influenza Immunization
 - NQF0038 – Childhood Immunization
- Plus 3 Other CQMs

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Meaningful Use 1 Menu Options

- **Collect**
 - Lab Information as Structured Data (Stage 2 Core)
 - ADR (EH)
- **Manage**
 - Drug Formulary Check
 - Preventive Follow-Up Reminders to Patients (EP) (Stage 2 Core)
 - Medication Reconciliation (Stage 2 Core)
- **Share**
 - Patient Access to Health Information (EP)
 - Provide Patient Education Resources
 - Provide Summary of Care to Another Provider
 - Electronic Lab Reports to Public Health Agencies (EH)
- **Report**
 - One Report of Patients by Condition
 - Test Immunization Registry Submission
 - Test Submission of Syndromic Surveillance Data to PHA

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General Concepts

- Unique Patients in Reporting Period
- Must Indicate None if Applicable to Count
- After Initial Entry, Use Clinical Judgment
- EP Excluded from Meeting Non-Applicable Measures



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MU Notes

- Medicare EP Without Attaining MU by 2015 Subject to Payment Adjustments
- No Medicaid Based Payment Adjustments



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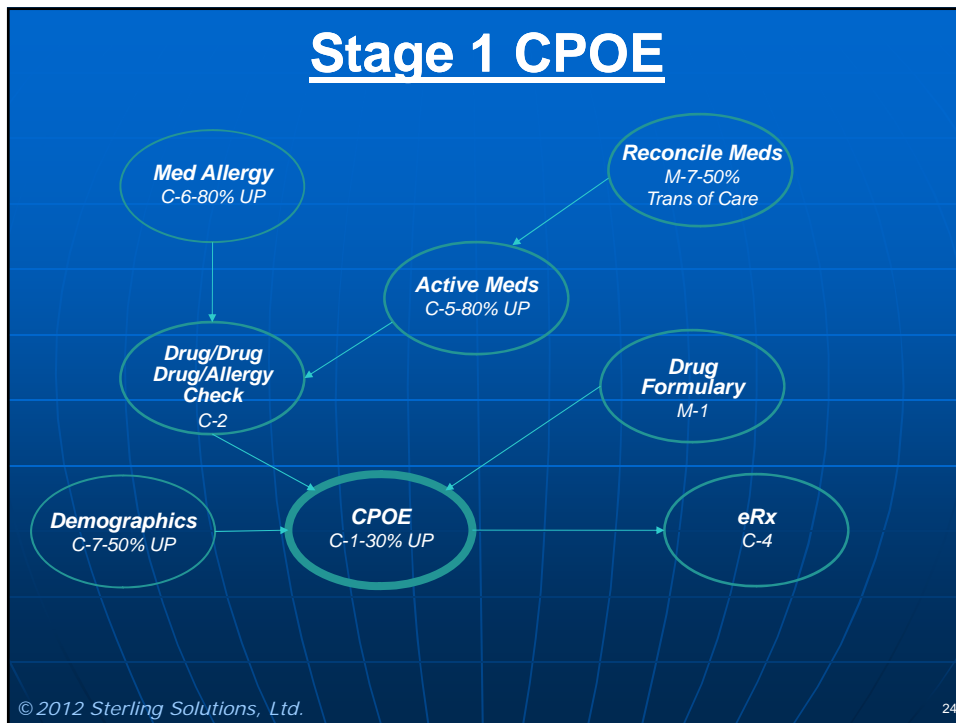
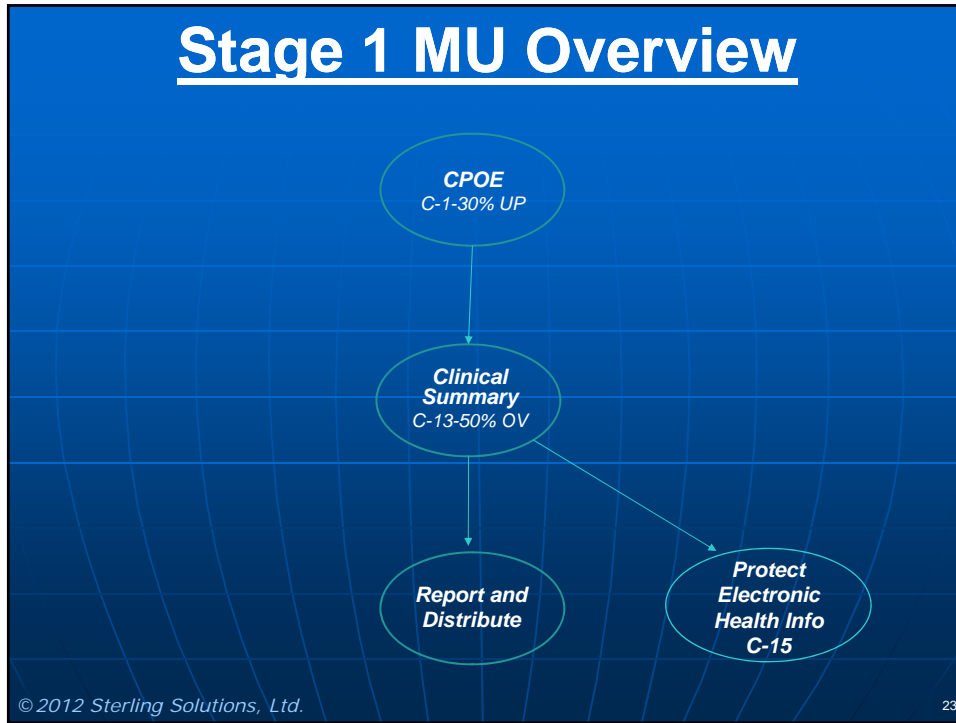
21

Navigating Stage 1 MU



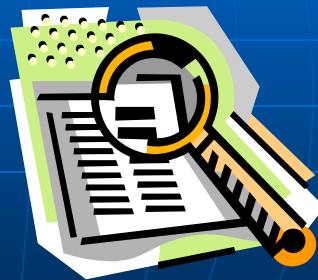
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Measure Specifics

- **Demographics (C-7-50%)**
 - Preferred Language
 - Gender
 - Race
 - Ethnicity
 - Date of Birth
- **Vitals (C-8-50%)**
 - Height
 - Weight
 - BP
 - BMI
 - Growth Charts



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Stage 1 Clinical Summaries



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Clinical Summaries (C-13-50%)

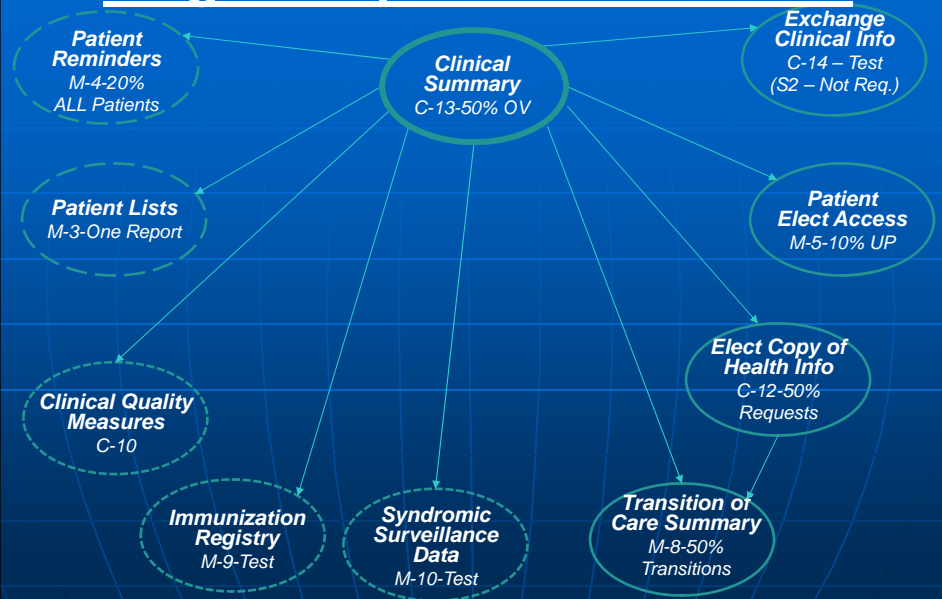
- Updated Medication List (C-1-30%, and C-5-80%)
- Updated Vitals (C-8-50%)
- Updated Problem List (C-3-80%)
- Immunizations
- Medications Administered
- Reason for Visit
- Procedures
- Instructions
- Summary of Topics
- Next Appointment/Test
- Other Appointments/Test with Contacts
- Test Orders and Results (M-2-40%)
- Decision Aids (C-11)
- Symptoms



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Stage 1 Report and Distribute



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Measure Specifics

- Electronic Copy of EP Health Information (C-12-50%) of Requests Within 3 Business Days
 - Diagnostic Test Results
 - Problem Lists
 - Medication Lists
 - Medication Allergies
 - Discharge Summary and Procedures for EH
- Electronic Exchange of Clinical Information (C-14-Test)
 - Problem List
 - Medication List
 - Medication Allergies
 - Diagnostic Test Results

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Statistical Dilemmas

- Requirements for Clinical Summaries (50% of OV)
 - CPOE (30% of Unique Patients)
 - Lab Test Results (40% of Lab Tests)
- How Useful are Reports and Distributions that Only Represent 50% of Office Visits?
- What Do You Have to Do for the Other 50% of Office Visits?

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Security Risk Assessment

- Analyze
 - Controls
 - Possibility
 - Impact
- Itemize Recommendations
 - Scope Mitigation
 - Check Implementation
 - Verify Compliance

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Final Meaningful Use Stage 2



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Final MU Stage 2 - 2014

- 17 Core Measures
- 3 of 5 Menu Measures
- Measure Changes
 - Tighter Timeframes
 - Higher Percentage
 - Apply to All Patients
 - Test to Limited Production
 - Moving Menu to Core
- CQM Part of PQRS
- More Patient Interactions
 - Online Messaging (EP)



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Final MU Stage 2 - 2014

- Collect
 - Demographics – Language, Gender, Race, DOB, Ethnicity
 - Medication Reconciliation (Stage 1 Menu)
 - Vitals
 - Smoking Status
 - Computerized Patient Orders For Prescriptions, Labs, and Radiology Orders (NEW)
 - Incorporate Lab Test Results (Stage 1 Menu)
 - Images (MENU) (NEW)
 - Discrete Family Health History (MENU) (NEW)
 - Electronic Note (MENU) (NEW)

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Final MU Stage 2 - 2014

- Share
 - Use Secure Messaging With Patients (NEW)
 - Provide Patient Specific Education (Stage 1 Menu)
 - Electronic Prescriptions (EP Only)
 - Online Access to Health Information (Stage 1 Menu)
 - Provide Copy of Clinical Summary
 - Transition of Care Summary (Stage 1 Menu)
 - Submit Immunization Registries (Stage 1 Menu)
 - Submit Syndromic Surveillance Data (MENU)
 - Cancer Case Reporting (MENU)
 - Non-Cancer Case Reporting (MENU)

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Final Stage 2

- Support
 - Generate One Report of Patients with a Specific Condition (Stage 1 Menu)
 - Generate Reminders (Stage 1 Menu)
 - Protect and Secure PHI
 - Use Five Clinical Decision Support Rules

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Clinical Quality Measures (CQM)

- Submit CQM data electronically
- EPs will submit 9 CQMs from at least 3 of the National Quality Strategy
 - From 64 CQMs across 6 domains.
- Physician Quality Reporting System (PQRS)
Reporting will credit the PQRS and Medicare EHR Incentive Programs



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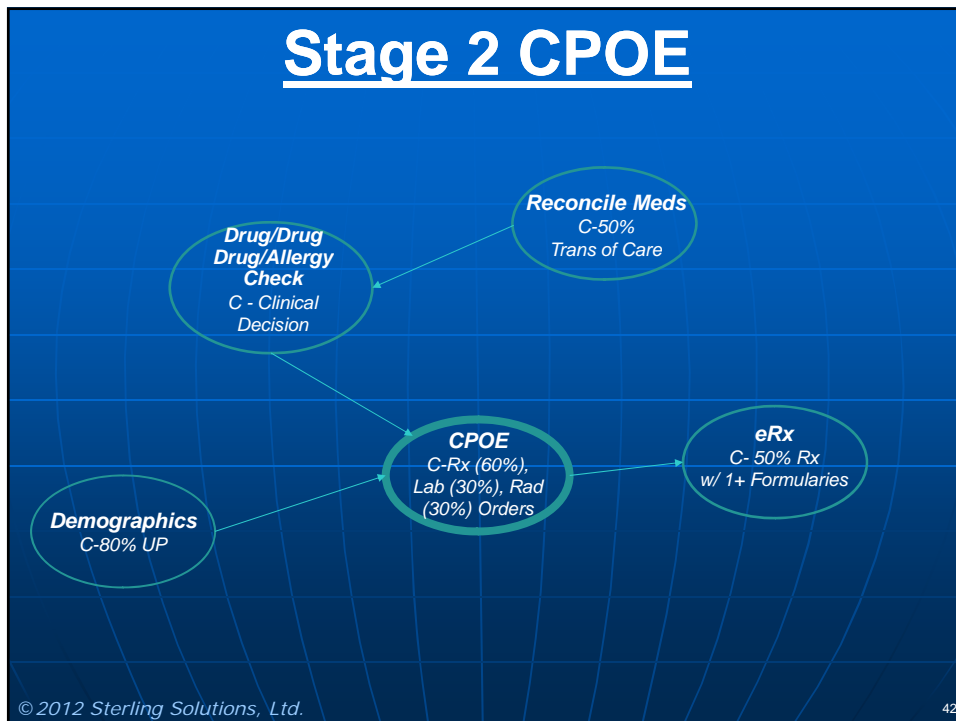
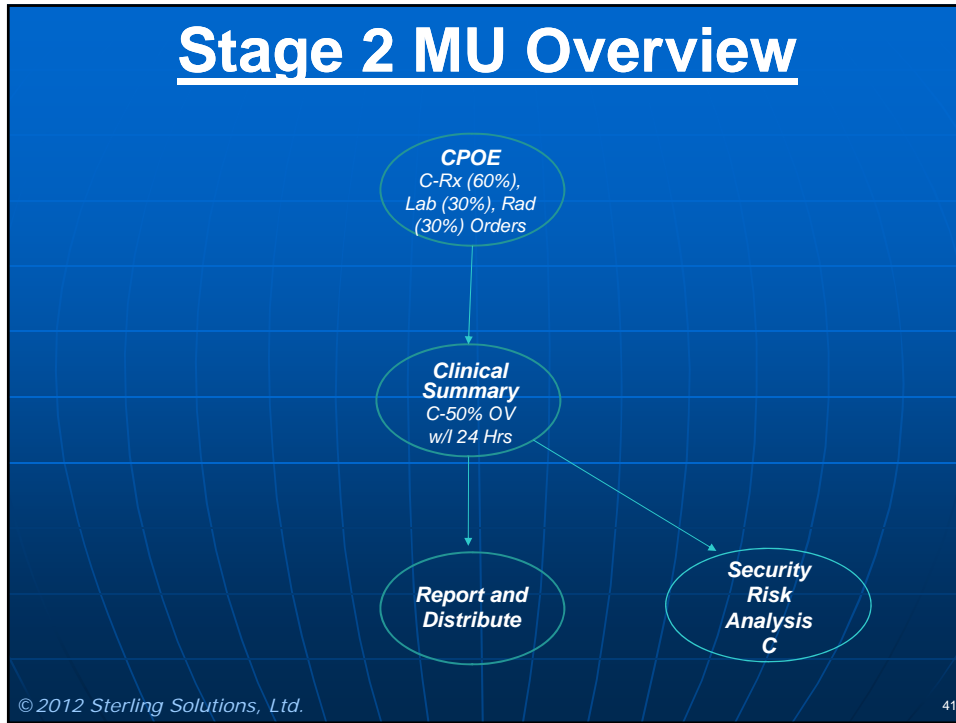
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Navigating Stage 2 MU



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Measure Specifics

- **Demographics (C-80%)**
 - Preferred Language
 - Gender
 - Race
 - Ethnicity
 - Date of Birth
- **Vitals (C-80%)**
 - Height
 - Weight
 - BP
 - BMI
 - Growth Charts



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Stage 2 Clinical Summaries



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Clinical Summaries (C-50%)

- Updated Medication List
- Updated Vitals (C-80%)
- Updated Problem List
- Immunizations
- Medications Administered
- Reason for Visit
- Procedures
- Instructions
- Summary of Topics
- Next Appointment/Test
- Other Appointments/Test with Contacts
- Test Orders and Results (C)
- Decision Aids (C)
- Symptoms



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Stage 2 Report and Distribute



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MU Action Plan

- Analyze MU Critical Path Issues
- Plan EHR and MU Deployment
- Design MU and EHR Implementation
- Measure and Monitor
 - EHR Progress
 - MU Measures
- Consider Practice/HCO Issues
 - Security Risk Analysis
 - Patient Portal
 - Electronic Transactions



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MU Monitoring and Documenting

- Monitor by EP
 - At Least Bi-Weekly for 90 Days Period
 - At Least Monthly Otherwise
 - Increase Reviews as Needed
- Document by EP
 - Separate Package by EP for Each Period (90 Day or Annual)
 - Complete, Self Contained Package
 - Include Copy of Security Risk Analysis

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QUESTIONS AND ANSWERS



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Ronald B. Sterling publishes the popular EHR Blog, Avoid-EHR-Disasters.com and authored the HIMSS Book of the Year Award winning *Keys to EHR/EHR Success - Selecting and Implementing an Electronic Medical Record*. Ron is a nationally recognized thought leader on the selection, implementation, and use of electronic health record and practice management systems. Ron has advised healthcare organizations and practices across the country. Ron has analyzed software from over 150 vendors. Mr. Sterling hosts **The EHR Zone** on HealthcareNOWRadio.com and has contributed articles to a wide range of publications including the widely used *Marketing Your Clinical Practice*.

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