
Medical Assistance Provider Incentive Repository



User Guide

For

Eligible Professionals

MAPIR 5.7

Part 2B – Program Year 2016
Attestation Phase
to
CQMs

May 2016

REVISION LOG:

MAPIR User Guide for Eligible Professionals- Part 2B

Version	Revision Date	Revision
V1.0	04/08/2016	Initial Version – Split the original User Guide into 4 separate parts (Part 1, 2A, 2B, 3 and 4) to be updated on an ongoing, or as needed basis.

Table of Contents

Introduction	5
EP User Guide Files: Parts 1, 2A, 2B, 3 and 4	6
Step 5 – Attestation	7
Attestation Phase (Part 1 of 3).....	8
Adoption Phase	9
Implementation Phase	10
Upgrade Phase.....	12
Meaningful Use Phase	15
2016 Scheduled for Stage 2 (MU 2.3)	17
2016 Stage 2.3 Objectives and Measures	17
MU 2.3 Meaningful Use General Requirements	18
Meaningful Use State 2.3 Objectives (1-9)	20
Meaningful Use Stage 2.3 Objective List Table	21
Objective 1 – Protect Patient Health Information	22
Objective 2 – Clinical Decision Support (CDS).....	23
Objective 3 – Computerized Provider Order Entry (CPOE).....	24
Objective 4 – Electronic Prescribing	25
Objective 5 – Health Information Exchange	26
Objective 6 - Patient Specific Education	27
Objective 7– Medication Reconciliation.....	28
Objective 8 – Patient Electronic Access	29
Objective 9 – Secure Electronic Messaging	30
Return to Main: Back to the Measure Topic List.....	31
2016 2.3 Required Public Health Objective	33
MU 2.3 Required Public Health List Table.....	34
Objective 10 Option 1 – Immunization Registry Reporting	36
Objective 10 Option 2 – Syndromic Surveillance Reporting	37
Objective 10 Options 3A – Specialized Registry Reporting	38
Objective 10 Option 3B – Specialized Registry Reporting	39
Review PH Measures and Return to Main	40
2016 Scheduled for Stage 1 (MU 1.5)	43
2015 Stage 1.5 – Objectives and Measures	43
2016 1.5 Meaningful Use General Requirements	44
Meaningful Use Stage 1.5 Objectives (1 – 9)	46
Meaningful Use Objective List Table.....	47
Objective 1 – Protect Patient Health Information	48

Objective 2 – Clinical Decision Support (CDS)	49
Objective 3 – CPOE Selection Screen	50
Objective 3 – CPOE	51
Objective 3 Alternate 1 –CPOE.....	52
Objective 4 – Electronic Prescribing	53
Objective 5 – Health Information Exchange	54
Objective 6 – Patient- Specific Education.....	55
Objective 7 – Medication Reconciliation.....	56
Objective 8 – Patient Electronic Access	57
Objective 9 – Secure Electronic Messaging	58
Return to Main: Back to Measures Topic List.....	59
2016 1.5 Required Public Health Objective (10)	61
MU 1.5 Required Public Health Objective List Table.....	62
Objective 10 Option 1 – Immunization Registry Reporting	64
Objective 10 Option 2 – Syndromic Surveillance Reporting	65
Objective 10 Option 3A – Specialized Registry Reporting.....	66
Objective 10 Option 3B – Specialized Registry Reporting.....	67
Review PH Measures and Return to Main	68
Clinical Quality Measures (CQMs).....	71
Clinical Quality Measures – General	72
Manual Clinical Quality Measures – Adult Set	73
Manual Quality Measures – Pediatric Set	74
Meaningful Use Clinical Quality Measure Worklist Table	75
Meaningful Use Measures Summary	90
Meaningful Use Measures Summary Sample Screen.....	90
Attestation Phase (Part 3 of 3)	93
Assignment of Payment and Confirmation of Payment Address	93

Introduction

For Program Year 2016, if you are scheduled to attest to Stage 1 of Meaningful Use, you have the option of attesting to **2016 Modified Stage 2 Objectives and Alternates** (referred to in the MAPIR User Guides as “**2016 MU 1.5**”).

If you have already attested to two years of Stage 1, you are scheduled to meet Stage 2, and must attest to **2016 Modified Stage 2 Objectives** (referred to in the MAPIR User Guides as “**2016 MU 2.3**”).

EP User Guide Files: Parts 1, 2A, 2B, 3 and 4

The MAPIR User Guide for Eligible Professionals has been divided into separate documents for ease of reference. Each part is available as a downloadable file at the EHRIP website.

Part 1: For All EPs

- Getting Started
- Confirm R&A and Contact Info
- Eligibility
- Patient Volumes

Part 2A: For EPs Attesting for **Program Year 2015**

- PY2015 Attestation Phase: Adopt/Implement/Upgrade or Meaningful Use
- Meaningful Use General Requirements
- Stage 1 MU Objectives
- Stage 2 MU Objectives
- Program Year 2015 CQMs

Part 2B: For EPs Attesting for **Program Year 2016**

- PY2016 Attestation Phase: Adopt/Implement/Upgrade or Meaningful Use
- Meaningful Use General Requirements
- Stage 1 MU Objectives
- Stage 2 MU Objectives
- Program Year 2016 CQMs

Part 3: For all EPs

- Review Application
- Application Questionnaire
- File Uploads, Required and Recommended Documentation
- Application Submission
- Post Submission Activities
- Application Statuses
- Review and Adjustment

Part 4: For All EPs

- Additional User Information
- Appendices

Step 5 – Attestation

This section will ask you to provide information about your **EHR System Adoption Phase**. Adoption phases include **Adoption, Implementation, Upgrade, and Meaningful Use**. Based on the adoption phase you select, you may be asked to complete additional information about activities related to that phase.

For the first year of participation in the Medicaid EHR Incentive program, Eligible Professionals will have the option to attest to **Adoption, Implementation, Upgrade, or Meaningful Use**. After the first year of participation, the Eligible Professionals are required to attest to **Meaningful Use**.

This initial Attestation screen provides information about this section.

Click **Begin** to continue to the **Attestation** section.

Get Started
R&A/Contact Info
Eligibility
Patient Volumes
Attestation
Review
Submit



In this portion of MAPIR, you will need to attest to various incentive program participation requirements, including your EHR system adoption phase, payment designation, and provider liability.

[EHR System Adoption Phase](#)
 You will be asked to confirm whether you are adopting, implementing, or upgrading (A/I/U) federally-certified EHR technology. For *Implement or Upgrade*, you will need to describe whether tasks are *Planned/In Progress* or *Complete*. Please refer to the *User Guide for Eligible Professionals* for additional guidance on Adopt, Implement and Upgrade: <http://healthdata.vermont.gov/ehrip/Apply>

[Payment Designations](#)
 If you assigned your payment when you registered with the R&A, you will need to confirm that the assignment was voluntary. You will also need to confirm the payment address of the payee that you designated.

[Provider Liability](#)
 The eligible professional for whom the payment is being requested is responsible and liable for any errors or falsifications submitted in this attestation process. The eligible professional, and not the contact for the application process or the preparer of the application, will be held accountable for any incorrect information or overpayments.

Once your attestation is complete, you will be directed to the *Review* tab. Please review all information for accuracy and completeness and revise your application as needed.

NOTE: Once you submit your application, you cannot make any changes, but you will be able to upload documents. MAPIR will provide validation messages to assist you with the application. These messages will be displayed once you move to the *Submit* tab.

If you have completed your application and are ready to proceed, you MUST click the *Submit* tab.

UI 75

Begin

UI 75

Attestation Phase (Part 1 of 3)

The Attestation Phase (Part 1 of 3) screen asks for the **EHR System Adoption Phase**.

The screen shown below is the Attestation Phase (Part 1 of 3) screen you will see if it is your first year participating (Payment Year 1).

If it is not your first year participating (Payment Year 2 or beyond), turn to [page 16](#) of this guide.

After making your selection, the next screen you see will depend on the phase you selected.

Click **Save & Continue** to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point or last saved data.

Get Started R&A/Contact Info Eligibility Patient Volumes Attestation Review Submit

Attestation Phase (Part 1 of 3)

Please select the appropriate **EHR System Adoption Phase**.

When ready click the **Save & Continue** button to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point.

- Adoption:** You are acquiring certified EHR Technology.
- Implementation:** You are installing certified EHR Technology.
- Upgrade:** You are expanding functionality of certified EHR Technology.
- Meaningful Use:** You are capturing meaningful use measures using a certified EHR technology at locations where at least 50% of patient encounters are provided.

Previous Reset Save & Continue

For **Adoption** continue to the next page of this guide.

For **Implementation** go to [page 10](#).

For **Upgrade** go to [page 12](#).

For **Meaningful Use** go to [page 15](#).

Adoption Phase

For **Adoption**, select the Adoption button. Click **Save & Continue** to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point or last saved data.

Proceed to [page 94](#) of this guide to continue.

Get Started R&A/contact Info Eligibility Patient Volumes Attestation Review Submit

Attestation Phase (Part 1 of 3)

Please select the appropriate EHR System Adoption Phase.

When ready click the **Save & Continue** button to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point.

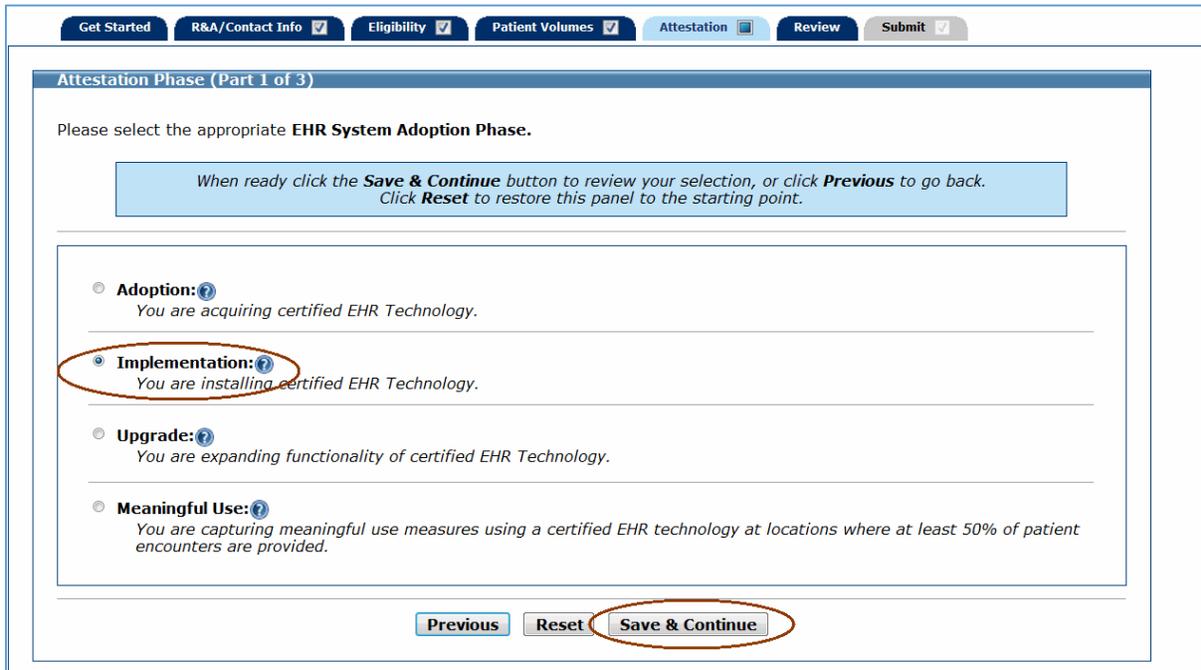
- Adoption:** You are acquiring certified EHR Technology.
- Implementation:** You are installing certified EHR Technology.
- Upgrade:** You are expanding functionality of certified EHR Technology.
- Meaningful Use:** You are capturing meaningful use measures using a certified EHR technology at locations where at least 50% of patient encounters are provided.

Previous Reset Save & Continue

Implementation Phase

For **Implementation** select the Implementation button.

Click **Save & Continue** to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point or last saved data.



Get Started R&A/Contact Info Eligibility Patient Volumes Attestation Review Submit

Attestation Phase (Part 1 of 3)

Please select the appropriate **EHR System Adoption Phase**.

When ready click the **Save & Continue** button to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point.

- Adoption:**
You are acquiring certified EHR Technology.
- Implementation:**
You are installing certified EHR Technology.
- Upgrade:**
You are expanding functionality of certified EHR Technology.
- Meaningful Use:**
You are capturing meaningful use measures using a certified EHR technology at locations where at least 50% of patient encounters are provided.

Previous Reset Save & Continue

Select your **Implementation Activity** by selecting the **Planned** or **Complete** button.

Click **Other** to add any additional **Implementation Activities** you would like to supply.

Click **Save & Continue** to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point or last saved data. This is an example of a completed screen.

Attestation Phase (Part 2 of 3)

Please select the activities where you have Planned (to include 'In Progress') or completed an implementation. It is important to know that the information you select about your Planned (to include 'In Progress') and completed Implementation tasks is optional and will not impact your ability to receive an incentive payment. This information is helpful to the State Medicaid Program Office in understanding the implementation process. If there are no applicable activities to select or list, please select the 'Other (Click to Add)' button and enter "none".

When ready click the **Save & Continue** button to review your selection, or click **Previous** to go back.
Click **Reset** to restore this panel to the starting point.
After saving, click the **Clear All** button to remove standard activity selections.

(* Red asterisk indicates a required field.)

*Implementation Activity	Planned	Complete
Workflow Analysis	<input type="radio"/>	<input type="radio"/>
Workflow Redesign	<input type="radio"/>	<input checked="" type="radio"/>
Software Installation	<input type="radio"/>	<input type="radio"/>
Hardware Installation	<input type="radio"/>	<input checked="" type="radio"/>
Peripherals Installation	<input type="radio"/>	<input checked="" type="radio"/>
Internet Connectivity / Broadband	<input type="radio"/>	<input type="radio"/>
Uploading Patient Data	<input checked="" type="radio"/>	<input type="radio"/>
Electronic Prescribing	<input type="radio"/>	<input checked="" type="radio"/>
Health Information Exchange (i.e. labs, pharmacy)	<input type="radio"/>	<input type="radio"/>
Physical Redesign of Workspace	<input type="radio"/>	<input type="radio"/>
Training	<input type="radio"/>	<input type="radio"/>

Other (Click to Add)

Previous Reset Clear All **Save & Continue**

This screen shows an example of entering activities other than what was in the Implementation Activity listing.

Click **Save & Continue** to review your selection, or click **Previous** to go back. Click **Reset** to restore the panel to the starting point or last saved data. After saving, click **Clear All** to remove standard activity selections.

Attestation Phase (Part 2 of 3)

Please select the activities where you have Planned (to include 'In Progress') or completed an implementation. It is important to know that the information you select about your Planned (to include 'In Progress') and completed Implementation tasks is optional and will not impact your ability to receive an incentive payment. This information is helpful to the State Medicaid Program Office in understanding the implementation process. If there are no applicable activities to select or list, please select the 'Other (Click to Add)' button and enter "none".

When ready click the **Save & Continue** button to review your selection, or click **Previous** to go back.
Click **Reset** to restore this panel to the starting point.
After saving, click the **Clear All** button to remove standard activity selections.

(* Red asterisk indicates a required field.)

*Implementation Activity	Planned	Complete
Workflow Analysis	<input type="radio"/>	<input type="radio"/>
Workflow Redesign	<input type="radio"/>	<input checked="" type="radio"/>
Software Installation	<input type="radio"/>	<input type="radio"/>
Hardware Installation	<input type="radio"/>	<input checked="" type="radio"/>
Peripherals Installation	<input type="radio"/>	<input checked="" type="radio"/>
Internet Connectivity / Broadband	<input type="radio"/>	<input type="radio"/>
Uploading Patient Data	<input checked="" type="radio"/>	<input type="radio"/>
Electronic Prescribing	<input type="radio"/>	<input checked="" type="radio"/>
Health Information Exchange (i.e. labs, pharmacy)	<input type="radio"/>	<input type="radio"/>
Physical Redesign of Workspace	<input type="radio"/>	<input type="radio"/>
Training	<input type="radio"/>	<input type="radio"/>

Other: Reviewed EHR Certification Information **Delete**

Other (Click to Add)

Previous Reset Clear All **Save & Continue**

Review the **Implementation Activity** you selected.

Click **Save & Continue** to continue, or click **Previous** to go back.

Proceed to [page 94](#) of this guide to continue.

Attestation Phase (Part 2 of 3)

Please review the list of the activities where you have **planned** or **completed** an implementation.

When ready click the **Save & Continue** button to continue, or click **Previous** to go back.

Implementation Activity	Planned	Complete
Workflow Analysis	✓	
Workflow Redesign		✓
Hardware Installation		✓
Peripherals Installation		✓
Uploading Patient Data	✓	
Electronic Prescribing		✓
(Other) Reviewed EHR Certification Information		✓

Previous Save & Continue

Upgrade Phase

For **Upgrade** select the Upgrade button.

Click **Save & Continue** to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point or last saved data.

Attestation Phase (Part 1 of 3)

Please select the appropriate **EHR System Adoption Phase**.

When ready click the **Save & Continue** button to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point.

- Adoption:** You are acquiring certified EHR Technology.
- Implementation:** You are installing certified EHR Technology.
- Upgrade:** You are expanding functionality of certified EHR Technology.
- Meaningful Use:** You are capturing meaningful use measures using a certified EHR technology at locations where at least 50% of patient encounters are provided.

Previous Reset Save & Continue

Select your **Upgrade Activities** by selecting the **Planned** or **Complete** button for each activity. Click **Other** to add any additional **Upgrade Activities** you would like to supply. Click **Save & Continue** to review your selection, or click **Previous** to go back. Click **Reset** to restore the panel to the starting point or last saved data. After saving, click **Clear All** to remove standard activity selections.

Attestation Phase (Part 2 of 3)

Please select the activities where you have Planned (to include 'In Progress') or completed an upgrade. It is important to know that the information you select about your Planned (to include 'In Progress') and completed upgrade tasks is optional and will not impact your ability to receive an incentive payment. This information is helpful to the State Medicaid Program Office in understanding the upgrade process. If there are no applicable activities to select or list, please select the 'Other (Click to Add)' button and enter "none".

When ready click the **Save & Continue** button to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point. After saving, click the **Clear All** button to remove standard activity selections.

(*) Red asterisk indicates a required field.

*Upgrade Activity	Planned	Complete
Upgrading Software Version	<input type="radio"/>	<input type="radio"/>
Upgrading Hardware or Peripherals	<input type="radio"/>	<input type="radio"/>
Clinical Decision Support	<input type="radio"/>	<input type="radio"/>
Electronic Prescribing	<input type="radio"/>	<input type="radio"/>
Computerized Provider Order Entry	<input type="radio"/>	<input type="radio"/>
Adding Functionality / Modules (personal health record, mental health, dental)	<input type="radio"/>	<input type="radio"/>
Other (Click to Add)		

Previous Reset Clear All **Save & Continue**

This screen shows an example of entering activities other than what was in the Upgrade Activity listing.

Click **Save & Continue** to review your selection, or click **Previous** to go back. Click **Reset** to restore the panel to the starting point or last saved data. After saving, click **Clear All** to remove standard activity selections.

Attestation Phase (Part 2 of 3)

Please select the activities where you have Planned (to include 'In Progress') or completed an upgrade. It is important to know that the information you select about your Planned (to include 'In Progress') and completed upgrade tasks is optional and will not impact your ability to receive an incentive payment. This information is helpful to the State Medicaid Program Office in understanding the upgrade process. If there are no applicable activities to select or list, please select the 'Other (Click to Add)' button and enter "none".

When ready click the **Save & Continue** button to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point. After saving, click the **Clear All** button to remove standard activity selections.

(*) Red asterisk indicates a required field.

*Upgrade Activity	Planned	Complete
Upgrading Software Version	<input checked="" type="radio"/>	<input type="radio"/>
Upgrading Hardware or Peripherals	<input type="radio"/>	<input type="radio"/>
Clinical Decision Support	<input type="radio"/>	<input checked="" type="radio"/>
Electronic Prescribing	<input type="radio"/>	<input type="radio"/>
Computerized Provider Order Entry	<input type="radio"/>	<input type="radio"/>
Adding Functionality / Modules (personal health record, mental health, dental)	<input type="radio"/>	<input type="radio"/>
Other: Reviewed EHR Certification Information	<input type="radio"/>	<input checked="" type="radio"/>

Other (Click to Add) Delete

Previous Reset Clear All **Save & Continue**

Review the **Upgrade Activities** you selected.

Click **Save & Continue** to continue, or click **Previous** to go back.

Proceed to the [next page](#) of this guide to continue.

The screenshot shows a web interface for the 'Attestation Phase (Part 2 of 3)'. At the top, there is a navigation bar with buttons: 'Get Started', 'R&A/Contact Info' (checked), 'Eligibility' (checked), 'Patient Volumes' (checked), 'Attestation' (active), 'Review', and 'Submit'. Below this, a header reads 'Attestation Phase (Part 2 of 3)'. The main content area contains the text: 'Please review the list of activities where you have **planned** or **completed** an upgrade.' Below this is a light blue box with the instruction: 'When ready click the **Save & Continue** button to continue, or click **Previous** to go back.' A table follows with three columns: 'Upgrade Activity', 'Planned', and 'Complete'. The table lists three activities: 'Upgrading Software Version' (Planned: checked), 'Clinical Decision Support' (Complete: checked), and '(Other) Reviewed EHR Certification Information' (Complete: checked). At the bottom of the table are two buttons: 'Previous' and 'Save & Continue', with the latter circled in red.

Upgrade Activity	Planned	Complete
Upgrading Software Version	✓	
Clinical Decision Support		✓
(Other) Reviewed EHR Certification Information		✓

Meaningful Use Phase

For **Meaningful Use** select the Meaningful Use button.

Click **Save & Continue** to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point or last saved data.

Attestation Phase (Part 1 of 3)

Please select the appropriate **EHR System Adoption Phase**.

When ready click the **Save & Continue** button to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point.

- Adoption:** You are acquiring certified EHR Technology.
- Implementation:** You are installing certified EHR Technology.
- Upgrade:** You are expanding functionality of certified EHR Technology.
- Meaningful Use:** You are capturing meaningful use measures using a certified EHR technology at locations where at least 50% of patient encounters are provided.

Previous Reset Save & Continue

Select an EHR System Adoption Phase for reporting **Meaningful Use of certified EHR technology**. The selections available to you will depend on the Program Year you are in.

If you are in Program Year 2015 or higher and have previously attested to Adoption, Implementation, or Upgrade, you may attest to Meaningful Use (90 days) or Meaningful Use (Full Year).

If you are in Program Year 2015 or higher and you have previously attested to Meaningful Use, you must attest to Meaningful Use (Full Year); therefore, only this option will display.

Click **Save & Continue** to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point.

Attestation Phase (Part 1 of 3)

Please select the appropriate **EHR System Adoption Phase** below. The selection that you make will determine the questions that you will be asked on subsequent pages.

When ready click the **Save & Continue** button to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point.

- Meaningful Use (90 days)** You are capturing meaningful use measures using certified EHR technology at locations where at least 50% of the patient encounters are provided.

Previous Reset Save & Continue

Depending on the selection made on the previous screen, the Attestation EHR Reporting Period (Part 1 of 3) screen will display with the 90-day period or the full year period. The example below displays the 90-day period for an incentive application in Program Year 2015.

Enter a **Start Date** or use the calendar located to the right of the Start Date field.

Click **Save & Continue** to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point.

This screen displays an example of a **Start Date** of January 1, 2014 and a system-calculated **End Date** of March 31, 2014.

Click **Save & Continue** to review your selection, or click **Previous** to go back.

It is important to SAVE all documentation and reports that support your Meaningful Use attestation. If you see patients at multiple out-patient practice locations, please save your Meaningful Use documentation from all sites in case of audit.

If you are scheduled to meet **MU Stage 1 in Program Year 2016**, proceed [here](#). The MAPIR User Guide refers to this as **MU Stage 1.5**.

If you are in scheduled to meet **MU Stage 2 in Program Year 2016**, proceed to the next page. The MAPIR User Guide refers to this as **MU Stage 2.3**.

2016 Scheduled for Stage 2 (MU 2.3)

2016 Stage 2.3 Objectives and Measures

If you are scheduled to meet Meaningful Use Stage 2 in Program Year 2016, MAPIR refers to this as **MU Stage 2.3**.

The screen on the following page displays the Measures Topic List. The Attestation Meaningful Use Objectives are divided into three distinct topics: General Requirements, Meaningful Use Objectives, and the Required Public Health Objective. The Manual Clinical Quality Measures are further divided into 3 topics, of which one must be selected: Clinical Quality Measure – General, Clinical Quality Measure – Adult Set, and Clinical Quality Measure – Pediatric Set.

You may complete any of the four topics in any order.

While it is not required that you begin each topic in the order shown on the screen, this user guide will follow the order in which the topics are listed.

Click **Begin** to start a topic.

Get Started | R&A/Contact Info | Eligibility | Patient Volumes | Attestation | Review | Submit

Attestation Meaningful Use Objectives

Please complete the following topic areas: General Requirements, Meaningful Use Objectives (1-9), Required Public Health Objective (10) and one of the Clinical Quality Measures (CQMs) options. The following icon will display to the left of the topic name when the minimum required entries are completed. ✓

Please Note: Specific requirements apply to the Required Public Health Objective (10). You may be instructed to complete additional steps depending on exclusions taken on completed objectives even though a ✓ is displayed.

Available actions for a topic will be determined by current progress level. To start a topic, select the "Begin" button. To modify a topic where entries have been made, select the "EDIT" button for a topic to modify any previously entered information. Select "Previous" to return.

Completed?	Topics	Progress	Action
	General Requirements		Begin
	Meaningful Use Objectives (1-9)		Begin
	Required Public Health Objective (10)		Begin

Manual Clinical Quality Measures

Please select one of the following three Clinical Quality Measure set options.

Only one Clinical Quality Measure (CQM) set can be completed. If you would like to switch to a different CQM set after one is started, use the "Clear All" button on the previously selected CQM set to enable the "Begin" button on a different CQM set. Please note that the previously entered information will be cleared once the "Clear All" button is selected.

Clinical Quality Measure - General	Begin
Clinical Quality Measure - Adult Set	Begin
Clinical Quality Measure - Pediatric Set	Begin
Cancel and Choose Electronic	Cancel

Note:
When all topics are marked as completed, select the "Save & Continue" button to complete the attestation process.

Previous | Save & Continue

MU 2.3 Meaningful Use General Requirements

Enter information in all required fields.

The denominator entered must be greater than or equal to the numerator entered. The numerator and denominator entries must be positive whole numbers.

Click **Save & Continue** to review your selection, click **Previous** to go back, or click **Reset** to restore this panel to the starting point or last saved data.

Note the addition of two questions assessing certification of MU measures and the reporting period of CQM measures compared to MU measures.

Get Started RRA/Contact Info Eligibility Patient Volumes Attestation Review Submit

Meaningful Use General Requirements

Please answer the following questions to determine your eligibility for the Medicaid EHR Incentive Program.

When ready click the **Save & Continue** button to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point.

(*) Red asterisk indicates a required field.

* Please demonstrate that at least 50% of all your encounters occur in a location(s) where certified EHR technology is being utilized. * Numerator: * Denominator:

* Please demonstrate that at least 80% of all unique patients have their data in the certified EHR during the EHR reporting period. * Numerator: * Denominator:

* Is your Certified EHR System certified for all the Meaningful Use measures you will be completing for this application? Yes No

* Is your CQM reporting period the same as your Meaningful Use reporting period? Please be sure to upload your Meaningful Use and CQM documentation into the application. Yes No

Previous Reset Save & Continue

If all measures were entered and saved, a check mark will display under the Completed column for the topic as displayed in the example below. You can continue to edit the topic measure after it has been marked complete.

Click the **Edit** button to further edit the topic, click **Clear All** to clear all topic information you entered, or click **Begin** to start the next topic.

Get Started
R&A/Contact Info
Eligibility
Patient Volumes
Attestation
Review
Submit

Attestation Meaningful Use Objectives

Please complete the following topic areas: General Requirements, Meaningful Use Objectives (1-9), Required Public Health Objective (10) and one of the Clinical Quality Measures (CQMs) options. The following icon will display to the left of the topic name when the minimum required entries are completed.

Please Note: Specific requirements apply to the Required Public Health Objective (10). You may be instructed to complete additional steps depending on exclusions taken on completed objectives even though a is displayed.

Available actions for a topic will be determined by current progress level. To start a topic, select the **"Begin"** button. To modify a topic where entries have been made, select the **"EDIT"** button for a topic to modify any previously entered information. Select **"Previous"** to return.

Completed?	Topics	Progress	Action
	General Requirements	2/2	<div style="display: flex; gap: 5px;"> <div style="border: 1px solid #0070C0; padding: 2px 5px;">EDIT</div> <div style="border: 1px solid #0070C0; padding: 2px 5px;">Clear All</div> </div>
	Meaningful Use Objectives (1-9)		<div style="border: 2px solid red; border-radius: 50%; padding: 2px 10px; display: inline-block;">Begin</div>
	Required Public Health Objective (10)		<div style="border: 1px solid #0070C0; padding: 2px 5px;">Begin</div>

Manual Clinical Quality Measures

Please select one of the following three Clinical Quality Measure set options.

Only one Clinical Quality Measure (CQM) set can be completed. If you would like to switch to a different CQM set after one is started, use the **"Clear All"** button on the previously selected CQM set to enable the **"Begin"** button on a different CQM set. *Please note that the previously entered information will be cleared once the "Clear All" button is selected.*

Clinical Quality Measure - General	<div style="border: 1px solid #0070C0; padding: 2px 5px;">Begin</div>
Clinical Quality Measure - Adult Set	<div style="border: 1px solid #0070C0; padding: 2px 5px;">Begin</div>
Clinical Quality Measure - Pediatric Set	<div style="border: 1px solid #0070C0; padding: 2px 5px;">Begin</div>
Cancel and Choose Electronic	<div style="border: 1px solid #0070C0; padding: 2px 5px;">Cancel</div>

Note:
When all topics are marked as completed, select the **"Save & Continue"** button to complete the attestation process.

Previous

Save & Continue

Meaningful Use State 2.3 Objectives (1-9)

This screen provides information about the Meaningful Use Objectives for EPs scheduled to meet Stage 2 in Program Year 2016 (MU 2.3).

Click **Begin** to continue to the Meaningful Use Objectives List Table.

Get Started
R&A/Contact Info
Eligibility
Patient Volumes
Attestation
Review
Submit

Program Year 2016 Scheduled to Meet Stage 2: Meaningful Use Objectives 1 - 9

The following section includes 9 of the 10 Objectives. Some Objectives include multiple measures. As part of the Meaningful Use Attestation, EPs are required to complete all 10 Objectives. Certain Objectives do provide Exclusions, Alternate Exclusions, or Alternate Measures. If an EP meets the criteria for the Exclusion or Alternate Exclusion, then the EP can claim that Exclusion during Attestation.

Helpful Hints:

1. The Meaningful Use Objectives, Required Public Health Objective, and the Clinical Quality Measures (CQMs) can be completed in any order.
2. For more details on each Objective, select the '**CLICK HERE**' link at the top left of each screen.
3. Objective results **DO NOT** round up. For example, a numerator of 199 and a denominator of 1000 is 19%. Results are **ONLY** displayed in whole numbers.
4. Objectives that require a result of greater than a given percentage must be **MORE THAN** that percentage. For example, in a measure requiring a result of greater than 80%, a result of 80.1% will pass, but a result of exactly 80% will **NOT** pass.
5. The white checkmark in the green circle means the section is completed, but does not mean you passed or failed the Objectives.
6. You may review the completed Objectives by selecting the 'EDIT' button.
7. Evaluation of Meaningful Use Objectives is made after the application is electronically signed. You will receive a message if the objectives are not met. If any objectives are not met, you will have the opportunity to change and electronically sign again.

Instructions:

- Users must adequately answer each measure they intend to meet by either correctly completing the numerator and denominator, answering yes or no, or choosing an exclusion if they meet the requirements for that exclusion.
- Use the data obtained from you EHR system for the attestation period.
- When completing your application, you will be prompted to upload copies of your EHR report(s) and supporting documentation into your application.

It is important to **SAVE** all documentation and reports that support your Meaningful Use attestation, including documentation for exclusions and measures with values of zero. If you see patients at multiple outpatient practice locations, please save your Meaningful Use documentation from all sites in case of audit.

UI 563

Begin

UI 563

Meaningful Use Stage 2.3 Objective List Table

The screen on the following page displays the Meaningful Use Objective List Table.

The first time a topic is accessed you will see an **Edit** option for each measure.

Once information is successfully entered and saved for a measure it will be displayed in the **Entered** column on this screen.

Click **Edit** to enter or edit information for a measure, or click **Return to Main** to return to the Measures Topic List.

Objective Number	Objective	Measure	Entered	Select
Objective 1	Protect electronic health information created or maintained by the Certified EHR Technology (CEHRT) through the implementation of appropriate technical capabilities.	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 by Certified EHR Technology in accordance with requirements in 45 CFR 164.312(a)(2)(iv) and 45 CFR 164.308(d)(3), and implement security updates as necessary and correct identified security deficiencies as part of the EP's risk management process.		EDIT
Objective 2	Use clinical decision support to improve performance on high-priority health conditions.	Implement five clinical decision support interventions related to four or more clinical quality measures at a relevant point in patient care for the entire EHR reporting period. Absent four clinical quality measures related to an EP's scope of practice or patient population, the clinical decision support interventions must be related to high-priority health conditions. The EP has enabled and implemented the functionality for drug-drug and drug-allergy interaction checks for the entire EHR reporting period.		EDIT
Objective 3	Use computerized provider order entry (CPOE) for medication, laboratory and radiology orders directly entered by any licensed healthcare professional who can enter orders into the medical record per state, local and professional guidelines.	More than 60 percent of medication orders created by the EP during the EHR reporting period are recorded using computerized provider order entry. More than 30 percent of laboratory orders created by the EP during the EHR reporting period are recorded using computerized provider order entry. More than 30 percent of radiology orders created by the EP during the EHR reporting period are recorded using computerized provider order entry.		EDIT
Objective 4	Generate and transmit permissible prescriptions electronically (eRx).	More than 50 percent of all permissible prescriptions written by the EP are queried for a drug formulary and transmitted electronically using CEHRT.		EDIT
Objective 5	The EP who transitions their patients to another setting of care or provider of care or refers their patients to another provider of care provides a summary care record for each transition of care or referral.	The EP that transitions or refers their patient to another setting of care or provider of care 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.		EDIT
Objective 6	Use clinically relevant information from Certified EHR Technology to identify patient-specific education resources and provide those resources to the patient.	Patient-specific education resources identified by CEHRT are provided to patients for more than 10 percent of all unique patients with office visits seen by the EP during the EHR reporting period.		EDIT
Objective 7	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 who performs medication reconciliation for more than 50 percent of transitions of care in which the patient is transitioned into the care of the EP.		EDIT
Objective 8	Provide patients the ability to view online, download, and transmit their health information within four business days of the information being available to the EP.	More than 50 percent of all unique patients seen by the EP during the EHR reporting period are provided timely access to view online, download, and transmit to a third party their health information subject to the EP's discretion to withhold certain information. At least one patient seen by the EP during the EHR reporting period (or patient-authorized representative) views, downloads, or transmits to a third party his or her health information during the EHR reporting period.		EDIT
Objective 9	Use secure electronic messaging to communicate with patients on relevant health information.	For an EHR reporting period in 2016, for at least 1 patient seen by the EP during the EHR reporting period, a secure message was sent using the electronic messaging function of CEHRT to the patient (or the patient-authorized representative), or in response to a secure message sent by the patient (or the patient-authorized representative) during the EHR reporting period.		EDIT

Return to Main

MU 2.3 Objective 1 – Protect Patient Health Information

Enter information in all required fields.

Click **Save & Continue** to review your selection, click **Previous** to go back, or click **Reset** to restore this panel to the starting point or last saved data.

PLEASE NOTE: All providers attesting to Meaningful Use must upload a copy of the Security Risk Analysis documentation at the time of attestation.

Get Started R&A/Contact Info Eligibility Patient Volumes Attestation Review Submit

Attestation Meaningful Use Objectives

Objective 1 – Protect Patient Health Information

i Click [HERE](#) to review CMS Guidelines for this measure.

When ready click the **Save & Continue** button to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point.

(*) Red asterisk indicates a required field.

Objective: Protect electronic health information created or maintained by the Certified EHR Technology (CEHRT) through the implementation of appropriate technical capabilities.

Measure: 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 by Certified EHR Technology 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 EP's risk management process.

*****Did you meet this measure?
 Yes No

If 'Yes', please enter the following information:

Date (MM/DD/YYYY):

Name and Title (Person who conducted or reviewed the security risk analysis):

Previous Reset Save & Continue

MU 2.3 Objective 2 – Clinical Decision Support (CDS)

Enter information in all required fields.

Click **Save & Continue** to review your selection, click **Previous** to go back, or click **Reset** to restore this panel to the starting point or last saved data.

Get Started
R&A/Contact Info
Eligibility
Patient Volumes
Attestation
Review
Submit

Attestation Meaningful Use Objectives

Objective 2 - Clinical Decision Support (CDS)

i Click [HERE](#) to review CMS Guidelines for this measure.

When ready click the **Save & Continue** button to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point.

(*) Red asterisk indicates a required field.

Objective: Use clinical decision support to improve performance on high-priority health conditions.

Measure 1: Implement five clinical decision support interventions related to four or more clinical quality measures at a relevant point in patient care for the entire EHR reporting period. Absent four clinical quality measures related to an EP's scope of practice or patient population, the clinical decision support interventions must be related to high-priority health conditions.

*Did you meet this measure?
 Yes No

Measure 2 Exclusion: For the second measure, any EP who writes fewer than 100 medication orders during the EHR reporting period.

*Does this exclusion apply to you? If 'No', complete Measure 2.
 Yes No

Measure 2: The EP has enabled and implemented the functionality for drug-drug and drug-allergy interaction checks for the entire EHR reporting period.

Did you meet this measure?
 Yes No

Previous
Reset
Save & Continue

MU 2.3 Objective 3 – Computerized Provider Order Entry (CPOE)

Enter information in all required fields.

Click **Save & Continue** to review your selection, click **Previous** to go back, or click **Reset** to restore this panel to the starting point or last saved data.

Get Started
R&A/Contact Info
Eligibility
Patient Volumes
Attestation
Review
Submit

Attestation Meaningful Use Objectives

Objective 3 – Computerized Provider Order Entry (CPOE)

[Click HERE](#) to review CMS Guidelines for this measure.

When ready click the **Save & Continue** button to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point.

(*) Red asterisk indicates a required field.

Objective: Use computerized provider order entry (CPOE) for medication, laboratory and radiology orders directly entered by any licensed healthcare professional who can enter orders into the medical record per state, local and professional guidelines.

*** PATIENT RECORDS:** Please select whether the data used to support the measure was extracted from ALL patient records or only from patient records maintained using Certified EHR Technology.

This data was extracted from ALL patient records not just those maintained using Certified EHR Technology.

This data was extracted only from patient records maintained using Certified EHR Technology.

Measure 1: More than 60 percent of medication orders created by the EP during the EHR reporting period are recorded using computerized provider order entry.

Numerator 1: The number of orders in the denominator recorded using CPOE.
Denominator 1: Number of medication orders created by the EP during the EHR reporting period.
Exclusion 1: Any EP who writes fewer than 100 medication orders during the EHR reporting period.
*** Does this exclusion apply to you?**

Yes No
 If 'No', complete entries in the Numerator and Denominator.

Numerator 1: **Denominator 1:**

Measure 2: More than 30 percent of laboratory orders created by the EP during the EHR reporting period are recorded using computerized provider order entry.

Numerator 2: The number of orders in the denominator recorded using CPOE.
Denominator 2: Number of laboratory orders created by the EP during the EHR reporting period.
Exclusion 2: Any EP who writes fewer than 100 laboratory orders during the EHR reporting period.
*** Does this exclusion apply to you?**

Yes No
 If 'No', complete entries in the Numerator and Denominator.

Numerator 2: **Denominator 2:**

Measure 3: More than 30 percent of radiology orders created by the EP during the EHR reporting period are recorded using computerized provider order entry.

Numerator 3: The number of orders in the denominator recorded using CPOE.
Denominator 3: Number of radiology orders created by the EP during the EHR reporting period.
Exclusion 3: Any EP who writes fewer than 100 radiology orders during the EHR reporting period.
*** Does this exclusion apply to you?**

Yes No
 If 'No', complete entries in the Numerator and Denominator.

Numerator 3: **Denominator 3:**

MU 2.3 Objective 4 – Electronic Prescribing

Enter information in all required fields.

Click **Save & Continue** to review your selection, click **Previous** to go back, or click **Reset** to restore this panel to the starting point or last saved data.

Get Started R&A/Contact Info Eligibility Patient Volumes Attestation **Review** Submit

Attestation Meaningful Use Objectives

Objective 4 – Electronic Prescribing

i Click [HERE](#) to review CMS Guidelines for this measure.

When ready click the **Save & Continue** button to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point.

(*) Red asterisk indicates a required field.

Objective: Generate and transmit permissible prescriptions electronically (eRx).

Measure: More than 50 percent of all permissible prescriptions written by the EP are queried for a drug formulary and transmitted electronically using CEHRT.

*** PATIENT RECORDS:** Please select whether the data used to support the measure was extracted from ALL patient records or only from patient records maintained using Certified EHR Technology.

This data was extracted from ALL patient records not just those maintained using Certified EHR Technology.
 This data was extracted only from patient records maintained using Certified EHR Technology.

EXCLUSION 1: Any EP who writes fewer than 100 permissible prescriptions during the EHR reporting period.

*** Does this exclusion apply to you?**
 Yes No

EXCLUSION 2: Does not have a pharmacy within his or her organization and there are no pharmacies that accept electronic prescriptions within 10 miles of the EP's practice location at the start of his or her EHR reporting period.

*** Does this exclusion apply to you?**
 Yes No

If the exclusions do not apply to you, complete the following information.

Numerator: The number of prescriptions in the denominator generated, queried for a drug formulary, and transmitted electronically using CEHRT.
Denominator: Number of permissible prescriptions written during the EHR reporting period for drugs requiring a prescription in order to be dispensed.

Numerator: **Denominator:**

MU 2.3 Objective 5 – Health Information Exchange

Enter information in all required fields.

Click **Save & Continue** to review your selection, click **Previous** to go back, or click **Reset** to restore this panel to the starting point or last saved data.

Get Started R&A/Contact Info Eligibility Patient Volumes Attestation Review Submit

Attestation Meaningful Use Objectives

Objective 5 - Health Information Exchange

Click [HERE](#) to review CMS Guidelines for this measure.

When ready click the **Save & Continue** button to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point.

(*) Red asterisk indicates a required field.

Objective: The EP who transitions their patients to another setting of care or provider of care or refers their patients to another provider of care provides a summary care record for each transition of care or referral.

EXCLUSION: Any EP who transfers a patient to another setting or refers a patient to another provider less than 100 times during the EHR reporting period.

***** Does this exclusion apply to you? If 'Yes', do not complete the measure below. If 'No', complete entries in the measure below.

Yes No

Measure: The EP that transitions or refers their patient to another setting of care or provider of care 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.

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.

Denominator: Number of transitions of care and referrals during the EHR reporting period for which the EP was the transferring or referring provider.

Numerator: **Denominator:**

Previous Reset Save & Continue

MU 2.3 Objective 6 - Patient Specific Education

Enter information in all required fields.

Click **Save & Continue** to review your selection, click **Previous** to go back, or click **Reset** to restore this panel to the starting point or last saved data.

Get Started
R&A/Contact Info
Eligibility
Patient Volumes
Attestation
Review
Submit

Attestation Meaningful Use Objectives

Objective 6 - Patient-Specific Education

i Click [HERE](#) to review CMS Guidelines for this measure.

When ready click the **Save & Continue** button to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point.

(*) Red asterisk indicates a required field.

Objective: Use clinically relevant information from Certified EHR Technology to identify patient-specific education resources and provide those resources to the patient.

Measure: Patient-specific education resources identified by CEHRT are provided to patients for more than 10 percent of all unique patients with office visits seen by the EP during the EHR reporting period.

EXCLUSION: Any EP who has no office visits during the EHR reporting period.

***** Does this exclusion apply to you? If 'Yes', do not complete the Numerator or Denominator. If 'No', complete entries in the Numerator and Denominator.

Yes
 No

Numerator: Number of patients in the denominator who were provided patient-specific education resources identified by the Certified EHR Technology.

Denominator: Number of unique patients with office visits seen by the EP during the EHR reporting period.

Numerator:
Denominator:

Previous
Reset
Save & Continue

MU 2.3 Objective 7– Medication Reconciliation

Enter information in all required fields.

Click **Save & Continue** to review your selection, click **Previous** to go back, or click **Reset** to restore this panel to the starting point or last saved data.

Get Started
R&A/Contact Info
Eligibility
Patient Volumes
Attestation
Review
Submit

Attestation Meaningful Use Objectives

Objective 7 – Medication Reconciliation

i Click [HERE](#) to review CMS Guidelines for this measure.

When ready click the **Save & Continue** button to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point.

(*) Red asterisk indicates a required field.

Objective: 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.

Measure: The EP who performs medication reconciliation for more than 50 percent of transitions of care in which the patient is transitioned into the care of the EP.

EXCLUSION: Any EP who was not the recipient of any transitions of care during the EHR reporting period.

* Does this exclusion apply to you? If 'Yes', do not complete the Numerator or Denominator. If 'No', complete entries in the Numerator and Denominator.
 Yes No

Numerator: The number of transitions of care in the denominator where medication reconciliation was performed.
Denominator: Number of transitions of care during the EHR reporting period for which the EP was the receiving party of the transition.

Numerator: **Denominator:**

Previous
Reset
Save & Continue

MU 2.3 Objective 8 – Patient Electronic Access

Enter information in all required fields.

Click **Save & Continue** to review your selection, click **Previous** to go back, or click **Reset** to restore this panel to the starting point or last saved data.

Get Started
RBA/Contact Info
Eligibility
Patient Volumes
Attestation
Review
Submit

Attestation Meaningful Use Objectives

Objective 8 – Patient Electronic Access

i Click [HERE](#) to review CMS Guidelines for this measure.

When ready click the **Save & Continue** button to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point.

(*) Red asterisk indicates a required field.

Objective: Provide patients the ability to view online, download, and transmit their health information within four business days of the information being available to the EP.

Exclusion Measure 1 and 2: Any EP who neither orders nor creates any of the information listed for inclusion as part of the measures. This will exclude both measures.

* Does the exclusion apply to you? If 'Yes', do not complete Measure 1. If 'No', complete entries for Measure 1.

Yes No

Measure 1: More than 50 percent of all unique patients seen by the EP during the EHR reporting period are provided timely access to view online, download, and transmit to a third party their health information subject to the EP's discretion to withhold certain information.

Numerator 1: The number of patients in the denominator who have timely (within four business days after the information is available to the EP) online access to their health information.
Denominator 1: Number of unique patients seen by the EP during the EHR reporting period.

Numerator 1: **Denominator 1:**

Exclusion Measure 2: Conducts 50 percent or more of his or her patient encounters 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 EHR reporting period. This will only exclude Measure 2.

Does the exclusion apply to you? If 'Yes', do not complete Measure 2. If 'No', complete entries for Measure 2.

Yes No

Measure 2: At least one patient seen by the EP during the EHR reporting period (or patient-authorized representative) views, downloads, or transmits to a third party his or her health information during the EHR reporting period.

Numerator 2: The number of patients in the denominator (or patient-authorized representative) who view, download, or transmit to a third party their health information.
Denominator 2: Number of unique patients seen by the EP during the EHR reporting period.

Numerator 2: **Denominator 2:**

Previous
Reset
Save & Continue

MU 2.3 Objective 9 – Secure Electronic Messaging

Enter information in all required fields.

Click **Save & Continue** to review your selection, click **Previous** to go back, or click **Reset** to restore this panel to the starting point or last saved data.

Get Started
R&A/Contact Info
Eligibility
Patient Volumes
Attestation
Review
Submit

Attestation Meaningful Use Objectives

Objective 9 – Secure Electronic Messaging

Click [HERE](#) to review CMS Guidelines for this measure.

When ready click the **Save & Continue** button to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point.

(*) Red asterisk indicates a required field.

Objective: Use secure electronic messaging to communicate with patients on relevant health information.

EXCLUSION: Any EP who has no office visits during the EHR reporting period, or any EP who conducts 50 percent or more of his or her patient encounters 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 EHR reporting period.

* Does this exclusion apply to you? If 'Yes', do not complete entries in the Numerator and Denominator. If 'No', complete entries in the Numerator and Denominator.

Yes No

Measure: For an EHR reporting period in 2016, for at least 1 patient seen by the EP during the EHR reporting period, a secure message was sent using the electronic messaging function of CEHRT to the patient (or the patient-authorized representative), or in response to a secure message sent by the patient (or the patient-authorized representative) during the EHR reporting period.

Numerator: The number of patients in the denominator for whom a secure electronic message is sent to the patient (or patient-authorized representative), or in response to a secure message sent by the patient (or patient-authorized representative).

Denominator: Number of unique patients seen by the EP during the EHR reporting period.

Numerator: **Denominator:**

Previous
Reset
Save & Continue

Return to Main: Back to the Measure Topic List

Once you have attested to all the measures for this topic, click **Return to Main** to return to the Measures Topic List.

Get Started | RRA/Contact Info | Eligibility | Patient Volumes | Attestation | Review | Submit

Attestation Meaningful Use Objectives

To edit information, select the "EDIT" button next to the objective that you would like to edit. All successfully submitted progress on entry of measures will be retained if your session is terminated.

When all objectives have been edited and you are satisfied with the entries, select the "Return to Main" button to access the main attestation topic list.

Meaningful Use Objective List Table

Objective Number	Objective	Measure	Entered	Select
Objective 1	Protect electronic health information created or maintained by the Certified EHR Technology (CEHRT) through the implementation of appropriate technical capabilities.	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 by Certified EHR Technology 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 EP's risk management process.	Measure = Yes Date = 10/01/2014 Name and Title = Dr. Medicaid - Provider	EDIT
Objective 2	Use clinical decision support to improve performance on high-priority health conditions.	Implement five clinical decision support interventions related to four or more clinical quality measures at a relevant point in patient care for the entire EHR reporting period. Absent four clinical quality measures related to an EP's scope of practice or patient population, the clinical decision support interventions must be related to high-priority health conditions. The EP has enabled and implemented the functionality for drug-drug and drug-allergy interaction checks for the entire EHR reporting period.	Measure 1 = Yes Measure 2 Exclusion = No Measure 2 = Yes	EDIT
Objective 3	Use computerized provider order entry (CPOE) for medication, laboratory and radiology orders directly entered by any licensed healthcare professional who can enter orders into the medical record per state, local and professional guidelines.	More than 60 percent of medication orders created by the EP during the EHR reporting period are recorded using computerized provider order entry. More than 30 percent of laboratory orders created by the EP during the EHR reporting period are recorded using computerized provider order entry. More than 30 percent of radiology orders created by the EP during the EHR reporting period are recorded using computerized provider order entry.	Patient Records = Only EHR Measure 1 Exclusion 1 = No Numerator 1 = 8 Denominator 1 = 10 Measure 2 Exclusion 2 = No Numerator 2 = 5 Denominator 2 = 10 Measure 3 Exclusion 3 = No Numerator 3 = 4 Denominator 3 = 10	EDIT
Objective 4	Generate and transmit permissible prescriptions electronically (eRx).	More than 50 percent of all permissible prescriptions written by the EP are queried for a drug formulary and transmitted electronically using CEHRT.	Patient Records = Only EHR Exclusion 1 = No Exclusion 2 = No Numerator = 7 Denominator = 10	EDIT
Objective 5	The EP who transitions their patients to another setting of care or provider of care or refers their patients to another provider of care provides a summary care record for each transition of care or referral.	The EP that transitions or refers their patient to another setting of care or provider of care 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.	Exclusion = No Numerator = 5 Denominator = 10	EDIT
Objective 6	Use clinically relevant information from Certified EHR Technology to identify patient-specific education resources and provide those resources to the patient.	Patient-specific education resources identified by CEHRT are provided to patients for more than 10 percent of all unique patients with office visits seen by the EP during the EHR reporting period.	Exclusion = No Numerator = 5 Denominator = 10	EDIT
Objective 7	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 who performs medication reconciliation for more than 50 percent of transitions of care in which the patient is transitioned into the care of the EP.	Exclusion = No Numerator = 7 Denominator = 10	EDIT
Objective 8	Provide patients the ability to view online, download, and transmit their health information within four business days of the information being available to the EP.	More than 50 percent of all unique patients seen by the EP during the EHR reporting period are provided timely access to view online, download, and transmit to a third party their health information subject to the EP's discretion to withhold certain information. At least one patient seen by the EP during the EHR reporting period (or patient-authorized representative) views, downloads, or transmits to a third party his or her health information during the EHR reporting period.	Measure 1 Exclusion Measure 1 and 2 = No Numerator 1 = 7 Denominator 1 = 10 Measure 2 Exclusion Measure 2 = No Numerator 2 = 6 Denominator 2 = 10	EDIT
Objective 9	Use secure electronic messaging to communicate with patients on relevant health information.	The capability for patients to send and receive a secure electronic message with the EP was fully enabled during the EHR reporting period. Did you have the secure electronic messaging enabled during the EHR reporting period?	Exclusion = No Measure = Yes	EDIT

Return to Main

If all measures were entered and saved, a check mark will display under the Completed column for the topic as displayed in the example below. You can continue to edit the topic measure after it has been marked complete.

Click the **Edit** button to further edit the topic, click **Clear All** to clear all topic information you entered, or click **Begin** to start the next topic.

To access the Required Public Health Objective, click the **Begin** button on the Meaningful Use Objectives Dashboard.

Get Started
R&A/Contact Info
Eligibility
Patient Volumes
Attestation
Review
Submit

Attestation Meaningful Use Objectives

Please complete the following topic areas: General Requirements, Meaningful Use Objectives (1-9), Required Public Health Objective (10) and one of the Clinical Quality Measures (CQMs) options. The following icon will display to the left of the topic name when the minimum required entries are completed.

Please Note: Specific requirements apply to the Required Public Health Objective (10). You may be instructed to complete additional steps depending on exclusions taken on completed objectives even though a is displayed.

Available actions for a topic will be determined by current progress level. To start a topic, select the "**Begin**" button. To modify a topic where entries have been made, select the "**EDIT**" button for a topic to modify any previously entered information. Select "**Previous**" to return.

Completed?	Topics	Progress	Action
	General Requirements	2/2	<div style="border: 1px solid #ccc; padding: 2px; display: inline-block;">EDIT</div> <div style="border: 1px solid #ccc; padding: 2px; display: inline-block;">Clear All</div>
	Meaningful Use Objectives (1-9)	9/9	<div style="border: 1px solid #ccc; padding: 2px; display: inline-block;">EDIT</div> <div style="border: 1px solid #ccc; padding: 2px; display: inline-block;">Clear All</div>
	Required Public Health Objective (10)		<div style="border: 1px solid #ccc; padding: 2px; display: inline-block; border-radius: 50%;">Begin</div>

Manual Clinical Quality Measures

Please select one of the following three Clinical Quality Measure set options.

Only one Clinical Quality Measure (CQM) set can be completed. If you would like to switch to a different CQM set after one is started, use the "**Clear All**" button on the previously selected CQM set to enable the "**Begin**" button on a different CQM set. *Please note that the previously entered information will be cleared once the "**Clear All**" button is selected.*

Clinical Quality Measure - General	<div style="border: 1px solid #ccc; padding: 2px; display: inline-block;">Begin</div>
Clinical Quality Measure - Adult Set	<div style="border: 1px solid #ccc; padding: 2px; display: inline-block;">Begin</div>
Clinical Quality Measure - Pediatric Set	<div style="border: 1px solid #ccc; padding: 2px; display: inline-block;">Begin</div>
Cancel and Choose Electronic	<div style="border: 1px solid #ccc; padding: 2px; display: inline-block;">Cancel</div>

Note:
When all topics are marked as completed, select the "**Save & Continue**" button to complete the attestation process.

Previous

Save & Continue

2016 2.3 Required Public Health Objective

For EPs scheduled to be in Stage 2 in Program Year 2016 (MU 2.3), this initial screen provides information about the Required Public Health Objective.

A **Public Health Objective Documentation Aid** is available at the Vermont Medicaid EHRIP website to assist EPs in providing documentation for the Public Health Measures they attest to, as well as documentation for the exclusions they qualify for. It is strongly recommended that the Public Health Objective Documentation Aid is completed and uploaded when your application is submitted. It lists suggested documentation artifacts, which, when provided at the time of attestation, will facilitate the application review process. The information will also help furnish the information that would be requested in the event of an audit.

Download the **Program Year 2016 Public Health Objective Documentation Aid for EPs Scheduled to be in Stage 2** here: <http://healthdata.vermont.gov/ehrip/2016/PH/Docs>

Click **Begin** to continue to the Required Public Health Objective Selection screen.

Program Year 2016 Scheduled to Meet Stage 2: Required Public Health Objective (Objective 10)

EPs scheduled to be in Stage 2 must attest to at least two measures from the Public Health Reporting Objective Measures 1-3.

Measure 1: Immunization Registry Reporting. The EP is in Active Engagement with a public health agency to submit immunization data.
Measure 2: Syndromic Surveillance Reporting. The EP is in Active Engagement with a public health agency to submit Syndromic surveillance data.
Measure 3: Specialized Registry Reporting. The EP is in Active Engagement to submit data to a specialized registry. EPs may report to more than one specialized registry, and may count specialized registry reporting more than once to meet the required number of measures for the Objective.

For EPs who are scheduled to be in Stage 2, an exclusion for a measure does not count toward the total of two measures. If an EP excludes from a measure, they must meet or exclude from the remaining measures in order to meet the objective. If the EP qualifies for multiple exclusions and the remaining number of measures available to the EP is less than two, the EP can meet the objective by meeting the one remaining measure available to them. If no measures remain available, the EP can meet the objective by meeting the requirements for exclusion from all three measures. They may claim an Alternate Exclusion for Measure 2 or Measure 3 (Syndromic Surveillance Measure or Specialized Registry Reporting Measure).

A **Public Health Objective Documentation Aid** is available at the Vermont Medicaid EHRIP website to assist EPs in providing documentation for the Public Health Measures they attest to, as well as documentation for the exclusions they qualify for. It is strongly recommended that the Public Health Objective Documentation Aid is completed and uploaded when your application is submitted. It lists suggested documentation artifacts, which, when provided at the time of attestation, will facilitate the application review process. The information will also help furnish the information that would be requested in the event of an audit.

Download the **Program Year 2016 Public Health Objective Documentation Aid for EPs Scheduled to be in Stage 2** here: <http://healthdata.vermont.gov/ehrip/2016/PH/Docs>

Helpful Hints:

1. For more details on each measure option, select the **'CLICK HERE'** link at the top left of each screen.
2. You may review the completed option by selecting the **'EDIT'** button.
3. After completing the Public Health Objective, you will receive a white checkmark in the green circle. The checkmark means the section is completed, but does not mean you passed or failed the Objective.
4. Evaluation of Public Health Objective is made after the application is electronically signed. You will receive a message if the Objective is not met. If any Objectives are not met, you will have the opportunity to change and electronically sign again.

UI 564

Begin

UI 564

MU 2.3 Required Public Health List Table

From the Required Public Health Objective Selection screen, choose a minimum of two Required Public Health Objectives to attest to.

If a measure is selected and information is entered for that measure, unselecting the measure will clear all information previously entered.

Click **Save & Continue** to proceed, or click **Return to Main** to go back. Click **Reset** to restore this panel to the starting point or last saved data.

Attestation Meaningful Use Objectives

Providers are required to successfully attest to two Public Health Options without taking an exclusion. Select the two Options for attestation without taking an exclusion. Option 3 may be used twice to attest. If you cannot successfully attest to any Option, or can only successfully attest to one Option, then select Options 1, 2, and 3A. You cannot exclude both Option 3A and Option 3B. Note, selecting all exclusions does not mean the Objective fails.

When all objectives have been edited and you are satisfied with the entries, select the "Return to Main" button to access the main attestation topic list.

Objective Number	Objective	Measure	Select
Objective 10 Option 1	The EP is in active engagement with an immunization registry or immunization information systems to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.	Option 1 - Immunization Registry Reporting: The EP is in active engagement with a public health agency to submit immunization data.	<input checked="" type="checkbox"/>
Objective 10 Option 2	The EP is in active engagement with a syndromic surveillance registry to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.	Option 2 - Syndromic Surveillance Reporting: The EP is in active engagement with a public health agency to submit syndromic surveillance data.	<input checked="" type="checkbox"/>
Objective 10 Option 3A	The EP is in active engagement with a specialized registry to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.	Option 3 - Specialized Registry Reporting: The EP is in active engagement to submit data to a specialized registry.	<input checked="" type="checkbox"/>
Objective 10 Option 3B	The EP is in active engagement with a specialized registry to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.	Option 3 - Specialized Registry Reporting: The EP is in active engagement to submit data to a specialized registry.	<input checked="" type="checkbox"/>

Return to Main Reset **Save & Continue**

The measures you select to attest to will display on the Required Public Health Objective List Table. The example on the following page displays the four measures selected from the above screen example.

You must complete all the measures selected.

Once information is successfully entered and saved for a measure it will be displayed in the Entered column on this screen.

Click **Edit** to enter or edit information for a measure, or click **Return to Selection List** to return to the Required Public Health Objective List Selection screen.

Name	Dr. Medicaid Provider	Applicant NPI	9999999999
Personal TIN/SSN	999999999	Payee TIN	999999999
Payment Year	3	Program Year	2016

Get Started
R&A/Contact Info
Eligibility
Patient Volumes
Attestation
Review
Submit

Attestation Meaningful Use Objectives

To edit information, select the "EDIT" button next to the public health objective that you would like to edit. All successfully submitted progress on entry of measures will be retained if your session is terminated.

When all public health objectives have been edited and you are satisfied with the entries, select the "Return to Selection List" button to access the main attestation topic list.

Objective Number	Objective	Measure	Entered	Select
Objective 10 Option 1	The EP is in active engagement with an immunization registry or immunization information systems to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.	Option 1 - Immunization Registry Reporting: The EP is in active engagement with a public health agency to submit immunization data.		EDIT
Objective 10 Option 2	The EP is in active engagement with a syndromic surveillance registry to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.	Option 2 - Syndromic Surveillance Reporting: The EP is in active engagement with a public health agency to submit syndromic surveillance data.		EDIT
Objective 10 Option 3A	The EP is in active engagement with a specialized registry to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.	Option 3 - Specialized Registry Reporting: The EP is in active engagement to submit data to a specialized registry.		EDIT
Objective 10 Option 3B	The EP is in active engagement with a specialized registry to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.	Option 3 - Specialized Registry Reporting: The EP is in active engagement to submit data to a specialized registry.		EDIT

Return to Selection List

The following is a list of the Meaningful Use Menu Measures that you may attest to. Click on the Screen Example to see an example of the screen layout.

Required Public Health Objective	Screen Example
Objective 10 Option 1 – Immunization Registry Reporting	Screen 1
Objective 10 Option 2 – Syndromic Surveillance Reporting	Screen 2
Objective 10 Option 3A – Specialized Registry Reporting	Screen 3
Objective 10 Option 3B – Specialized Registry Reporting	Screen 4

There are a total of 4 Meaningful Use Menu Measure screens. As you proceed through the Required Public Health Objective section of MAPIR, you may see up to 4 different screens, depending on your selection. Instructions for each measure are provided on the screen. For additional help with a specific Required Public Health Objective, click on the link provided above the blue instruction box.

MU 2.3 Objective 10 Option 1 – Immunization Registry Reporting

The following Required Public Health Objective 10 Option 1 – Immunization Registry Reporting uses this screen layout:

Enter information in all required fields.

Click **Save & Continue** to review your selection, click **Previous** to go back, or click **Reset** to restore this panel to the starting point or last saved data.

Attestation Meaningful Use Objectives

Objective 10 Option 1 - Immunization Registry Reporting

Click [HERE](#) to review CMS Guidelines for this measure.

*When ready click the **Save & Continue** button to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point.*

(*) Red asterisk indicates a required field.

Objective: The EP is in active engagement with an immunization registry or immunization information systems to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.

Measure: Option 1 - Immunization Registry Reporting: The EP is in active engagement with a public health agency to submit immunization data.

***Does this option apply to you?**
 Yes No

Active Engagement Options: If you have answered 'Yes' above, please select one of the options listed below.

Completed registration to submit data
 Testing and validation
 Production

EXCLUSION: If Option 1 is 'No', then select one of the Exclusions below. Any EP that meets one of the following criteria may be excluded from this objective.

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 EHR reporting period.
 Yes No

Operates in a jurisdiction where no immunization registry or immunization information system has declared readiness to receive immunization data from the EP at the start of the EHR reporting period.
 Yes No

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 EHR reporting period.
 Yes No

Previous **Reset** **Save & Continue**

MU 2.3 Objective 10 Option 2 – Syndromic Surveillance Reporting

The Required Public Health Objective 10 Option 2 – Syndromic Surveillance Reporting uses this screen layout.

Enter information in all required fields.

Click **Save & Continue** to review your selection, click **Previous** to go back, or click **Reset** to restore this panel to the starting point or last saved data.

Get Started R&A/Contact Info Eligibility Patient Volumes Attestation Review Submit

Attestation Meaningful Use Objectives

Objective 10 Option 2 - Syndromic Surveillance Reporting

i Click [HERE](#) to review CMS Guidelines for this measure.

When ready click the **Save & Continue** button to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point.

(*) Red asterisk indicates a required field.

Objective: The EP is in active engagement with a syndromic surveillance registry to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.

Measure: Option 2 - Syndromic Surveillance Reporting: The EP is in active engagement with a public health agency to submit syndromic surveillance data.

*Does this option apply to you?
 Yes No

Active Engagement Options: If you have answered 'Yes' above, please select one of the options listed below.

Completed registration to submit data
 Testing and validation
 Production

EXCLUSION: If Option 2 is 'No', then select one of the Exclusions below. Any EP that meets one of the following criteria may be excluded from this objective.

Is not in a category of providers from which ambulatory syndromic surveillance data is collected by their jurisdiction's syndromic surveillance system.
 Yes No

Operates in a jurisdiction for which no public health agency is capable of receiving electronic syndromic surveillance data from EPs in the specific standards required to meet the CEHRT definition at the start of the EHR reporting period.
 Yes No

Operates in a jurisdiction where no public health agency has declared readiness to receive syndromic surveillance data from EPs at the start of the EHR reporting period.
 Yes No

The EP did not plan to report on syndromic surveillance data, therefore the EP is able to claim an exclusion.
 Yes No

Previous Reset Save & Continue

MU 2.3 Objective 10 Options 3A – Specialized Registry Reporting

The Required Public Health Objective 10 Option 3A – Specialized Registry Reporting uses this screen layout.

Click **Save & Continue** to review your selection, click **Previous** to go back, or click **Reset** to restore this panel to the starting point or last saved data.

Get Started
R&A/Contact Info
Eligibility
Patient Volumes
Attestation
Review
Submit

Attestation Meaningful Use Objectives

Objective 10 Option 3A - Specialized Registry Reporting

i Click [HERE](#) to review CMS Guidelines for this measure.

When ready click the **Save & Continue** button to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point.

(*) Red asterisk indicates a required field.

Objective: The EP is in active engagement with a specialized registry to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.

Measure: Option 3 - Specialized Registry Reporting: The EP is in active engagement to submit data to a specialized registry.

***Does this option apply to you?**
 Yes No

If 'Yes', enter the name of the specialized registry used below.

Active Engagement Options: If you have answered 'Yes' above, please select one of the options listed below.

Completed registration to submit data
 Testing and validation
 Production

EXCLUSION: If Option 3 is 'No', then select one of the Exclusions below. Any EP that meets one of the following criteria may be excluded from this objective.

Does not diagnose or treat any disease or condition associated with, or collect relevant data that is collected by, a specialized registry in their jurisdiction during the EHR reporting period.
 Yes No

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 EHR reporting period.
 Yes No

Operates in a jurisdiction where no specialized registry for which the EP is eligible has declared readiness to receive electronic registry transactions at the beginning of the EHR reporting period.
 Yes No

The EP did not plan to report on specialized registry data, therefore the EP is able to claim an exclusion.
 Yes No

Previous
Reset
Save & Continue

MU 2.3 Objective 10 Option 3B – Specialized Registry Reporting

The Required Public Health Objective 10 Option 3B – Specialized Registry Reporting uses this screen layout.

Click **Save & Continue** to review your selection, click **Previous** to go back, or click **Reset** to restore this panel to the starting point or last saved data.

The screenshot shows a web application interface for 'Attestation Meaningful Use Objectives'. At the top, there is a navigation bar with buttons: 'Get Started', 'R&A/Contact Info' (checked), 'Eligibility' (checked), 'Patient Volumes' (checked), 'Attestation' (active), 'Review', and 'Submit'. Below this is a header 'Attestation Meaningful Use Objectives' and a sub-header 'Objective 10 Option 3B - Specialized Registry Reporting'. An information icon and text link to CMS Guidelines. A blue instruction box states: 'When ready click the **Save & Continue** button to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point.' A red asterisk note indicates required fields. The 'Objective' is defined as active engagement with a specialized registry. The 'Measure' is 'Option 3 - Specialized Registry Reporting'. A required text field asks for the registry name. Below are three radio button options for 'Active Engagement Options': 'Completed registration to submit data', 'Testing and validation', and 'Production'. At the bottom are 'Previous', 'Reset', and 'Save & Continue' buttons.

Review PH Measures and Return to Main

After you enter information for a measure and click **Save & Continue**, you will return to the MU 2.3 Required Public Health Objective List Table. The information you entered for that measure will be displayed in the Entered column of the table (the table below does not have data in the "Entered" column, it is an example of the screen you will see).

You can continue to edit the measures at any point prior to submitting the application.

Click **Edit** for the next measure.

To edit information, select the "EDIT" button next to the public health objective that you would like to edit. All successfully submitted progress on entry of measures will be retained if your session is terminated.

When all public health objectives have been edited and you are satisfied with the entries, select the "Return to Selection List" button to access the main attestation topic list.

Objective Number	Objective	Measure	Entered	Select
Objective 10 Option 1	The EP is in active engagement with an immunization registry or immunization information systems to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.	Option 1 - Immunization Registry Reporting: The EP is in active engagement with a public health agency to submit immunization data.		EDIT
Objective 10 Option 2	The EP is in active engagement with a syndromic surveillance registry to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.	Option 2 - Syndromic Surveillance Reporting: The EP is in active engagement with a public health agency to submit syndromic surveillance data.		EDIT
Objective 10 Option 3A	The EP is in active engagement with a specialized registry to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.	Option 3 - Specialized Registry Reporting: The EP is in active engagement to submit data to a specialized registry.		EDIT
Objective 10 Option 3B	The EP is in active engagement with a specialized registry to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.	Option 3 - Specialized Registry Reporting: The EP is in active engagement to submit data to a specialized registry.		EDIT

Return to Selection List

Once you have attested to all the selected measures for Public Health reporting, click **Return to Selection List** to return to the Meaningful Use Menu Measure Selection screen.

(Note: the above screenshot does not display the measures attested do, but is illustrating the button to use once finished).

Get Started R&A/Contact Info Eligibility Patient Volumes **Attestation** Review Submit

Attestation Meaningful Use Objectives

Providers are required to successfully attest to two Public Health Options without taking an exclusion. Select the two Options for attestation without taking an exclusion. Option 3 may be used twice to attest. If you cannot successfully attest to any Option, or can only successfully attest to one Option, then select Options 1, 2, and 3A. Option 3A cannot be excluded twice. Note, selecting all exclusions does not mean the Objective fails.

Required Public Health Objective List Table

Objective Number	Objective	Measure	Select
Objective 10 Option 1	The EP is in active engagement with an immunization registry or immunization information systems to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.	Option 1 - Immunization Registry Reporting: The EP is in active engagement with a public health agency to submit immunization data.	<input checked="" type="checkbox"/>
Objective 10 Option 2	The EP is in active engagement with a syndromic surveillance registry to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.	Option 2 - Syndromic Surveillance Reporting: The EP is in active engagement with a public health agency to submit syndromic surveillance data.	<input checked="" type="checkbox"/>
Objective 10 Option 3A	The EP is in active engagement with a specialized registry to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.	Option 3 - Specialized Registry Reporting: The EP is in active engagement to submit data to a specialized registry.	<input checked="" type="checkbox"/>
Objective 10 Option 3B	The EP is in active engagement with a specialized registry to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.	Option 3 - Specialized Registry Reporting: The EP is in active engagement to submit data to a specialized registry.	<input checked="" type="checkbox"/>

Return to Main Reset Save & Continue

Click **Save & Continue** to review your selection, click **Previous** to go back, or click **Reset** to restore this panel to the starting point or last saved data.

If all measures were entered and saved, a check mark will display under the Completed column for the Required Health Objectives. You can continue to edit the topic measure after it has been marked complete.

Click the **Edit** button to further edit the topic, or click **Clear All** to clear the topic information you entered. Click **Begin** to start the next topic.

Get Started
R&A/Contact Info
Eligibility
Patient Volumes
Attestation
Review
Submit

Attestation Meaningful Use Objectives

Please complete the following topic areas: General Requirements, Meaningful Use Objectives, Required Public Health Objectives, and one of the Clinical Quality Measures (CQMs) options. The following icon will display to the left of the topic name when the minimum required entries are completed.

Please Note: Specific requirements apply to Meaningful Use Objectives. You may be instructed to complete additional steps depending on exclusions taken on completed objectives even though a is displayed.

Available actions for a topic will be determined by current progress level. To start a topic, select the "**Begin**" button. To modify a topic where entries have been made, select the "**EDIT**" button for a topic to modify any previously entered information. Select "**Previous**" to return.

Completed?	Topics	Progress	Action
	General Requirements	1/1	<div style="display: flex; gap: 5px;"> EDIT Clear All </div>
	Meaningful Use Objectives	9/9	<div style="display: flex; gap: 5px;"> EDIT Clear All </div>
	Required Public Health Objectives	4/4	<div style="display: flex; gap: 5px;"> EDIT Clear All </div>

Manual Clinical Quality Measures

Please select one of the following three Clinical Quality Measure set options.

Only one Clinical Quality Measure (CQM) set can be completed. If you would like to switch to a different CQM set after one is started, use the "**Clear All**" button on the previously selected CQM set to enable the "**Begin**" button on a different CQM set. *Please note that the previously entered information will be cleared once the "**Clear All**" button is selected.*

Clinical Quality Measure - General	Begin
Clinical Quality Measure - Adult Set	Begin
Clinical Quality Measure - Pediatric Set	Begin
Cancel and Choose Electronic	Cancel

Note:
When all topics are marked as completed, select the "**Save & Continue**" button to complete the attestation process.

Previous
Save & Continue

Proceed to the section in the User Guide on **Meaningful Use Clinical Quality Measures on [page 71](#)**.

2016 Scheduled for Stage 1 (MU 1.5)

2015 Stage 1.5 – Objectives and Measures

If you are scheduled to meet Meaningful Use Stage 1 in Program Year 2016, MAPIR refers to this as **MU Stage 1.5**.

The screen on the following page displays the Measures Topic List. The Attestation Meaningful Use Objectives are divided into three distinct topics: General Requirements, Meaningful Use Objectives, and the Required Public Health Objective. The Manual Clinical Quality Measures are further divided into 3 topics, of which one must be selected: Clinical Quality Measure – General, Clinical Quality Measure – Adult Set, and Clinical Quality Measure – Pediatric Set.

You may complete the four topics in any order.

While it is not required that you begin each topic in the order shown on the screen, this user guide will follow the order in which the topics are listed.

Click **Begin** to start a topic.

The screenshot shows a web application interface with a navigation bar at the top containing buttons for 'Get Started', 'R&A/Contact Info', 'Eligibility', 'Patient Volumes', 'Attestation', 'Review', and 'Submit'. The main content area is divided into two sections:

Attestation Meaningful Use Objectives

Please complete the following topic areas: General Requirements, Meaningful Use Objectives (1-9), Required Public Health Objective (10) and one of the Clinical Quality Measures (CQMs) options. The following icon will display to the left of the topic name when the minimum required entries are completed. ✓

Please Note: Specific requirements apply to the Required Public Health Objective (10). You may be instructed to complete additional steps depending on exclusions taken on completed objectives even though a ✓ is displayed.

Available actions for a topic will be determined by current progress level. To start a topic, select the "Begin" button. To modify a topic where entries have been made, select the "EDIT" button for a topic to modify any previously entered information. Select "Previous" to return.

Completed?	Topics	Progress	Action
	General Requirements		Begin
	Meaningful Use Objectives (1-9)		Begin
	Required Public Health Objective (10)		Begin

Manual Clinical Quality Measures

Please select one of the following three Clinical Quality Measure set options.

Only one Clinical Quality Measure (CQM) set can be completed. If you would like to switch to a different CQM set after one is started, use the "Clear All" button on the previously selected CQM set to enable the "Begin" button on a different CQM set. Please note that the previously entered information will be cleared once the "Clear All" button is selected.

Clinical Quality Measure - General	Begin
Clinical Quality Measure - Adult Set	Begin
Clinical Quality Measure - Pediatric Set	Begin
Cancel and Choose Electronic	Cancel

Note:
When all topics are marked as completed, select the "Save & Continue" button to complete the attestation process.

Previous Save & Continue

2016 1.5 Meaningful Use General Requirements

Enter information in all required fields.

Click **Save & Continue** to review your selection, click **Previous** to go back, or click **Reset** to restore this panel to the starting point or last saved data.

Note the addition of two questions assessing certification of MU measures and the reporting period of CQM measures compared to MU measures.

Get Started RRA/Contact Info Eligibility Patient Volumes Attestation Review Submit

Meaningful Use General Requirements

Please answer the following questions to determine your eligibility for the Medicaid EHR Incentive Program.

When ready click the **Save & Continue** button to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point.

(*) Red asterisk indicates a required field.

* Please demonstrate that at least 50% of all your encounters occur in a location(s) where certified EHR technology is being utilized. * Numerator: * Denominator:

* Please demonstrate that at least 80% of all unique patients have their data in the certified EHR during the EHR reporting period. * Numerator: * Denominator:

* Is your Certified EHR System certified for all the Meaningful Use measures you will be completing for this application? Yes No

* Is your CQM reporting period the same as your Meaningful Use reporting period? Please be sure to upload your Meaningful Use and CQM documentation into the application. Yes No

Previous Reset Save & Continue

If all measures were entered and saved, a check mark will display under the Completed column for the General Requirements topic as displayed in the example below. You can continue to edit the topic measure after it has been marked complete.

Click the **Edit** button to further edit the topic, click **Clear All** to clear all topic information you entered, or click **Begin** to start the next topic.

Get Started
R&A/Contact Info
Eligibility
Patient Volumes
Attestation
Review
Submit

Attestation Meaningful Use Objectives

Please complete the following topic areas: General Requirements, Meaningful Use Objectives (1-9), Required Public Health Objective (10) and one of the Clinical Quality Measures (CQMs) options. The following icon will display to the left of the topic name when the minimum required entries are completed.

Please Note: Specific requirements apply to the Required Public Health Objective (10). You may be instructed to complete additional steps depending on exclusions taken on completed objectives even though a is displayed.

Available actions for a topic will be determined by current progress level. To start a topic, select the **"Begin"** button. To modify a topic where entries have been made, select the **"EDIT"** button for a topic to modify any previously entered information. Select **"Previous"** to return.

Completed?	Topics	Progress	Action
	General Requirements	2/2	<div style="display: flex; gap: 5px;"> <input type="button" value="EDIT"/> <input type="button" value="Clear All"/> </div>
	Meaningful Use Objectives (1-9)		<div style="border: 2px solid red; border-radius: 50%; padding: 2px; display: inline-block;"> <input type="button" value="Begin"/> </div>
	Required Public Health Objective (10)		<input type="button" value="Begin"/>

Manual Clinical Quality Measures

Please select one of the following three Clinical Quality Measure set options.

Only one Clinical Quality Measure (CQM) set can be completed. If you would like to switch to a different CQM set after one is started, use the **"Clear All"** button on the previously selected CQM set to enable the **"Begin"** button on a different CQM set. *Please note that the previously entered information will be cleared once the **"Clear All"** button is selected.*

Clinical Quality Measure - General	<input type="button" value="Begin"/>
Clinical Quality Measure - Adult Set	<input type="button" value="Begin"/>
Clinical Quality Measure - Pediatric Set	<input type="button" value="Begin"/>
Cancel and Choose Electronic	<input type="button" value="Cancel"/>

Note:
When all topics are marked as completed, select the **"Save & Continue"** button to complete the attestation process.

Meaningful Use Stage 1.5 Objectives (1 – 9)

This screen provides information about the Meaningful Use Objectives for EPs scheduled to meet Stage 1 in Program Year 2016 (MU 1.5).

Click **Begin** to continue to the Meaningful Use Objectives List Table.

Get Started
R&A/Contact Info
Eligibility
Patient Volumes
Attestation
Review
Submit

Program Year 2016 Scheduled to Meet Stage 1: Meaningful Use Objectives 1 - 9

The following section includes 9 of the 10 Objectives. Some Objectives include multiple measures. As part of the Meaningful Use Attestation, EPs are required to complete all 10 Objectives. Certain Objectives do provide Exclusions, Alternate Exclusions, or Alternate Measures. If an EP meets the criteria for the Exclusion or Alternate Exclusion, then the EP can claim that Exclusion during Attestation.

Helpful Hints:

1. The Meaningful Use Objectives, Required Public Health Objective, and the Clinical Quality Measures (CQMs) can be completed in any order.
2. For more details on each Objective, select the '**CLICK HERE**' link at the top left of each screen.
3. Objective results **DO NOT** round up. For example, a numerator of 199 and a denominator of 1000 is 19%. Results are **ONLY** displayed in whole numbers.
4. Objectives that require a result of greater than a given percentage must be **MORE THAN** that percentage. For example, in a measure requiring a result of greater than 80%, a result of 80.1% will pass, but a result of exactly 80% will **NOT** pass.
5. The white checkmark in the green circle means the section is completed, but does not mean you passed or failed the Objectives.
6. You may review the completed Objectives by selecting the 'EDIT' button.
7. Evaluation of Meaningful Use Objectives is made after the application is electronically signed. You will receive a message if the objectives are not met. If any objectives are not met, you will have the opportunity to change and electronically sign again.

Instructions:

- Users must adequately answer each measure they intend to meet by either correctly completing the numerator and denominator, answering yes or no, or choosing an exclusion if they meet the requirements for that exclusion.
- Use the data obtained from your EHR system for the attestation period.
- When completing your application, you will be prompted to upload copies of your EHR report(s) and supporting documentation into your application.

It is important to **SAVE** all documentation and reports that support your Meaningful Use attestation, including documentation for exclusions and measures with values of zero. If you see patients at multiple outpatient practice locations, please save your Meaningful Use documentation from all sites in case of audit.

UI 568

Begin

UI 568

Meaningful Use Objective List Table

The following screen displays the Meaningful Use Objective List Table.

The first time a topic is accessed you will see an **Edit** option for each measure.

Once information is successfully entered and saved for a measure it will be displayed in the **Entered** column on this screen.

Click **Edit** to enter or edit information for a measure or click **Return to Main** to return to the Measures Topic List.

Get Started RBA/Contact Info Eligibility Patient Volumes Attestation Review Submit

Attestation Meaningful Use Objectives

To edit information, select the "EDIT" button next to the objective that you would like to edit. All successfully submitted progress on entry of measures will be retained if your session is terminated.

When all objectives have been edited and you are satisfied with the entries, select the "Return to Main" button to access the main attestation topic list.

Objective Number	Objective	Measure	Entered	Select
Objective 1	Protect electronic health information created or maintained by the Certified EHR Technology (CEHRT) through the implementation of appropriate technical capabilities.	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 by Certified EHR Technology 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 EP's risk management process.		<input type="button" value="EDIT"/>
Objective 2	Use clinical decision support to improve performance on high-priority health conditions.	Implement five clinical decision support interventions related to four or more clinical quality measures at a relevant point in patient care for the entire EHR reporting period. Absent four clinical quality measures related to an EP's scope of practice or patient population, the clinical decision support interventions must be related to high-priority health conditions. The EP has enabled and implemented the functionality for drug-drug and drug-allergy interaction checks for the entire EHR reporting period.		<input type="button" value="EDIT"/>
Objective 3	You must choose an option for this objective. Select the EDIT button to continue.			<input type="button" value="EDIT"/>
Objective 4	Generate and transmit permissible prescriptions electronically (eRx).	More than 50 percent of all permissible prescriptions written by the EP are queried for a drug formulary and transmitted electronically using CEHRT.		<input type="button" value="EDIT"/>
Objective 5	The EP who transitions their patients to another setting of care or provider of care or refers their patients to another provider of care provides a summary care record for each transition of care or referral.	The EP that transitions or refers their patient to another setting of care or provider of care 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.		<input type="button" value="EDIT"/>
Objective 6	Use clinically relevant information from Certified EHR Technology to identify patient-specific education resources and provide those resources to the patient.	Patient-specific education resources identified by CEHRT are provided to patients for more than 10 percent of all unique patients with office visits seen by the EP during the EHR reporting period.		<input type="button" value="EDIT"/>
Objective 7	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 who performs medication reconciliation for more than 50 percent of transitions of care in which the patient is transitioned into the care of the EP.		<input type="button" value="EDIT"/>
Objective 8	Provide patients the ability to view online, download, and transmit their health information within four business days of the information being available to the EP.	More than 50 percent of all unique patients seen by the EP during the EHR reporting period are provided timely access to view online, download, and transmit to a third party their health information subject to the EP's discretion to withhold certain information. At least one patient seen by the EP during the EHR reporting period (or patient-authorized representative) views, downloads, or transmits to a third party his or her health information during the EHR reporting period.		<input type="button" value="EDIT"/>
Objective 9	Use secure electronic messaging to communicate with patients on relevant health information.	For an EHR reporting period in 2016, for at least 1 patient seen by the EP during the EHR reporting period, a secure message was sent using the electronic messaging function of CEHRT to the patient (or the patient-authorized representative), or in response to a secure message sent by the patient (or the patient-authorized representative) during the EHR reporting period.		<input type="button" value="EDIT"/>

MU 1.5 Objective 1 – Protect Patient Health Information

Enter information in all required fields.

Click **Save & Continue** to review your selection, click **Previous** to go back, or click **Reset** to restore this panel to the starting point or last saved data.

PLEASE NOTE: All providers attesting to Meaningful Use must upload a copy of the Security Risk Analysis documentation at the time of attestation.

Get Started
R&A/Contact Info
Eligibility
Patient Volumes
Attestation
Review
Submit

Attestation Meaningful Use Objectives

Objective 1 - Protect Patient Health Information

[Click HERE](#) to review CMS Guidelines for this measure.

When ready click the **Save & Continue** button to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point.

(*) Red asterisk indicates a required field.

Objective: Protect electronic health information created or maintained by the Certified EHR Technology (CEHRT) through the implementation of appropriate technical capabilities.

Measure: 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 by Certified EHR Technology 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 EP's risk management process.

*Did you meet this measure?
 Yes No

If 'Yes', please enter the following information:

Date (MM/DD/YYYY):

Name and Title (Person who conducted or reviewed the security risk analysis):

Previous
Reset
Save & Continue

MU 1.5 Objective 2 – Clinical Decision Support (CDS)

Enter information in all required fields.

Click **Save & Continue** to review your selection, click **Previous** to go back, or click **Reset** to restore this panel to the starting point or last saved data.

Name	Dr. Medicaid Provider	Applicant NPI	9999999999
Personal TIN/SSN	9999999999	Payee TIN	9999999999
Payment Year	3	Program Year	2016

Attestation Meaningful Use Objectives

Objective 2 - Clinical Decision Support (CDS)

Click [HERE](#) to review CMS Guidelines for this measure.

*When ready click the **Save & Continue** button to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point.*

(* Red asterisk indicates a required field.)

Objective: Use clinical decision support to improve performance on high-priority health conditions.

Measure 1: Implement five clinical decision support interventions related to four or more clinical quality measures at a relevant point in patient care for the entire EHR reporting period. Absent four clinical quality measures related to an EP's scope of practice or patient population, the clinical decision support interventions must be related to high-priority health conditions.

*Did you meet this measure?
 Yes No

Measure 2 Exclusion: For the second measure, any EP who writes fewer than 100 medication orders during the EHR reporting period.

*Does this exclusion apply to you? If 'No', complete Measure 2.
 Yes No

Measure 2: The EP has enabled and implemented the functionality for drug-drug and drug-allergy interaction checks for the entire EHR reporting period.

Did you meet this measure?
 Yes No

MU 1.5 Objective 3 – CPOE Selection Screen

Enter information in all required fields.

Click **Continue** to proceed to the appropriate core measure screen for the option you selected or click **Previous** to go back

Get Started
R&A/Contact Info
Eligibility
Patient Volumes
Attestation
Review
Submit

Attestation Meaningful Use Objectives

Objective 3 - Computerized Provider Order Entry (CPOE)

Please choose from the following options to attest to this objective. If you return at a later time and change your selection, any information entered for the measure prior to that point will be removed.

When ready click the **Continue** button to review your selection, or click **Previous** to go back.

(*) Red asterisk indicates a required field.

*Select from the following options:

Modified Stage 2
Measure 1 - More than 60 percent of medication orders created by the EP during the EHR reporting period are recorded using computerized provider order entry.
Measure 2 - More than 30 percent of laboratory orders created by the EP during the EHR reporting period are recorded using computerized provider order entry.
Measure 3 - More than 30 percent of radiology orders created by the EP during the EHR reporting period are recorded using computerized provider order entry.

Modified Stage 2 Alternate Exclusions for Measures 2 and 3
Measure 1 - More than 60 percent of medication orders created by the EP during the EHR reporting period are recorded using computerized provider order entry.
Measure 2 - More than 30 percent of laboratory orders created by the EP during the EHR reporting period are recorded using computerized provider order entry.
Alternate Exclusion 2 - Any EP who did not plan to report on this measure may select an exclusion.
Measure 3 - More than 30 percent of radiology orders created by the EP during the EHR reporting period are recorded using computerized provider order entry.
Alternate Exclusion 3 - Any EP who did not plan to report on this measure may select an exclusion.

Previous
Continue

MU 1.5 Objective 3 – CPOE

Enter information in all required fields.

Click **Save & Continue** to review your selection, click **Previous** to go back, or click **Reset** to restore this panel to the starting point or last saved data.

Name	Dr. Medicaid Provider	Applicant NPI	999999999
Personal TIN/SSN	999999999	Payee TIN	999999999
Payment Year	3	Program Year	2016

Get Started
R&A/Contact Info
Eligibility
Patient Volumes
Attestation
Review
Submit

Attestation Meaningful Use Objectives

Objective 3 – Computerized Provider Order Entry (CPOE)

Click [HERE](#) to review CMS Guidelines for this measure.

When ready click the **Save & Continue** button to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point.

(*) Red asterisk indicates a required field.

Objective: Use computerized provider order entry (CPOE) for medication, laboratory and radiology orders directly entered by any licensed healthcare professional who can enter orders into the medical record per state, local and professional guidelines.

*** PATIENT RECORDS:** Please select whether the data used to support the measure was extracted from ALL patient records or only from patient records maintained using Certified EHR Technology.

This data was extracted from ALL patient records not just those maintained using Certified EHR Technology.
 This data was extracted only from patient records maintained using Certified EHR Technology.

Measure 1: More than 60 percent of medication orders created by the EP during the EHR reporting period are recorded using computerized provider order entry.

Numerator 1: The number of orders in the denominator recorded using CPOE.
Denominator 1: Number of medication orders created by the EP during the EHR reporting period.
Exclusion 1: Any EP who writes fewer than 100 medication orders during the EHR reporting period.
 * Does this exclusion apply to you?
 Yes No
 If 'No', complete entries in the Numerator and Denominator.

Numerator 1: **Denominator 1:**

Measure 2: More than 30 percent of laboratory orders created by the EP during the EHR reporting period are recorded using computerized provider order entry.

Numerator 2: The number of orders in the denominator recorded using CPOE.
Denominator 2: Number of laboratory orders created by the EP during the EHR reporting period.
Exclusion 2: Any EP who writes fewer than 100 laboratory orders during the EHR reporting period.
 * Does this exclusion apply to you?
 Yes No
 If 'No', complete entries in the Numerator and Denominator.

Numerator 2: **Denominator 2:**

Measure 3: More than 30 percent of radiology orders created by the EP during the EHR reporting period are recorded using computerized provider order entry.

Numerator 3: The number of orders in the denominator recorded using CPOE.
Denominator 3: Number of radiology orders created by the EP during the EHR reporting period.
Exclusion 3: Any EP who writes fewer than 100 radiology orders during the EHR reporting period.
 * Does this exclusion apply to you?
 Yes No
 If 'No', complete entries in the Numerator and Denominator.

Numerator 3: **Denominator 3:**

MU 1.5 Objective 3 Alternate 1 –CPOE

Enter information in all required fields.

Click **Save & Continue** to review your selection, click **Previous** to go back, or click **Reset** to restore this panel to the starting point or last saved data.

Get Started RBA/Contact Info Eligibility Patient Volumes Attestation Review Submit

Attestation Meaningful Use Objectives

Objective 3 Alternate 1 - Computerized Provider Order Entry (CPOE)

Click [HERE](#) to review CMS Guidelines for this measure.

When ready click the **Save & Continue** button to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point.

(*) Red asterisk indicates a required field.

Objective: Use computerized provider order entry (CPOE) for medication, laboratory and radiology orders directly entered by any licensed healthcare professional who can enter orders into the medical record per state, local and professional guidelines.

* **PATIENT RECORDS:** Please select whether the data used to support the measure was extracted from ALL patient records or only from patient records maintained using Certified EHR Technology.

This data was extracted from ALL patient records not just those maintained using Certified EHR Technology.
 This data was extracted only from patient records maintained using Certified EHR Technology.

Measure 1: More than 60 percent of medication orders created by the EP during the EHR reporting period are recorded using computerized provider order entry.

Numerator 1: The number of orders in the denominator recorded using CPOE.
Denominator 1: Number of medication orders created by the EP during the EHR reporting period.
Exclusion 1: Any EP who writes fewer than 100 medication orders during the EHR reporting period.
 * Does this exclusion apply to you?
 Yes No
 If 'No', complete entries in the Numerator and Denominator.

Numerator 1: **Denominator 1:**

Measure 2: More than 30 percent of laboratory orders created by the EP during the EHR reporting period are recorded using computerized provider order entry.

Numerator 2: The number of orders in the denominator recorded using CPOE.
Denominator 2: Number of laboratory orders created by the EP during the EHR reporting period.
Exclusion 2: Any EP who writes fewer than 100 laboratory orders during the EHR reporting period.
 * Does this exclusion apply to you?
 Yes No
Alternate Exclusion 2: Any EP who did not plan to report on this measure may select an exclusion.
 * Does this exclusion apply to you?
 Yes No
 If 'No', complete entries in the Numerator and Denominator.

Numerator 2: **Denominator 2:**

Measure 3: More than 30 percent of radiology orders created by the EP during the EHR reporting period are recorded using computerized provider order entry.

Numerator 3: The number of orders in the denominator recorded using CPOE.
Denominator 3: Number of radiology orders created by the EP during the EHR reporting period.
Exclusion 3: Any EP who writes fewer than 100 radiology orders during the EHR reporting period.
 * Does this exclusion apply to you?
 Yes No
Alternate Exclusion 3: Any EP who did not plan to report on this measure may select an exclusion.
 * Does this exclusion apply to you?
 Yes No
 If 'No', complete entries in the Numerator and Denominator.

Numerator 3: **Denominator 3:**

MU 1.5 Objective 4 – Electronic Prescribing

Enter information in all required fields.

Click **Save & Continue** to review your selection, click **Previous** to go back, or click **Reset** to restore this panel to the starting point or last saved data.

Get Started **R&A/Contact Info** **Eligibility** **Patient Volumes** **Attestation** **Review** **Submit**

Attestation Meaningful Use Objectives

Objective 4 - Electronic Prescribing

 Click [HERE](#) to review CMS Guidelines for this measure.

When ready click the **Save & Continue** button to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point.

(*) Red asterisk indicates a required field.

Objective: Generate and transmit permissible prescriptions electronically (eRx).

Measure: More than 50 percent of all permissible prescriptions written by the EP are queried for a drug formulary and transmitted electronically using CEHRT.

*** PATIENT RECORDS:** Please select whether the data used to support the measure was extracted from ALL patient records or only from patient records maintained using Certified EHR Technology.

This data was extracted from ALL patient records not just those maintained using Certified EHR Technology.

This data was extracted only from patient records maintained using Certified EHR Technology.

EXCLUSION 1: Any EP who writes fewer than 100 permissible prescriptions during the EHR reporting period.

*** Does this exclusion apply to you?**

Yes No

EXCLUSION 2: Does not have a pharmacy within his or her organization and there are no pharmacies that accept electronic prescriptions within 10 miles of the EP's practice location at the start of his or her EHR reporting period.

*** Does this exclusion apply to you?**

Yes No

If the exclusions do not apply to you, complete the following information.

Numerator: The number of prescriptions in the denominator generated, queried for a drug formulary, and transmitted electronically using CEHRT.

Denominator: Number of permissible prescriptions written during the EHR reporting period for drugs requiring a prescription in order to be dispensed.

Numerator: **Denominator:**

Previous **Reset** **Save & Continue**

MU 1.5 Objective 5 – Health Information Exchange

Enter information in all required fields.

Click **Save & Continue** to review your selection, click **Previous** to go back, or click **Reset** to restore this panel to the starting point or last saved data.

Get Started R&A/Contact Info Eligibility Patient Volumes Attestation Review Submit

Attestation Meaningful Use Objectives

Objective 5 – Health Information Exchange

Click [HERE](#) to review CMS Guidelines for this measure.

When ready click the **Save & Continue** button to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point.

(*) Red asterisk indicates a required field.

Objective: The EP who transitions their patients to another setting of care or provider of care or refers their patients to another provider of care provides a summary care record for each transition of care or referral.

EXCLUSION: Any EP who transfers a patient to another setting or refers a patient to another provider less than 100 times during the EHR reporting period.

* Does this exclusion apply to you? If 'Yes', do not complete the measure below. If 'No', complete entries in the measure below.

Yes No

Measure: The EP that transitions or refers their patient to another setting of care or provider of care 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.

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.

Denominator: Number of transitions of care and referrals during the EHR reporting period for which the EP was the transferring or referring provider.

Numerator: **Denominator:**

Previous Reset Save & Continue

MU 1.5 Objective 6 – Patient- Specific Education

Enter information in all required fields.

Click **Save & Continue** to review your selection, click **Previous** to go back, or click **Reset** to restore this panel to the starting point or last saved data.

Get Started
R&A/Contact Info
Eligibility
Patient Volumes
Attestation
Review
Submit

Attestation Meaningful Use Objectives

Objective 6 - Patient-Specific Education

Click [HERE](#) to review CMS Guidelines for this measure.

When ready click the **Save & Continue** button to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point.

(*) Red asterisk indicates a required field.

Objective: Use clinically relevant information from Certified EHR Technology to identify patient-specific education resources and provide those resources to the patient.

Measure: Patient-specific education resources identified by CEHRT are provided to patients for more than 10 percent of all unique patients with office visits seen by the EP during the EHR reporting period.

EXCLUSION: Any EP who has no office visits during the EHR reporting period.

* Does this exclusion apply to you? If 'Yes', do not complete the Numerator or Denominator. If 'No', complete entries in the Numerator and Denominator.

Yes No

Numerator: Number of patients in the denominator who were provided patient-specific education resources identified by the Certified EHR Technology.
Denominator: Number of unique patients with office visits seen by the EP during the EHR reporting period.

Numerator: **Denominator:**

Previous
Reset
Save & Continue

MU 1.5 Objective 7 – Medication Reconciliation

Enter information in all required fields.

Click **Save & Continue** to review your selection, click **Previous** to go back, or click **Reset** to restore this panel to the starting point or last saved data.

Get Started
R&A/Contact Info
Eligibility
Patient Volumes
Attestation
Review
Submit

Attestation Meaningful Use Objectives

Objective 7 - Medication Reconciliation

Click [HERE](#) to review CMS Guidelines for this measure.

*When ready click the **Save & Continue** button to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point.*

(*) Red asterisk indicates a required field.

Objective: 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.

Measure: The EP who performs medication reconciliation for more than 50 percent of transitions of care in which the patient is transitioned into the care of the EP.

EXCLUSION: Any EP who was not the recipient of any transitions of care during the EHR reporting period.

* Does this exclusion apply to you? If 'Yes', do not complete the Numerator or Denominator. If 'No', complete entries in the Numerator and Denominator.

Yes No

Numerator: The number of transitions of care in the denominator where medication reconciliation was performed.
Denominator: Number of transitions of care during the EHR reporting period for which the EP was the receiving party of the transition.

Numerator: Denominator:

Previous
Reset
Save & Continue

Objective 8 – Patient Electronic Access

Enter information in all required fields.

Click **Save & Continue** to review your selection, click **Previous** to go back, or click **Reset** to restore this panel to the starting point or last saved data.

Get Started R&A/Contact Info Eligibility Patient Volumes Attestation Review Submit

Attestation Meaningful Use Objectives

Objective 8 – Patient Electronic Access

i Click [HERE](#) to review CMS Guidelines for this measure.

When ready click the **Save & Continue** button to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point.

(*) Red asterisk indicates a required field.

Objective: Provide patients the ability to view online, download, and transmit their health information within four business days of the information being available to the EP.

Exclusion Measure 1 and 2: Any EP who neither orders nor creates any of the information listed for inclusion as part of the measures. This will exclude both measures.

* Does the exclusion apply to you? If 'Yes', do not complete Measure 1. If 'No', complete entries for Measure 1.
 Yes No

Measure 1: More than 50 percent of all unique patients seen by the EP during the EHR reporting period are provided timely access to view online, download, and transmit to a third party their health information subject to the EP's discretion to withhold certain information.

Numerator 1: The number of patients in the denominator who have timely (within four business days after the information is available to the EP) online access to their health information.
Denominator 1: Number of unique patients seen by the EP during the EHR reporting period.

Numerator 1: **Denominator 1:**

Exclusion Measure 2: Conducts 50 percent or more of his or her patient encounters 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 EHR reporting period. This will only exclude Measure 2.

Does the exclusion apply to you? If 'Yes', do not complete Measure 2. If 'No', complete entries for Measure 2.
 Yes No

Measure 2: At least one patient seen by the EP during the EHR reporting period (or patient-authorized representative) views, downloads, or transmits to a third party his or her health information during the EHR reporting period.

Numerator 2: The number of patients in the denominator (or patient-authorized representative) who view, download, or transmit to a third party their health information.
Denominator 2: Number of unique patients seen by the EP during the EHR reporting period.

Numerator 2: **Denominator 2:**

Previous Reset Save & Continue

MU 1.5 Objective 9 – Secure Electronic Messaging

Enter information in all required fields.

Click **Save & Continue** to review your selection, click **Previous** to go back, or click **Reset** to restore this panel to the starting point or last saved data.

Get Started R&A/Contact Info Eligibility Patient Volumes Attestation Review Submit

Attestation Meaningful Use Objectives

Objective 9 - Secure Electronic Messaging

[Click HERE](#) to review CMS Guidelines for this measure.

When ready click the **Save & Continue** button to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point.

(*) Red asterisk indicates a required field.

Objective: Use secure electronic messaging to communicate with patients on relevant health information.

EXCLUSION: Any EP who has no office visits during the EHR reporting period, or any EP who conducts 50 percent or more of his or her patient encounters 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 EHR reporting period.

* Does this exclusion apply to you? If 'Yes', do not complete entries in the Numerator and Denominator. If 'No', complete entries in the Numerator and Denominator.

Yes No

Measure: For an EHR reporting period in 2016, for at least 1 patient seen by the EP during the EHR reporting period, a secure message was sent using the electronic messaging function of CEHRT to the patient (or the patient-authorized representative), or in response to a secure message sent by the patient (or the patient-authorized representative) during the EHR reporting period.

Numerator: The number of patients in the denominator for whom a secure electronic message is sent to the patient (or patient-authorized representative), or in response to a secure message sent by the patient (or patient-authorized representative).

Denominator: Number of unique patients seen by the EP during the EHR reporting period.

Numerator: **Denominator:**

Previous Reset Save & Continue

Return to Main: Back to Measures Topic List

Once you have attested to all the measures for this topic, click **Return to Main** to return to the Measures Topic List.

Get Started | RIA/Contact Info | Eligibility | Patient Volumes | **Attestation** | Review | Submit

Attestation Meaningful Use Objectives

To edit information, select the "EDIT" button next to the objective that you would like to edit. All successfully submitted progress on entry of measures will be retained if your session is terminated.

When all objectives have been edited and you are satisfied with the entries, select the "Return to Main" button to access the main attestation topic list.

Meaningful Use Objective List Table

Objective Number	Objective	Measure	Entered	Select
Objective 1	Protect electronic health information created or maintained by the Certified EHR Technology (CEHRT) through the implementation of appropriate technical capabilities.	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 by Certified EHR Technology 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 EP's risk management process.	Measure = Yes Date = 10/01/2014 Name and Title = Dr. Medicaid - Provider	<input type="button" value="EDIT"/>
Objective 2	Use clinical decision support to improve performance on high-priority health conditions.	Implement five clinical decision support interventions related to four or more clinical quality measures at a relevant point in patient care for the entire EHR reporting period. Absent four clinical quality measures related to an EP's scope of practice or patient population, the clinical decision support interventions must be related to high-priority health conditions. The EP has enabled and implemented the functionality for drug-drug and drug-allergy interaction checks for the entire EHR reporting period.	Measure 1 = Yes Measure 2 Exclusion = No Measure 2 = Yes	<input type="button" value="EDIT"/>
Objective 3	Use computerized provider order entry (CPOE) for medication, laboratory and radiology orders directly entered by any licensed healthcare professional who can enter orders into the medical record per state, local and professional guidelines.	More than 60 percent of medication orders created by the EP during the EHR reporting period are recorded using computerized provider order entry. More than 30 percent of laboratory orders created by the EP during the EHR reporting period are recorded using computerized provider order entry. More than 30 percent of radiology orders created by the EP during the EHR reporting period are recorded using computerized provider order entry.	Patient Records = Only EHR Measure 1 Exclusion 1 = No Numerator 1 = 8 Denominator 1 = 10 Measure 2 Exclusion 2 = No Numerator 2 = 5 Denominator 2 = 10 Measure 3 Exclusion 3 = No Numerator 3 = 4 Denominator 3 = 10	<input type="button" value="EDIT"/>
Objective 4	Generate and transmit permissible prescriptions electronically (eRx).	More than 50 percent of all permissible prescriptions written by the EP are queried for a drug formulary and transmitted electronically using CEHRT.	Patient Records = Only EHR Exclusion 1 = No Exclusion 2 = No Numerator = 7 Denominator = 10	<input type="button" value="EDIT"/>
Objective 5	The EP who transitions their patients to another setting of care or provider of care or refers their patients to another provider of care provides a summary care record for each transition of care or referral.	The EP that transitions or refers their patient to another setting of care or provider of care 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.	Exclusion = No Numerator = 5 Denominator = 10	<input type="button" value="EDIT"/>
Objective 6	Use clinically relevant information from Certified EHR Technology to identify patient-specific education resources and provide those resources to the patient.	Patient-specific education resources identified by CEHRT are provided to patients for more than 10 percent of all unique patients with office visits seen by the EP during the EHR reporting period.	Exclusion = No Numerator = 5 Denominator = 10	<input type="button" value="EDIT"/>
Objective 7	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 who performs medication reconciliation for more than 50 percent of transitions of care in which the patient is transitioned into the care of the EP.	Exclusion = No Numerator = 7 Denominator = 10	<input type="button" value="EDIT"/>
Objective 8	Provide patients the ability to view online, download, and transmit their health information within four business days of the information being available to the EP.	More than 50 percent of all unique patients seen by the EP during the EHR reporting period are provided timely access to view online, download, and transmit to a third party their health information subject to the EP's discretion to withhold certain information. At least one patient seen by the EP during the EHR reporting period (or patient-authorized representative) views, downloads, or transmits to a third party his or her health information during the EHR reporting period.	Measure 1 Exclusion Measure 1 and 2 = No Numerator 1 = 7 Denominator 1 = 10 Measure 2 Exclusion Measure 2 = No Numerator 2 = 6 Denominator 2 = 10	<input type="button" value="EDIT"/>
Objective 9	Use secure electronic messaging to communicate with patients on relevant health information.	The capability for patients to send and receive a secure electronic message with the EP was fully enabled during the EHR reporting period. Did you have the secure electronic messaging enabled during the EHR reporting period?	Exclusion = No Measure = Yes	<input type="button" value="EDIT"/>

If all measures were entered and saved, a check mark will display under the Completed column for the topic as displayed in the example below. You can continue to edit the topic measure after it has been marked complete.

Click the **Edit** button to further edit the topic, or click **Clear All** to clear the topic information you entered. Click **Begin** to start the next topic.

To access the Required Public Health Objective, click the **Begin** button on the Meaningful Use Objectives Dashboard.

Get Started
R&A/Contact Info
Eligibility
Patient Volumes
Attestation
Review
Submit

Attestation Meaningful Use Objectives

Please complete the following topic areas: General Requirements, Meaningful Use Objectives (1-9), Required Public Health Objective (10) and one of the Clinical Quality Measures (CQMs) options. The following icon will display to the left of the topic name when the minimum required entries are completed.

Please Note: Specific requirements apply to the Required Public Health Objective (10). You may be instructed to complete additional steps depending on exclusions taken on completed objectives even though a is displayed.

Available actions for a topic will be determined by current progress level. To start a topic, select the "Begin" button. To modify a topic where entries have been made, select the "EDIT" button for a topic to modify any previously entered information. Select "Previous" to return.

Completed?	Topics	Progress	Action
	General Requirements	2/2	<div style="border: 1px solid #ccc; padding: 2px; display: inline-block;">EDIT</div> <div style="border: 1px solid #ccc; padding: 2px; display: inline-block;">Clear All</div>
	Meaningful Use Objectives (1-9)	9/9	<div style="border: 1px solid #ccc; padding: 2px; display: inline-block;">EDIT</div> <div style="border: 1px solid #ccc; padding: 2px; display: inline-block;">Clear All</div>
	Required Public Health Objective (10)		<div style="border: 1px solid #ccc; padding: 2px; display: inline-block; border-radius: 50%;">Begin</div>

Manual Clinical Quality Measures

Please select one of the following three Clinical Quality Measure set options.

Only one Clinical Quality Measure (CQM) set can be completed. If you would like to switch to a different CQM set after one is started, use the "Clear All" button on the previously selected CQM set to enable the "Begin" button on a different CQM set. *Please note that the previously entered information will be cleared once the "Clear All" button is selected.*

Clinical Quality Measure - General	<div style="border: 1px solid #ccc; padding: 2px; display: inline-block;">Begin</div>
Clinical Quality Measure - Adult Set	<div style="border: 1px solid #ccc; padding: 2px; display: inline-block;">Begin</div>
Clinical Quality Measure - Pediatric Set	<div style="border: 1px solid #ccc; padding: 2px; display: inline-block;">Begin</div>
Cancel and Choose Electronic	<div style="border: 1px solid #ccc; padding: 2px; display: inline-block;">Cancel</div>

Note:
When all topics are marked as completed, select the "Save & Continue" button to complete the attestation process.

Previous

Save & Continue

2016 1.5 Required Public Health Objective (10)

For EPs scheduled to be in Stage 1 in Program Year 2016 (MU 1.5), this initial screen provides information about the Required Public Health Objective.

A **Public Health Objective Documentation Aid** is available at the Vermont Medicaid EHRIP website to assist EPs in providing documentation for the Public Health Measures they attest to, as well as documentation for the exclusions they qualify for. It is strongly recommended that the Public Health Objective Documentation Aid is completed and uploaded when your application is submitted. It lists suggested documentation artifacts, which, when provided at the time of attestation, will facilitate the application review process. The information will also help furnish the information that would be requested in the event of an audit.

Download the **Program Year 2016 Public Health Objective Documentation Aid for EPs Scheduled to be in Stage 1** here: <http://healthdata.vermont.gov/ehrip/2016/PH/Docs>

Click **Begin** to continue to the Meaningful Use Objectives List Table.

Program Year 2016 Scheduled to Meet Stage 1: Required Public Health Objective 10

As part of the Meaningful Use Attestation, an EP who is scheduled to be in Stage 1 in Program Year 2016 must report at least two (2) Public Health Options unless the EP can claim an exclusion from Options 1, 2 and 3A.

Measure 1: Immunization Registry Reporting. The EP is in Active Engagement with a public health agency to submit immunization data.
Measure 2: Syndromic Surveillance Reporting. The EP is in Active Engagement with a public health agency to submit Syndromic surveillance data.
Measure 3: Specialized Registry Reporting. The EP is in Active Engagement to submit data to a specialized registry. EPs may report to more than one specialized registry, and may count specialized registry reporting more than once to meet the required number of measures for the Objective.

For EPs who are scheduled to be in Stage 1 for Program Year 2016, an exclusion for a measure does not count toward the total of two measures. If an EP excludes from a measure, they must meet or exclude from the remaining measures in order to meet the objective. If the EP qualifies for multiple exclusions and the remaining number of measures available to the EP is less than two, the EP can meet the objective by meeting the one remaining measure available to them. If no measures remain available, the EP can meet the objective by meeting the requirements for exclusion from all three measures. They may claim an **Alternate Exclusion** for Measure 2 or Measure 3 (Syndromic Surveillance Measure or Specialized Registry Reporting Measure).

A **Public Health Objective Documentation Aid** is available at the Vermont Medicaid EHRIP website to assist EPs in providing documentation for the Public Health Measures they attest to, as well as documentation for the exclusions they qualify for. It is strongly recommended that the Public Health Objective Documentation Aid is completed and uploaded when your application is submitted. It lists suggested documentation artifacts, which, when provided at the time of attestation, will facilitate the application review process. The information will also help furnish the information that would be requested in the event of an audit.

Download the **Program Year 2016 Public Health Objective Documentation Aid for EPs Scheduled to be in Stage 1** here: <http://healthdata.vermont.gov/ehrip/2016/PH/Docs>

Helpful Hints:

1. For more details on each measure option, select the '**CLICK HERE**' link at the top left of each screen.
2. You may review the completed option by selecting the '**EDIT**' button.
3. After completing the Public Health Objective, you will receive a white checkmark in the green circle. The checkmark means the section is completed, but does not mean you passed or failed the Objective.

Evaluation of Public Health Objective is made after the application is electronically signed. You will receive a message if the Objective is not met. If any Objectives are not met, you will have the opportunity to change and electronically sign again.

U2 569

Begin

MU 1.5 Required Public Health Objective List Table

From the Required Public Health Objective Selection screen, choose a minimum of two Required Public Health Objectives to attest to.

If a measure is selected and information is entered for that measure, unselecting the measure will clear all information previously entered.

Click **Save & Continue** to proceed, or click **Return to Main** to go back. Click **Reset** to restore this panel to the starting point or last saved data.

Get Started
R&A/Contact Info
Eligibility
Patient Volumes
Attestation
Review
Submit

Attestation Meaningful Use Objectives

Providers are required to successfully attest to two Public Health Options without taking an exclusion. Select the two Options for attestation without taking an exclusion. Option 3 may be used twice to attest. If you cannot successfully attest to any Option, or can only successfully attest to one Option, then select Options 1, 2, and 3A. You cannot exclude both Option 3A and Option 3B. Note, selecting all exclusions does not mean the Objective fails.

When all objectives have been edited and you are satisfied with the entries, select the "Return to Main" button to access the main attestation topic list.

Required Public Health Objective List Table

Objective Number	Objective	Measure	Select
Objective 10 Option 1	The EP is in active engagement with an immunization registry or immunization information systems to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.	Option 1 - Immunization Registry Reporting: The EP is in active engagement with a public health agency to submit immunization data.	<input checked="" type="checkbox"/>
Objective 10 Option 2	The EP is in active engagement with a syndromic surveillance registry to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.	Option 2 - Syndromic Surveillance Reporting: The EP is in active engagement with a public health agency to submit syndromic surveillance data.	<input checked="" type="checkbox"/>
Objective 10 Option 3A	The EP is in active engagement with a specialized registry to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.	Option 3 - Specialized Registry Reporting: The EP is in active engagement to submit data to a specialized registry.	<input checked="" type="checkbox"/>
Objective 10 Option 3B	The EP is in active engagement with a specialized registry to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.	Option 3 - Specialized Registry Reporting: The EP is in active engagement to submit data to a specialized registry.	<input checked="" type="checkbox"/>

Return to Main
Reset
Save & Continue

The measures you selected to attest to will display on the Required Public Health Objective List Table. The example on the following page displays the four measures selected from the above screen example.

You must complete all the measures selected.

Once information is successfully entered and saved for a measure it will be displayed in the Entered column on this screen.

Click **Edit** to enter Objective Option. Click **Return to Selection List** to review options.

Get Started
R&A/Contact Info
Eligibility
Patient Volumes
Attestation
Review
Submit

Attestation Meaningful Use Objectives

To edit information, select the "EDIT" button next to the public health objective that you would like to edit. All successfully submitted progress on entry of measures will be retained if your session is terminated.

When all public health objectives have been edited and you are satisfied with the entries, select the "Return to Selection List" button to access the main attestation topic list.

Required Public Health Objective List Table

Objective Number	Objective	Measure	Entered	Select
Objective 10 Option 1	The EP is in active engagement with an immunization registry or immunization information systems to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.	Option 1 - Immunization Registry Reporting: The EP is in active engagement with a public health agency to submit immunization data.		<input type="button" value="EDIT"/>
Objective 10 Option 2	The EP is in active engagement with a syndromic surveillance registry to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.	Option 2 - Syndromic Surveillance Reporting: The EP is in active engagement with a public health agency to submit syndromic surveillance data.		<input type="button" value="EDIT"/>
Objective 10 Option 3A	The EP is in active engagement with a specialized registry to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.	Option 3 - Specialized Registry Reporting: The EP is in active engagement to submit data to a specialized registry.		<input type="button" value="EDIT"/>
Objective 10 Option 3B	The EP is in active engagement with a specialized registry to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.	Option 3 - Specialized Registry Reporting: The EP is in active engagement to submit data to a specialized registry.		<input type="button" value="EDIT"/>

There are a total of 4 Meaningful Use Menu Measure screens. As you proceed through the Required Public Health Objective section of MAPIR, you may see up to 4 different screens, depending on your selection Instructions for each measure are provided on the screen. For additional help with a specific Required Public Health Objective, click on the link provided above the blue instruction box.

MU 1.5 Objective 10 Option 1 – Immunization Registry Reporting

Enter information in all required fields.

Click **Save & Continue** to review your selection, click **Previous** to go back, or click **Reset** to restore this panel to the starting point or last saved data.

Get Started
R&A/Contact Info
Eligibility
Patient Volumes
Attestation
Review
Submit

Attestation Meaningful Use Objectives

Objective 10 Option 1 - Immunization Registry Reporting

Click [HERE](#) to review CMS Guidelines for this measure.

When ready click the **Save & Continue** button to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point.

(*) Red asterisk indicates a required field.

Objective: The EP is in active engagement with an immunization registry or immunization information systems to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.

Measure: Option 1 - Immunization Registry Reporting: The EP is in active engagement with a public health agency to submit immunization data.

*Does this option apply to you?
 Yes No

Active Engagement Options: If you have answered 'Yes' above, please select one of the options listed below.

Completed registration to submit data
 Testing and validation
 Production

EXCLUSION: If Option 1 is 'No', then select one of the Exclusions below. Any EP that meets one of the following criteria may be excluded from this objective.

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 EHR reporting period.
 Yes No

Operates in a jurisdiction where no immunization registry or immunization information system has declared readiness to receive immunization data from the EP at the start of the EHR reporting period.
 Yes No

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 EHR reporting period.
 Yes No

Previous
Reset
Save & Continue

MU 1.5 Objective 10 Option 2 – Syndromic Surveillance Reporting

Enter information in all required fields.

Click **Save & Continue** to review your selection, click **Previous** to go back, or click **Reset** to restore this panel to the starting point or last saved data.

Get Started
R&A/Contact Info
Eligibility
Patient Volumes
Attestation
Review
Submit

Attestation Meaningful Use Objectives

Objective 10 Option 2 - Syndromic Surveillance Reporting

Click [HERE](#) to review CMS Guidelines for this measure.

When ready click the **Save & Continue** button to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point.

(*) Red asterisk indicates a required field.

Objective: The EP is in active engagement with a syndromic surveillance registry to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.

Measure: Option 2 - Syndromic Surveillance Reporting: The EP is in active engagement with a public health agency to submit syndromic surveillance data.

***Does this option apply to you?**
 Yes No

Active Engagement Options: If you have answered 'Yes' above, please select one of the options listed below.

Completed registration to submit data
 Testing and validation
 Production

EXCLUSION: If Option 2 is 'No', then select one of the Exclusions below. Any EP that meets one of the following criteria may be excluded from this objective.

Is not in a category of providers from which ambulatory syndromic surveillance data is collected by their jurisdiction's syndromic surveillance system.
 Yes No

Operates in a jurisdiction for which no public health agency is capable of receiving electronic syndromic surveillance data from EPs in the specific standards required to meet the CEHRT definition at the start of the EHR reporting period.
 Yes No

Operates in a jurisdiction where no public health agency has declared readiness to receive syndromic surveillance data from EPs at the start of the EHR reporting period.
 Yes No

The EP did not plan to report on syndromic surveillance data, therefore the EP is able to claim an exclusion.
 Yes No

Previous
Reset
Save & Continue

MU 1.5 Objective 10 Option 3A – Specialized Registry Reporting

Enter information in all required fields.

Click **Save & Continue** to review your selection, click **Previous** to go back, or click **Reset** to restore this panel to the starting point or last saved data.

Get Started R&A/Contact Info Eligibility Patient Volumes Attestation Review Submit

Attestation Meaningful Use Objectives

Objective 10 Option 3A – Specialized Registry Reporting

[Click HERE](#) to review CMS Guidelines for this measure.

When ready click the **Save & Continue** button to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point.

(*) Red asterisk indicates a required field.

Objective: The EP is in active engagement with a specialized registry to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.

Measure: Option 3 - Specialized Registry Reporting: The EP is in active engagement to submit data to a specialized registry.

***Does this option apply to you?**
 Yes No

If 'Yes', enter the name of the specialized registry used below.

Active Engagement Options: If you have answered 'Yes' above, please select one of the options listed below.

Completed registration to submit data
 Testing and validation
 Production

EXCLUSION: If Option 3 is 'No', then select one of the Exclusions below. Any EP that meets one of the following criteria may be excluded from this objective.

Does not diagnose or treat any disease or condition associated with, or collect relevant data that is collected by, a specialized registry in their jurisdiction during the EHR reporting period.
 Yes No

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 EHR reporting period.
 Yes No

Operates in a jurisdiction where no specialized registry for which the EP is eligible has declared readiness to receive electronic registry transactions at the beginning of the EHR reporting period.
 Yes No

The EP did not plan to report on specialized registry data, therefore the EP is able to claim an exclusion.
 Yes No

Previous Reset Save & Continue

MU 1.5 Objective 10 Option 3B – Specialized Registry Reporting

Enter information in all required fields.

Click **Save & Continue** to review your selection, click **Previous** to go back, or click **Reset** to restore this panel to the starting point or last saved data.

The screenshot shows a web application interface for 'Attestation Meaningful Use Objectives'. At the top, there is a navigation bar with buttons for 'Get Started', 'R&A/Contact Info', 'Eligibility', 'Patient Volumes', 'Attestation', 'Review', and 'Submit'. The main content area is titled 'Objective 10 Option 3B - Specialized Registry Reporting'. It includes an information icon and a link to 'Click HERE to review CMS Guidelines for this measure.' Below this is a blue instruction box: 'When ready click the **Save & Continue** button to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point.' A red asterisk note states: '(*) Red asterisk indicates a required field.' The 'Objective' is defined as: 'The EP is in active engagement with a specialized registry to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.' The 'Measure' is: 'Option 3 - Specialized Registry Reporting: The EP is in active engagement to submit data to a specialized registry.' A required text field is labeled: '*Enter the name of the specialized registry used below.' Below this is a list of 'Active Engagement Options' with checkboxes: 'Completed registration to submit data', 'Testing and validation', and 'Production'. At the bottom of the form are three buttons: 'Previous', 'Reset', and 'Save & Continue'.

Review PH Measures and Return to Main

After you enter information for a measure and click **Save & Continue**, you will return to the MU 2.2 Required Public Health Objective List Table. The information you entered for that measure will be displayed in the Entered column of the table as shown in the example below.

You can continue to edit the measures at any point prior to submitting the application.

Click **Edit** for the next measure.

Attestation Meaningful Use Objectives

To edit information, select the "EDIT" button next to the public health objective that you would like to edit. All successfully submitted progress on entry of measures will be retained if your session is terminated.

When all public health objectives have been edited and you are satisfied with the entries, select the "Return to Selection List" button to access the main attestation topic list.

Objective Number	Objective	Measure	Entered	Select
Objective 10 Option 1	The EP is in active engagement with an immunization registry or immunization information systems to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.	Option 1 - Immunization Registry Reporting: The EP is in active engagement with a public health agency to submit immunization data.		EDIT
Objective 10 Option 2	The EP is in active engagement with a syndromic surveillance registry to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.	Option 2 - Syndromic Surveillance Reporting: The EP is in active engagement with a public health agency to submit syndromic surveillance data.		EDIT
Objective 10 Option 3A	The EP is in active engagement with a specialized registry to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.	Option 3 - Specialized Registry Reporting: The EP is in active engagement to submit data to a specialized registry.		EDIT
Objective 10 Option 3B	The EP is in active engagement with a specialized registry to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.	Option 3 - Specialized Registry Reporting: The EP is in active engagement to submit data to a specialized registry.		EDIT

Return to Selection List

Once you have attested to all the selected measures for Public Health reporting, click **Return to Selection List** to return to the Meaningful Use Menu Measure Selection screen.

(Note: the above screenshot does not display the measures attested do, but is illustrating the button to use once finished).

Get Started R&A/Contact Info Eligibility Patient Volumes Attestation Review Submit

Attestation Meaningful Use Objectives

Providers are required to successfully attest to two Public Health Options without taking an exclusion. Select the two Options for attestation without taking an exclusion. Option 3 may be used twice to attest. If you cannot successfully attest to any Option, or can only successfully attest to one Option, then select Options 1, 2, and 3A. Option 3A cannot be excluded twice. Note, selecting all exclusions does not mean the Objective fails.

Required Public Health Objective List Table

Objective Number	Objective	Measure	Select
Objective 10 Option 1	The EP is in active engagement with an immunization registry or immunization information systems to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.	Option 1 - Immunization Registry Reporting: The EP is in active engagement with a public health agency to submit immunization data.	<input checked="" type="checkbox"/>
Objective 10 Option 2	The EP is in active engagement with a syndromic surveillance registry to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.	Option 2 - Syndromic Surveillance Reporting: The EP is in active engagement with a public health agency to submit syndromic surveillance data.	<input checked="" type="checkbox"/>
Objective 10 Option 3A	The EP is in active engagement with a specialized registry to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.	Option 3 - Specialized Registry Reporting: The EP is in active engagement to submit data to a specialized registry.	<input checked="" type="checkbox"/>
Objective 10 Option 3B	The EP is in active engagement with a specialized registry to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.	Option 3 - Specialized Registry Reporting: The EP is in active engagement to submit data to a specialized registry.	<input checked="" type="checkbox"/>

Click **Return to Main** to return to the Measure Topic List. Click **Save & Continue** to review your selection, or click **Reset** to restore this panel to the starting point, or last saved data.

If all measures were entered and saved, a check mark will display under the Completed column for the Required Public Health Objectives. You can continue to edit the topic measure after it has been marked complete.

Click the **Edit** button to further edit the topic, or click **Clear All** to clear the topic information you entered. Click **Begin** to start the next topic.

Get Started
R&A/Contact Info
Eligibility
Patient Volumes
Attestation
Review
Submit

Attestation Meaningful Use Objectives

Please complete the following topic areas: General Requirements, Meaningful Use Objectives, Required Public Health Objectives, and one of the Clinical Quality Measures (CQMs) options. The following icon will display to the left of the topic name when the minimum required entries are completed.

Please Note: Specific requirements apply to Meaningful Use Objectives. You may be instructed to complete additional steps depending on exclusions taken on completed objectives even though a is displayed.

Available actions for a topic will be determined by current progress level. To start a topic, select the "**Begin**" button. To modify a topic where entries have been made, select the "**EDIT**" button for a topic to modify any previously entered information. Select "**Previous**" to return.

Completed?	Topics	Progress	Action
	General Requirements	1/1	<div style="display: flex; justify-content: center; gap: 5px;"> EDIT Clear All </div>
	Meaningful Use Objectives	9/9	<div style="display: flex; justify-content: center; gap: 5px;"> EDIT Clear All </div>
	Required Public Health Objectives	4/4	<div style="display: flex; justify-content: center; gap: 5px;"> EDIT Clear All </div>

Manual Clinical Quality Measures

Please select one of the following three Clinical Quality Measure set options.

Only one Clinical Quality Measure (CQM) set can be completed. If you would like to switch to a different CQM set after one is started, use the "**Clear All**" button on the previously selected CQM set to enable the "**Begin**" button on a different CQM set. *Please note that the previously entered information will be cleared once the "**Clear All**" button is selected.*

Clinical Quality Measure - General	Begin
Clinical Quality Measure - Adult Set	Begin
Clinical Quality Measure - Pediatric Set	Begin
Cancel and Choose Electronic	Cancel

Note:
When all topics are marked as completed, select the "**Save & Continue**" button to complete the attestation process.

Previous
Save & Continue

Clinical Quality Measures (CQMs)

For EPs attesting in Program Year 2016, the Clinical Quality Measures will be the same whether you are scheduled to meet Stage 1 (MU 1.5) or Stage 2 (MU 2.3).

A check mark will display under the Completed column for the topic. You can continue to **EDIT** the topic measure after it has been marked complete. Click the **Begin** button to continue to the Clinical Quality Measures table of your choosing.

Name	Dr. Medicaid	Applicant NPI	999999999
Personal TIN/SSN	999999999	Payee TIN	999999999
Payment Year	1	Program Year	2015

Get Started
R&A/Contact Info
Eligibility
Patient Volumes
Attestation
Review
Submit

Attestation Meaningful Use Objectives

Please complete the following topic areas: General Requirements, Meaningful Use Objectives (1-9), Required Public Health Objective (10) and one of the Clinical Quality Measures (CQMs) options. The following icon will display to the left of the topic name when the minimum required entries are completed.

Please Note: Specific requirements apply to the Required Public Health Objective (10). You may be instructed to complete additional steps depending on exclusions taken on completed objectives even though a is displayed.

Available actions for a topic will be determined by current progress level. To start a topic, select the "Begin" button. To modify a topic where entries have been made, select the "EDIT" button for a topic to modify any previously entered information. Select "Previous" to return.

Completed?	Topics	Progress	Action
	General Requirements	2/2	<input type="button" value="EDIT"/> <input type="button" value="Clear All"/>
	Meaningful Use Objectives (1-9)	9/9	<input type="button" value="EDIT"/> <input type="button" value="Clear All"/>
	Required Public Health Objective (10)	4/4	<input type="button" value="EDIT"/> <input type="button" value="Clear All"/>

Manual Clinical Quality Measures

Please select one of the following three Clinical Quality Measure set options.

Only one Clinical Quality Measure (CQM) set can be completed. If you would like to switch to a different CQM set after one is started, use the "Clear All" button on the previously selected CQM set to enable the "Begin" button on a different CQM set. Please note that the previously entered information will be cleared once the "Clear All" button is selected.

Clinical Quality Measure - General	<input type="button" value="Begin"/>
Clinical Quality Measure - Adult Set	<input type="button" value="Begin"/>
Clinical Quality Measure - Pediatric Set	<input type="button" value="Begin"/>
Cancel and Choose Electronic	<input type="button" value="Cancel"/>

Note:
When all topics are marked as completed, select the "Save & Continue" button to complete the attestation process.

Clinical Quality Measures – General

This initial screen provides information about the Manual Clinical Quality Measures – General set. Click **Begin** to continue to the Meaningful Use Core Clinical Quality Measure Worklist Table.

Get Started
R&A/Contact Info
Eligibility
Patient Volumes
Attestation
Review
Submit

MEANINGFUL USE CLINICAL QUALITY MEASURES (CQMs) GENERAL SET MEASURES

As part of the meaningful use attestation process, EPs are required to complete a minimum of nine (9) CQMs from at least three (3) different domains. There are six (6) domains and sixty-four (64) CQMs from which to choose. The domain of each CQM is shown in the title bar of each individual CQM.

Please note, CQMs are listed first by domain name and then by CMS number.

YOU HAVE CHOSEN THE GENERAL SET OF ALL 64 AVAILABLE CQMs FROM WHICH TO SELECT YOUR MEASURES.

If you would like to switch to either the Recommended Adult set or the Recommended Pediatric set after you have already started the General set, click the "Return to Main" button and use the "Clear All" button. You will then be able to select the "Edit" button on a different CQM set. *Please note that the previously entered information will be cleared once the "Clear All" button is selected.*

You will not be able to proceed with your attestation without selecting a minimum set. You must select nine (9) CQMs from three (3) different domains.

It is important to SAVE all documentation and reports that support your Meaningful Use attestation. This includes reports for any CQMs that you attested to, even if the values are zeroes. If you see patients at multiple outpatient practice locations, please save your Meaningful Use documentation from all sites in case of audit.

UI 556

UI 556
 UI 559
 UI 565
 UI 570

Clinical Quality Measures – Adult Set

This initial screen provides information about the Manual Clinical Quality Measures – Adult Set. Click **Begin** to continue to the Meaningful Use Core Clinical Quality Measure Worklist Table.

Get Started	R&A/Contact Info <input checked="" type="checkbox"/>	Eligibility <input checked="" type="checkbox"/>	Patient Volumes <input checked="" type="checkbox"/>	Attestation <input checked="" type="checkbox"/>	Review	Submit <input type="checkbox"/>
<p>MEANINGFUL USE CLINICAL QUALITY MEASURES (CQMs) ADULT RECOMMENDED SET MEASURES</p> <p>As part of the meaningful use attestation process, EPs are required to complete a minimum of nine (9) CQMs from at least three (3) different domains. There are six (6) domains and sixty-four (64) CQMs from which to choose. The domain of each CQM is shown in the title bar of each individual CQM.</p> <p><i>Please note, CQMs are listed first by domain name and then by CMS number.</i></p> <p>YOU HAVE CHOSEN THE ADULT RECOMMENDED SET OF CQMs FROM WHICH TO SELECT YOUR MEASURES.</p> <p>For the Adult Recommended CQMs, the nine (9) measures are already pre-selected. You may choose additional CQMs but as a minimum you must answer the nine (9) adult recommended CQMs preselected. You are not able to de-select any of the measures. If you do not want to complete these 9 preselected measures, then click the "Return to Main" button and use the "Clear All" button. You will then be able to select the "Edit" button on a different CQM set. <i>Please note that the previously entered information will be cleared once the "Clear All" button is selected.</i></p> <p>Note, the minimum nine (9) CQMs from three (3) different domains have been pre-selected for you. You may select additional CQMs.</p> <p>It is important to SAVE all documentation and reports that support your Meaningful Use attestation. This includes reports for any CQMs that you attested to, even if the values are zeroes. If you see patients at multiple outpatient practice locations, please save your Meaningful Use documentation from all sites in case of audit.</p> <p style="text-align: right;">UI 560</p> <p style="text-align: center;"><input type="button" value="Begin"/></p>						

UI 557
UI 560
UI 566
UI 571

Quality Measures – Pediatric Set

This initial screen provides information about the Manual Clinical Quality Measures – Pediatric Set. Click **Begin** to continue to the Meaningful Use Core Clinical Quality Measure Worklist Table.

Get Started
R&A/Contact Info
Eligibility
Patient Volumes
Attestation
Review
Submit

MEANINGFUL USE CLINICAL QUALITY MEASURES (CQMs) PEDIATRIC RECOMMENDED SET MEASURES

As part of the meaningful use attestation process, EPs are required to complete a minimum of nine (9) CQMs from at least three (3) different domains. There are six (6) domains and sixty-four (64) CQMs from which to choose. The domain of each CQM is shown in the title bar of each individual CQM.

Please note, CQMs are listed first by domain name and then by CMS number.

YOU HAVE CHOSEN THE PEDIATRIC RECOMMENDED SET OF CQMs FROM WHICH TO SELECT YOUR MEASURES.

For the Pediatric Recommended CQMs, the nine (9) measures are already pre-selected. You may choose additional CQMs but as a minimum you must answer the nine (9) pediatric recommended CQMs preselected. You are not able to de-select any of the measures. If you do not want to complete these 9 preselected measures, then click the "Return to Main" button and use the "Clear All" button. You will then be able to select the "Edit" button on a different CQM set. *Please note that the previously entered information will be cleared once the "Clear All" button is selected.*

Note, the minimum **nine (9) CQMs from three (3) different domains** have been pre-selected for you. You may select additional CQMs.

It is important to SAVE all documentation and reports that support your Meaningful Use attestation. This includes reports for any CQMs that you attested to, even if the values are zeroes. If you see patients at multiple outpatient practice locations, please save your Meaningful Use documentation from all sites in case of audit.

UI 558
UI 561
UI 567
UI 572

Meaningful Use Clinical Quality Measure Worklist Table

There are a total of 64 Meaningful Use Clinical Quality Measures available for you to attest to. To simplify the selection process for EPs with an adult population and EPs with a pediatric population, the Clinical Quality Measures are grouped into sets that contain the recommended measures for these two populations. You may also choose from all 64 measures by selecting the General set. The following are the three available Clinical Quality Measures sets to choose from:

- General: Lists all 64 available Clinical Quality Measures
- Adult Set: Lists the Clinical Quality Measures recommended for EPs with an adult population
- Pediatric Set: Lists the Clinical Quality Measures recommended for EPs with a pediatric population

Only one Clinical Quality Measure set can be completed. If you would like to switch to a different set after one is started, select the Clear All button on the previously selected set.

Select the set that you would like to use to pick at least nine Meaningful Use Clinical Quality Measures from.

The screen shot below shows the instructional text for the General set with part of the table.

Meaningful Use Clinical Quality Measure Worklist Table

You have chosen the general Clinical Quality Measure (CQM) set. Select a minimum of nine (9) CQMs from at least three (3) different domains. There are six (6) domains and sixty-four (64) CQMs from which to choose. The domain of each CQM is shown in the title bar of each individual CQM. If you wish to select the adult recommended CQMs or the pediatric recommended CQMs select the **"Return to Main"** button and then choose the recommended CQM option you wish to answer. Please note, as a minimum you must select nine (9) CQMs from three (3) different domains before proceeding to the next screen.

If you do not want to complete these nine measures then select the **"Return to Main"** button below and use the **"Clear All"** button on the previously selected Clinical Quality Measure General set line to enable the **"Begin"** button on a different CQM set. The previously entered information will be cleared once the **"Clear All"** button is selected. When all CQMs have been edited and you are satisfied with the entries, select the **"Return to Main"** button to access the main attestation topic list.

Please Note: Clinical quality measures are sorted by Domain category and then by Measure Number.

Clinical Quality Measure list Table			
Measure#	Title	Domain	Selection
CMS50 v4.0.000	Closing the Referral Loop: Receipt of Specialist Report	Care Coordination	<input type="checkbox"/>
CMS52 v4.1.000	HIV/AIDS: Pneumocystis Jiroveci Pneumonia (PCP) Prophylaxis	Clinical Process/Effectiveness	<input type="checkbox"/>
CMS61 v5.1.000	Preventive Care and Screening: Cholesterol - Fasting Low Density Lipoprotein (LDL-C) Test Performed	Clinical Process/Effectiveness	<input type="checkbox"/>
CMS62 v4.0.000	HIV/AIDS: Medical Visit	Clinical Process/Effectiveness	<input type="checkbox"/>
CMS64 v5.1.000	Preventive Care and Screening: Risk-Stratified Cholesterol - Fasting Low Density Lipoprotein (LDL-C)	Clinical Process/Effectiveness	<input type="checkbox"/>
CMS65 v5.1.000	Hypertension: Improvement in Blood Pressure	Clinical Process/Effectiveness	<input type="checkbox"/>
CMS74 v5.1.000	Primary Caries Prevention Intervention as Offered by Primary Care Providers, Including Dentists	Clinical Process/Effectiveness	<input type="checkbox"/>

The screen below displays the Meaningful Use Clinical Quality Measure Worklist Table. This screen displays the Meaningful Use Clinical Quality Measures you selected on the previous screen.

Click **Edit** to enter or edit information for the measure, or click **Return** to return to the Meaningful Use Clinical Quality Selection screen.

Once information is successfully entered and saved for a measure it will be displayed in the **Entered** column on this screen.

Get Started
R&A/Contact Info
Eligibility
Patient Volumes
Attestation
Review
Submit

Meaningful Use Clinical Quality Measures

To edit information, select the "EDIT" button next to the measure that you would like to edit. All progress on entry of measures will be retained if your session is terminated.

When all measures have been edited and you are satisfied with the entries, select the "Return" button to access the main attestation topic list.

Meaningful Use Clinical Quality Measure List Table

Measure#	Title	Domain	Entered	Select
CMS50 v4.0.000	Closing the Referral Loop: Receipt of Specialist Report	Care Coordination		<input checked="" type="button" value="EDIT"/>
CMS52 v4.1.000	HIV/AIDS: Pneumocystis Jiroveci Pneumonia (PCP) Prophylaxis	Clinical Process/Effectiveness		<input type="button" value="EDIT"/>
CMS61 v5.1.000	Preventive Care and Screening: Cholesterol - Fasting Low Density Lipoprotein (LDL-C) Test Performed	Clinical Process/Effectiveness		<input type="button" value="EDIT"/>
CMS62 v4.0.000	HIV/AIDS: Medical Visit	Clinical Process/Effectiveness		<input type="button" value="EDIT"/>
CMS129 v5.0.000	Prostate Cancer: Avoidance of Overuse of Bone Scan for Staging Low Risk Prostate Cancer Patients	Efficient Use of Healthcare Resources		<input type="button" value="EDIT"/>
CMS146 v4.0.000	Appropriate Testing for Children with Pharyngitis	Efficient Use of Healthcare Resources		<input type="button" value="EDIT"/>
CMS154 v4.0.000	Appropriate Treatment for Children with Upper Respiratory Infection (URI)	Efficient Use of Healthcare Resources		<input type="button" value="EDIT"/>
CMS166 v5.0.000	Use of Imaging Studies for Low Back Pain	Efficient Use of Healthcare Resources		<input type="button" value="EDIT"/>
CMS68 v5.0.000	Documentation of Current Medications in the Medical Record	Patient Safety		<input type="button" value="EDIT"/>
CMS132 v4.0.000	Cataracts: Complications within 30 Days Following Cataract Surgery Requiring Additional Surgical Procedures	Patient Safety		<input type="button" value="EDIT"/>
CMS139 v4.0.000	Falls: Screening for Future Fall Risk	Patient Safety		<input type="button" value="EDIT"/>
CMS156 v4.1.000	Use of High-Risk Medications in the Elderly	Patient Safety		<input type="button" value="EDIT"/>
CMS117 v4.0.000	Childhood Immunization Status	Population/Public Health		<input type="button" value="EDIT"/>
CMS138 v4.0.000	Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention	Population/Public Health		<input type="button" value="EDIT"/>
CMS147 v5.0.000	Preventive Care and Screening: Influenza Immunization	Population/Public Health		<input type="button" value="EDIT"/>
CMS153 v4.0.000	Chlamydia Screening for Women	Population/Public Health		<input type="button" value="EDIT"/>

The following is a list of the 64 Clinical Quality Measures available for you to attest to:

Measure Number	Clinical Quality Measure	Domain	Screen Example
CMS137v3	Clinical Quality Measure 2	Clinical Process/Effectiveness	Screen 2
CMS165v3	Clinical Quality Measure 3		Screen 1
CMS125v3	Clinical Quality Measure 7		Screen 1
CMS124v3	Clinical Quality Measure 8		Screen 1
CMS130v3	Clinical Quality Measure 10		Screen 1
CMS126v3	Clinical Quality Measure 11		Screen 2
CMS127v3	Clinical Quality Measure 14		Screen 3
CMS131v3	Clinical Quality Measure 16		Screen 3
CMS123v3	Clinical Quality Measure 17		Screen 3
CMS122v3	Clinical Quality Measure 18		Screen 3
CMS148v3	Clinical Quality Measure 19		Screen 3
CMS134v3	Clinical Quality Measure 20		Screen 3
CMS163v3	Clinical Quality Measure 21		Screen 3
CMS164v3	Clinical Quality Measure 22		Screen 3
CMS145v3	Clinical Quality Measure 24		Screen 4
CMS182v4	Clinical Quality Measure 25		Screen 3
CMS135v3	Clinical Quality Measure 26		Screen 1
CMS144v3	Clinical Quality Measure 27		Screen 1
CMS143v3	Clinical Quality Measure 28		Screen 1
CMS167v3	Clinical Quality Measure 29		Screen 1
CMS142v3	Clinical Quality Measure 30		Screen 1
CMS161v3	Clinical Quality Measure 32		Screen 3
CMS128v3	Clinical Quality Measure 33		Screen 1
CMS136v3	Clinical Quality Measure 34		Screen 3
CMS169v3	Clinical Quality Measure 35	Screen 3	

Measure Number	Clinical Quality Measure	Domain	Screen Example
CMS141v4	Clinical Quality Measure 37		Screen 1
CMS140v3	Clinical Quality Measure 38		Screen 1
CMS62v3	Clinical Quality Measure 40		Screen 3
CMS52v3	Clinical Quality Measure 41		Screen 4
CMS77v3	Clinical Quality Measure 42		Screen 3
CMS133v3	Clinical Quality Measure 47		Screen 1
CMS158v3	Clinical Quality Measure 48		Screen 1
CMS159v3	Clinical Quality Measure 49		Screen 1
CMS160v3	Clinical Quality Measure 50		Screen 4
CMS75v3	Clinical Quality Measure 51		Screen 3
CMS74v4	Clinical Quality Measure 54		Screen 2
CMS61v4	Clinical Quality Measure 55		Screen 4
CMS64v4	Clinical Quality Measure 56		Screen 4
CMS149v3	Clinical Quality Measure 57		Screen 1
CMS65v4	Clinical Quality Measure 58		Screen 1
CMS146v3	Clinical Quality Measure 1	Efficient Use of Healthcare Resources	Screen 1
CMS166v4	Clinical Quality Measure 15		Screen 1
CMS154v3	Clinical Quality Measure 23		Screen 1
CMS129v4	Clinical Quality Measure 39		Screen 1
CMS157v3	Clinical Quality Measure 36	Patient and Family Engagement	Screen 3
CMS66v3	Clinical Quality Measure 60		Screen 1
CMS56v3	Clinical Quality Measure 61		Screen 1
CMS90v3	Clinical Quality Measure 62		Screen 1
CMS156v3	Clinical Quality Measure 4	Patient Safety	Screen 3
CMS139v3	Clinical Quality Measure 31		Screen 1

Measure Number	Clinical Quality Measure	Domain	Screen Example
CMS68v4	Clinical Quality Measure 44		Screen 1
CMS132v3	Clinical Quality Measure 46		Screen 1
CMS177v3	Clinical Quality Measure 52		Screen 3
CMS179v3	Clinical Quality Measure 63		Screen 6
CMS155v3	Clinical Quality Measure 5	Population/Public Health	Screen 2
CMS138v3	Clinical Quality Measure 6		Screen 1
CMS153v3	Clinical Quality Measure 9		Screen 2
CMS117v3	Clinical Quality Measure 12		Screen 3
CMS147v3	Clinical Quality Measure 13		Screen 1
CMS2v4	Clinical Quality Measure 43		Screen 5
CMS69v3	Clinical Quality Measure 45		Screen 4
CMS82v2	Clinical Quality Measure 53		Screen 3
CMS22v3	Clinical Quality Measure 64		Screen 5
CMS50v3	Clinical Quality Measure 59		Care Coordination

There are 64 Meaningful Use Clinical Quality Measure screens. As you proceed through the Meaningful Use Clinical Quality Measure section of MAPIR, you will see six different screen layouts. Instructions for each measure are provided on the screen. For additional help with a specific Meaningful Use Clinical Quality Measure, click on the link provided above the blue instruction box. Screen layout examples are shown below.

Screen 1

The following Measure Numbers use this screen layout:

CQM 1, 3, 6, 7, 8, 10, 13, 15, 23, 26, 27, 28, 29, 30, 31, 33, 37, 38, 39, 44, 46, 47, 48, 49, 57, 58, 60, 61, and 62

Get Started R&A/Contact Info Eligibility Patient Volumes Attestation Review Submit

Attestation Meaningful Use Measures

Clinical Quality Measure 1

Click [HERE](#) to review CMS Guidelines for this measure.

When ready click the **Save & Continue** button to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point.

(*) Red asterisk indicates a required field.

Responses are required for the clinical quality measure displayed on this page.

Domain: Efficient Use of Healthcare Resources
Measure Number: CMS146 v4.0.000
NQF Number: 0002
Measure Title: Appropriate Testing for Children with Pharyngitis
Measure Description: Percentage of children 2-18 years of age who were diagnosed with pharyngitis, ordered an antibiotic and received a group A streptococcus (strep) test for the episode.

Numerator: A positive whole number, including zero. Use the "Click HERE" above for a definition.
Denominator: A positive whole number, including zero. Use the "Click HERE" above for a definition.
Performance Rate(%): A percent value between 0.0 and 100.0. Use the "Click HERE" above for a definition.
Exclusion: A positive whole number, including zero. Use the "Click HERE" above for a definition.

* Numerator: * Denominator: * Performance Rate (%): * Exclusion:

Previous Reset Save & Continue

Screen 2

The following Measure Numbers use this screen layout:

CQM 2, 5, 9, 11, and 54

Get Started R&A/Contact Info Eligibility Patient Volumes Attestation Review Submit

Attestation Meaningful Use Measures

Clinical Quality Measure 2

[Click HERE](#) to review CMS Guidelines for this measure.

When ready click the **Save & Continue** button to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point.

(*) Red asterisk indicates a required field.

Responses are required for the clinical quality measure displayed on this page.

Domain: Clinical Process/Effectiveness
Measure Number: CMS137 v4.1.000
NQF Number: 0004
Measure Title: Initiation and Engagement of Alcohol and Other Drug Dependence Treatment
Measure Description: Percentage of patients 13 years of age and older with a new episode of alcohol and other drug (AOD) dependence who received the following. Two rates are reported.

- a. Percentage of patients who initiated treatment within 14 days of the diagnosis.
- b. Percentage of patients who initiated treatment and who had two or more additional services with an AOD diagnosis within 30 days of the initiation visit.

Numerator: A positive whole number, including zero. Use the "Click HERE" above for a definition.
Denominator: A positive whole number, including zero. Use the "Click HERE" above for a definition.
Performance Rate(%): A percent value between 0.0 and 100.0. Use the "Click HERE" above for a definition.
Exclusion: A positive whole number, including zero. Use the "Click HERE" above for a definition.

Stratum 1 Patient ages 13 -17

* Numerator 1: <input type="text"/>	* Denominator 1: <input type="text"/>	* Performance Rate 1(%): <input type="text"/>	* Exclusion 1: <input type="text"/>
* Numerator 2: <input type="text"/>	* Denominator 2: <input type="text"/>	* Performance Rate 2(%): <input type="text"/>	* Exclusion 2: <input type="text"/>

Stratum 2 Patient ages >=18

* Numerator 3: <input type="text"/>	* Denominator 3: <input type="text"/>	* Performance Rate 3(%): <input type="text"/>	* Exclusion 3: <input type="text"/>
* Numerator 4: <input type="text"/>	* Denominator 4: <input type="text"/>	* Performance Rate 4(%): <input type="text"/>	* Exclusion 4: <input type="text"/>

Stratum 3 Total Patient ages >=13

* Numerator 5: <input type="text"/>	* Denominator 5: <input type="text"/>	* Performance Rate 5(%): <input type="text"/>	* Exclusion 5: <input type="text"/>
* Numerator 6: <input type="text"/>	* Denominator 6: <input type="text"/>	* Performance Rate 6(%): <input type="text"/>	* Exclusion 6: <input type="text"/>

Previous Reset Save & Continue

Screen 3

The following Measure Numbers use this screen layout:

CQM 4, 12, 14, 16, 17, 18, 19, 20, 21, 22, 25, 32, 34, 35, 36, 40, 42, 51, 52, 53, and 59

Get Started
R&A/Contact Info
Eligibility
Patient Volumes
Attestation
Review
Submit

Attestation Meaningful Use Measures

Clinical Quality Measure 12

i Click [HERE](#) to review CMS Guidelines for this measure.

When ready click the **Save & Continue** button to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point.

(*) Red asterisk indicates a required field.

Responses are required for the clinical quality measure displayed on this page.

Domain:	Population/Public Health
Measure Number:	CMS117 v4.0.000
NQF Number:	0038
Measure Title:	Childhood Immunization Status
Measure Description:	Percentage of children 2 years of age who had four diphtheria, tetanus and acellular pertussis (DTaP); three polio (IPV), one measles, mumps and rubella (MMR); three H influenza type B (HiB); three hepatitis B (Hep B); one chicken pox (VZV); four pneumococcal conjugate (PCV); one hepatitis A (Hep A); two or three rotavirus (RV); and two influenza (flu) vaccines by their second birthday.

Numerator:	A positive whole number, including zero. Use the "Click HERE" above for a definition.
Denominator:	A positive whole number, including zero. Use the "Click HERE" above for a definition.
Performance Rate(%):	A percent value between 0.0 and 100.0. Use the "Click HERE" above for a definition.

* Numerator: <input style="width: 60px;" type="text"/>	* Denominator: <input style="width: 60px;" type="text"/>	* Performance Rate (%): <input style="width: 60px;" type="text"/>
---	---	--

Previous
Reset
Save & Continue

Screen 4

The following Measure Numbers use this screen layout:

CQM 24, 41, 45, 50, 55, and 56

Get Started R&A/Contact Info Eligibility Patient Volumes Attestation Review Submit

Attestation Meaningful Use Measures

Clinical Quality Measure 24

i Click [HERE](#) to review CMS Guidelines for this measure.

When ready click the **Save & Continue** button to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point.

(*) Red asterisk indicates a required field.

Responses are required for the clinical quality measure displayed on this page.

Domain:	Clinical Process/Effectiveness
Measure Number:	CMS145 v4.1.000
NQF Number:	0070
Measure Title:	Coronary Artery Disease (CAD): Beta-Blocker Therapy - Prior Myocardial Infarction (MI) or Left Ventricular Systolic Dysfunction (LVEF<40%)
Measure Description:	Percentage of patients aged 18 years and older with a diagnosis of coronary artery disease seen within a 12 month period who also have a prior MI or a current or prior LVEF<40% who were prescribed beta-blocker therapy.
Numerator:	A positive whole number, including zero. Use the "Click HERE" above for a definition.
Denominator:	A positive whole number, including zero. Use the "Click HERE" above for a definition.
Performance Rate(%):	A percent value between 0.0 and 100.0. Use the "Click HERE" above for a definition.
Exception:	A positive whole number, including zero. Use the "Click HERE" above for a definition.

Population Criteria 1: Patients with left ventricular systolic dysfunction (LVEF<40%)

* Numerator 1: * Denominator 1: * Performance Rate 1(%): * Exception 1:

Population Criteria 2: Patients with a prior (resolved) myocardial infarction

* Numerator 2: * Denominator 2: * Performance Rate 2(%): * Exception 2:

Previous Reset Save & Continue

Screen 5

The following Measure Numbers use this screen layout:

CQM 43 and 64

Get Started
R&A/Contact Info
Eligibility
Patient Volumes
Attestation
Review
Submit

Attestation Meaningful Use Measures

Clinical Quality Measure 43

[Click HERE](#) to review CMS Guidelines for this measure.

*When ready click the **Save & Continue** button to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point.*

(*) Red asterisk indicates a required field.

Responses are required for the clinical quality measure displayed on this page.

Domain:	Population/Public Health
Measure Number:	CMS2 v5.0.000
NQF Number:	0418
Measure Title:	Preventive Care and Screening: Screening for Clinical Depression and Follow-Up Plan
Measure Description:	Percentage of patients aged 12 years and older screened for clinical depression on the date of the encounter using an age appropriate standardized depression screening tool AND if positive, a follow up plan is documented on the date of the positive screen.

Numerator:	A positive whole number, including zero. Use the "Click HERE" above for a definition.
Denominator:	A positive whole number, including zero. Use the "Click HERE" above for a definition.
Performance Rate(%):	A percent value between 0.0 and 100.0. Use the "Click HERE" above for a definition.
Exclusion:	A positive whole number, including zero. Use the "Click HERE" above for a definition.
Exception:	A positive whole number, including zero. Use the "Click HERE" above for a definition.

* Numerator: * Denominator: * Performance Rate(%): * Exclusion: * Exception:

Previous
Reset
Save & Continue

Screen 6

The following Measure Numbers use this screen layout:

CQM 63

Get Started
R&A/Contact Info
Eligibility
Patient Volumes
Attestation
Review
Submit

Attestation Meaningful Use Measures

Clinical Quality Measure 63

i Click [HERE](#) to review CMS Guidelines for this measure.

When ready click the **Save & Continue** button to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point.

(*) Red asterisk indicates a required field.

Responses are required for the clinical quality measure displayed on this page.

Domain:	Patient Safety
Measure Number:	CMS179 v4.0.000
NQF Number:	Not Applicable
Measure Title:	ADE Prevention and Monitoring: Warfarin Time in Therapeutic Range
Measure Description:	Average percentage of time in which patients aged 18 and older with atrial fibrillation who are on chronic warfarin therapy have International Normalized Ratio (INR) test results within the therapeutic range (i.e., TTR) during the measurement period.

Population:	A positive whole number, including zero. Use the "Click HERE" above for a definition.
Observation (%):	A percent value between 0.0 and 100.0. Use the "Click HERE" above for a definition.

* Population: * Observation (%):

Previous
Reset
Save & Continue

After you enter information for a measure and click **Save & Continue**, you will return to the Meaningful Use Clinical Quality Measure List Table. The information you entered for that measure will be displayed in the Entered column of the table as shown in the example below.

You can continue to edit the measures at any point prior to submitting the application.

Click **Edit** for the next measure.

To edit information, select the **"EDIT"** button next to the measure that you would like to edit. All progress on entry of measures will be retained if your session is terminated.

When all measures have been edited and you are satisfied with the entries, select the **"Return"** button to access the main attestation topic list.

Meaningful Use Clinical Quality Measure List Table

Measure#	Title	Domain	Entered	Select
CMS50 v3	Closing the referral loop: receipt of specialist report	Care Coordination	Numerator = 25 Denominator = 100 Performance Rate (%) = 10.0	<input type="button" value="EDIT"/>
CMS52 v3	HIV/AIDS: Pneumocystis jiroveci pneumonia (PCP) Prophylaxis	Clinical Process/Effectiveness		<input type="button" value="EDIT"/>
CMS61 v4	Preventive Care and Screening: Cholesterol - Fasting Low Density Lipoprotein (LDL-C) Test Performed	Clinical Process/Effectiveness		<input type="button" value="EDIT"/>
CMS125 v3	Breast Cancer Screening	Clinical Process/Effectiveness		<input type="button" value="EDIT"/>
CMS126 v3	Use of Appropriate Medications for Asthma	Clinical Process/Effectiveness		<input type="button" value="EDIT"/>
CMS127 v3	Pneumonia Vaccination Status for Older Adults	Clinical Process/Effectiveness		<input type="button" value="EDIT"/>
CMS129 v4	Prostate Cancer: Avoidance of Overuse of Bone Scan for Staging Low Risk Prostate Cancer Patients	Efficient Use of Healthcare Resources		<input type="button" value="EDIT"/>
CMS146 v3	Appropriate Testing for Children with Pharyngitis	Efficient Use of Healthcare Resources		<input type="button" value="EDIT"/>
CMS179 v3	ADE Prevention and Monitoring: Warfarin Time in Therapeutic Range	Patient Safety		<input type="button" value="EDIT"/>

The screen below displays the Meaningful Use Quality Measures List Table with data entered for every measure selected to attest to.

Once you have attested to and reviewed the selected CQMs, click **Return** to return to the CQM Worklist Table.

Meaningful Use Clinical Quality Measures

To edit information, select the "EDIT" button next to the measure that you would like to edit. All progress on entry of measures will be retained if your session is terminated.

When all measures have been edited and you are satisfied with the entries, select the "Return" button to access the main attestation topic list.

Meaningful Use Clinical Quality Measure List Table

Measure#	Title	Domain	Entered	Select
CMS65 v4	Hypertension: Improvement in blood pressure	Clinical Process/Effectiveness	Numerator = 1 Denominator = 1 Performance Rate (%) = 100.0 Exclusion = 0	<input type="button" value="EDIT"/>
CMS74 v4	Primary Caries Prevention Intervention as Offered by Primary Care Providers, including Dentists	Clinical Process/Effectiveness	Stratum 1 Numerator 1 = 1 Denominator 1 = 1 Performance Rate 1 (%) = 100.0 Stratum 2 Numerator 2 = 1 Denominator 2 = 1 Performance Rate 2 (%) = 100.0 Stratum 3 Numerator 3 = 1 Denominator 3 = 1 Performance Rate 3 (%) = 100.0	<input type="button" value="EDIT"/>
CMS75 v3	Children who have dental decay or cavities	Clinical Process/Effectiveness	Numerator = 1 Denominator = 1 Performance Rate (%) = 100.0	<input type="button" value="EDIT"/>
CMS132 v3	Cataracts: Complications within 30 Days Following Cataract Surgery Requiring Additional Surgical Procedures	Patient Safety	Numerator = 1 Denominator = 1 Performance Rate (%) = 100.0 Exclusion = 0	<input type="button" value="EDIT"/>
CMS139 v3	Falls: Screening for Future Fall Risk	Patient Safety	Numerator = 1 Denominator = 1 Performance Rate (%) = 100.0 Exception = 0	<input type="button" value="EDIT"/>
CMS156 v3	Use of High-Risk Medications in the Elderly	Patient Safety	Numerator 1 = 1 Denominator 1 = 1 Performance Rate 1 (%) = 100.0 Numerator 2 = 1 Denominator 2 = 1 Performance Rate 2 (%) = 100.0	<input type="button" value="EDIT"/>
CMS69 v3	Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up	Population/Public Health	Numerator 1 = 1 Denominator 1 = 1 Performance Rate 1 (%) = 100.0 Exclusion 1 = 0 Numerator 2 = 1 Denominator 2 = 1 Performance Rate 2 (%) = 100.0 Exclusion 2 = 0	<input type="button" value="EDIT"/>
CMS82 v2	Maternal depression screening	Population/Public Health	Numerator = 1 Denominator = 1 Performance Rate (%) = 100.0	<input type="button" value="EDIT"/>
CMS117 v3	Childhood Immunization Status	Population/Public Health	Numerator = 1 Denominator = 1 Performance Rate (%) = 100.0	<input type="button" value="EDIT"/>

You will return to the CQM Worklist Table, with the selected measures you have completed showing checkmarks in the boxes.

Click **Return to Main** at the bottom of the CQM Worklist Table to go back to the Measures Topic List.

Meaningful Use Clinical Quality Measure Worklist Table

You have chosen the general Clinical Quality Measure (CQM) set. Select a minimum of nine (9) CQMs from at least three (3) different domains. There are six (6) domains and sixty-four (64) CQMs from which to choose. The domain of each CQM is shown in the title bar of each individual CQM. If you wish to select the adult recommended CQMs or the pediatric recommended CQMs select the **Return to Main** button and then choose the recommended CQM option you wish to answer. Please note, as a minimum you must select nine (9) CQMs from three (3) different domains before proceeding to the next screen.

If you do not want to complete these nine measures then select the **Return to Main** button below and use the **Clear All** button on the previously selected Clinical Quality Measure General set line to enable the **Begin** button on a different CQM set. The previously entered information will be cleared once the **Clear All** button is selected. When all CQMs have been edited and you are satisfied with the entries, select the **Return to Main** button to access the main attestation topic list.

Please Note: Clinical quality measures are sorted by Domain category and then by Measure Number.

Measure#	Title	Domain	Selection
CMS50 v4.0.000	Closing the Referral Loop: Receipt of Specialist Report	Care Coordination	<input type="checkbox"/>
CMS52 v4.1.000	HIV/AIDS: Pneumocystis Jiroveci Pneumonia (PCP) Prophylaxis	Clinical Process/Effectiveness	<input type="checkbox"/>
CMS61 v5.1.000	Preventive Care and Screening: Cholesterol - Fasting Low Density Lipoprotein (LDL-C) Test Performed	Clinical Process/Effectiveness	<input type="checkbox"/>
CMS62 v4.0.000	HIV/AIDS: Medical Visit	Clinical Process/Effectiveness	<input type="checkbox"/>
CMS64 v5.1.000	Preventive Care and Screening: Risk-Stratified Cholesterol - Fasting Low Density Lipoprotein (LDL-C)	Clinical Process/Effectiveness	<input type="checkbox"/>
CMS65 v5.1.000	Hypertension: Improvement in Blood Pressure	Clinical Process/Effectiveness	<input type="checkbox"/>
CMS74 v5.1.000	Primary Caries Prevention Intervention as Offered by Primary Care Providers, Including Dentists	Clinical Process/Effectiveness	<input type="checkbox"/>

CMS155 v3	Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents	Population/Public Health	<input type="checkbox"/>
-----------	---	--------------------------	--------------------------

Return to Main
Reset
Save & Continue

At the bottom of the screen, click **Return to Main** to return to the Meaningful Use Measure Topic List.

If all measures were entered and saved, a check mark will display under the Completed column for the topic. You can continue to edit the topic measure after it has been marked complete.

The screen on the following page displays the Measures Topic List with all four meaningful use objective topics marked complete. Click **Save & Continue** to view a summary of the Meaningful Use Objectives you attested to.

Get Started
R&A/Contact Info
Eligibility
Patient Volumes
Attestation
Review
Submit

Attestation Meaningful Use Objectives

Please complete the following topic areas: General Requirements, Meaningful Use Objectives (1-9), Required Public Health Objective (10) and one of the Clinical Quality Measures (CQMs) options. The following icon will display to the left of the topic name when the minimum required entries are completed.

Please Note: Specific requirements apply to the Required Public Health Objective (10). You may be instructed to complete additional steps depending on exclusions taken on completed objectives even though a is displayed.

Available actions for a topic will be determined by current progress level. To start a topic, select the **"Begin"** button. To modify a topic where entries have been made, select the **"EDIT"** button for a topic to modify any previously entered information. Select **"Previous"** to return.

Completed?	Topics	Progress	Action
	General Requirements	2/2	<div style="border: 1px solid gray; padding: 2px; display: inline-block;">EDIT</div> <div style="border: 1px solid gray; padding: 2px; display: inline-block;">Clear All</div>
	Meaningful Use Objectives (1-9)	9/9	<div style="border: 1px solid gray; padding: 2px; display: inline-block;">EDIT</div> <div style="border: 1px solid gray; padding: 2px; display: inline-block;">Clear All</div>
	Required Public Health Objective (10)	4/4	<div style="border: 1px solid gray; padding: 2px; display: inline-block;">EDIT</div> <div style="border: 1px solid gray; padding: 2px; display: inline-block;">Clear All</div>

Manual Clinical Quality Measures

Please select one of the following three Clinical Quality Measure set options.

Only one Clinical Quality Measure (CQM) set can be completed. If you would like to switch to a different CQM set after one is started, use the **"Clear All"** button on the previously selected CQM set to enable the **"Begin"** button on a different CQM set. *Please note that the previously entered information will be cleared once the **"Clear All"** button is selected.*

	Clinical Quality Measure - General	9/9	<div style="border: 1px solid gray; padding: 2px; display: inline-block;">EDIT</div> <div style="border: 1px solid gray; padding: 2px; display: inline-block;">Clear All</div>
Clinical Quality Measure - Adult Set			
Clinical Quality Measure - Pediatric Set			
Cancel and Choose Electronic			<div style="border: 1px solid gray; padding: 2px; display: inline-block;">Cancel</div>

Note:
 When all topics are marked as completed, select the **"Save & Continue"** button to complete the attestation process.

Previous

Save & Continue

Meaningful Use Measures Summary

Meaningful Use Measures Summary Sample Screen

This screen displays a summary of all entered meaningful use attestation information.

(Depending on what Program Year and Meaningful Use phase you attested to, the measures will be different.)

Review the information for each measure. If further edits are necessary, click **Previous** to return to the Measures Topic List where you can choose a topic to edit.

If the information on the summary is correct, click **Save & Continue** to proceed to Part 3 of 3 of the Attestation Phase.

Get Started
R&A/Contact Info
Eligibility
Patient Volumes
Attestation
Review
Submit

Attestation Meaningful Use Measures

The Meaningful Use Measures you have attested to are depicted below. Please review the current information to verify what you have entered is correct.

Meaningful Use General Requirements Review

Question	Entered
Please demonstrate that at least 50% of all your encounters occur in a location(s) where certified EHR technology is being utilized.	Numerator = 6 Denominator = 10 Percentage = 60%
Please demonstrate that at least 80% of all unique patients have their data in the certified EHR during the EHR reporting period.	Numerator = 9 Denominator = 10 Percentage = 90%
<Enter Professional General Tips 1>	No
<Enter Professional General Tips 2>	No
<Enter Professional General Tips 3>	No

Meaningful Use Objective Review

Objective Number	Objective	Entered
Objective 1	Protect electronic health information created or maintained by the Certified EHR Technology (CEHRT) through the implementation of appropriate technical capabilities.	Measure = Yes Date = 01/01/2016 Name and Title = Dr. Medicaid Provider
Objective 2	Use clinical decision support to improve performance on high-priority health conditions.	Measure 1 = Yes Measure 2 Exclusion = No Measure 2 = Yes
Objective 3 Alternate 1	Use computerized provider order entry (CPOE) for medication, laboratory and radiology orders directly entered by any licensed healthcare professional who can enter orders into the medical record per state, local and professional guidelines.	Patient Records = Only EHR Measure 1 Exclusion 1 = No Numerator 1 = 5 Denominator 1 = 5 Percentage = 100% Measure 2 Exclusion 2 = No Alternate Exclusion 2 = No Numerator 2 = 5 Denominator 2 = 5 Percentage = 100% Measure 3 Exclusion 3 = No Alternate Exclusion 3 = No Numerator 3 = 5 Denominator 3 = 5 Percentage = 100%

Page 2 of 3 of the Meaningful Use Measures Summary

Objective 4	Generate and transmit permissible prescriptions electronically (eRx).	Patient Records = Only EHR Exclusion 1 = No Exclusion 2 = No Numerator = 5 Denominator = 5 Percentage = 100%
Objective 5	The EP who transitions their patients to another setting of care or provider of care or refers their patients to another provider of care provides a summary care record for each transition of care or referral.	Exclusion = No Numerator = 5 Denominator = 5 Percentage = 100%
Objective 6	Use clinically relevant information from Certified EHR Technology to identify patient-specific education resources and provide those resources to the patient.	Exclusion = No Numerator = 5 Denominator = 5 Percentage = 100%
Objective 7	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.	Exclusion = No Numerator = 5 Denominator = 5 Percentage = 100%
Objective 8	Provide patients the ability to view online, download, and transmit their health information within four business days of the information being available to the EP.	Measure 1 Exclusion Measure 1 and 2 = No Numerator 1 = 5 Denominator 1 = 5 Percentage = 100% Measure 2 Exclusion Measure 2 = No Numerator 2 = 5 Denominator 2 = 5
Objective 9	Use secure electronic messaging to communicate with patients on relevant health information.	Exclusion = No Numerator = 5 Denominator = 5 Percentage = 100%

Required Public Health Objective Review

Objective Number	Objective	Entered
Objective 10 Option 1	The EP is in active engagement with an immunization registry or immunization information systems to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.	Measure Option 1 = Yes Active Engagement Option = Completed registration to submit data
Objective 10 Option 2	The EP is in active engagement with a syndromic surveillance registry to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.	Measure Option 2 = No Exclusion 1 = Excluded Exclusion 2 = No Exclusion 3 = No Exclusion 4 = No
Objective 10 Option 3A	The EP is in active engagement with a specialized registry to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.	Measure Option 3A = Yes Specialized Registry = Specialized Registry Name Active Engagement Option = Testing and validation
Objective 10 Option 3B	The EP is in active engagement with a specialized registry to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.	Specialized Registry = Specialized Registry Name Active Engagement Option = Completed registration to submit data

Page 3 of 3 of the Meaningful Use Measures Summary

Meaningful Use Clinical Quality Measure Review			
Measure Code	Domain	Title	Entered
CMS50 v4.0.000	Care Coordination	Closing the Referral Loop: Receipt of Specialist Report	Numerator = 1 Denominator = 1 Performance Rate (%) = 100.0
CMS52 v4.1.000	Clinical Process/Effectiveness	HIV/AIDS: Pneumocystis Jiroveci Pneumonia (PCP) Prophylaxis	Stratum 1 Numerator 1 = 1 Denominator 1 = 1 Performance Rate 1 (%) = 100.0 Exception 1 = 0 Stratum 2 Numerator 2 = 1 Denominator 2 = 1 Performance Rate 2 (%) = 100.0 Exception 2 = 0 Stratum 3 Numerator 3 = 1 Denominator 3 = 1 Performance Rate 3 (%) = 100.0
CMS134 v4.0.000	Clinical Process/Effectiveness	Diabetes: Urine Protein Screening	Numerator = 1 Denominator = 1 Performance Rate (%) = 100.0
CMS182 v5.2.000	Clinical Process/Effectiveness	Ischemic Vascular Disease (IVD): Complete Lipid Panel and LDL Control	Numerator 1 = 1 Denominator 1 = 1 Performance Rate 1 (%) = 100.0 Numerator 2 = 1 Denominator 2 = 1 Performance Rate 2 (%) = 100.0
CMS154 v4.0.000	Efficient Use of Healthcare Resources	Appropriate Treatment for Children with Upper Respiratory Infection (URI)	Numerator = 1 Denominator = 1 Performance Rate (%) = 100.0 Exclusion = 0
CMS157 v4.0.000	Patient and Family Engagement	Oncology: Medical and Radiation - Pain Intensity Quantified	Numerator = 1 Denominator = 1 Performance Rate (%) = 100.0
CMS179 v4.0.000	Patient Safety	ADE Prevention and Monitoring: Warfarin Time in Therapeutic Range	Population = 5 Observation (%) = 100.0
CMS2 v5.0.000	Population/Public Health	Preventive Care and Screening: Screening for Clinical Depression and Follow-Up Plan	Numerator = 1 Denominator = 1 Performance Rate (%) = 100.0 Exclusion = 0 Exception = 0
CMS153 v4.0.000	Population/Public Health	Chlamydia Screening for Women	Stratum 1 Numerator 1 = 1 Denominator 1 = 1 Performance Rate 1 (%) = 100.0 Exclusion 1 = 0 Stratum 2 Numerator 2 = 0 Denominator 2 = 0 Performance Rate 2 (%) = 100.0 Exclusion 2 = 0 Stratum 3 Numerator 3 = 1 Denominator 3 = 1 Performance Rate 3 (%) = 100.0 Exclusion 3 = 0

Previous Save & Continue

Proceed to the **Attestation Phase (Part 3 of 3)** screen on the next page.

Attestation Phase (Part 3 of 3)

Assignment of Payment and Confirmation of Payment Address

Part 3 of 3 of the Attestation Phase contains a question regarding assignment of your incentive payment and confirmation of the address to which the incentive payment will be sent.

Click Yes to confirm you are receiving this payment as the payee indicated or you are assigning this payment voluntarily to the payee and that you have a contractual relationship that allows the assigned employer or entity to bill for your services.

Click the Payment Address from the list below to be used for your Incentive Payment.

Click **Save & Continue** to review your selection, click **Previous** to go back, or click **Reset** to restore this panel to the starting point or last saved data.

Attestation Phase (Part 3 of 3)

Please answer the following questions so that we can determine your eligibility for the program.

When ready click the **Save & Continue** button to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point.

(*) Red asterisk indicates a required field.

* Based on the information received from the R&A, you requested to assign your incentive payment to the entity above (Payee TIN). Please confirm that you are receiving that payment as the payee indicated above or you are assigning this payment voluntarily to the payee above and that you have a contractual relationship that allows the assigned employer or entity to bill for your services.

Yes No

NOTE: If you wish to assign your payment and did not indicate this when you applied to the R&A then you must return to the R&A to correct this information.

Please select one payment address from the list provided below to be used for your Incentive Payment, if you are approved for payment. If you do not see a valid payment address, please contact State Medicaid Program.

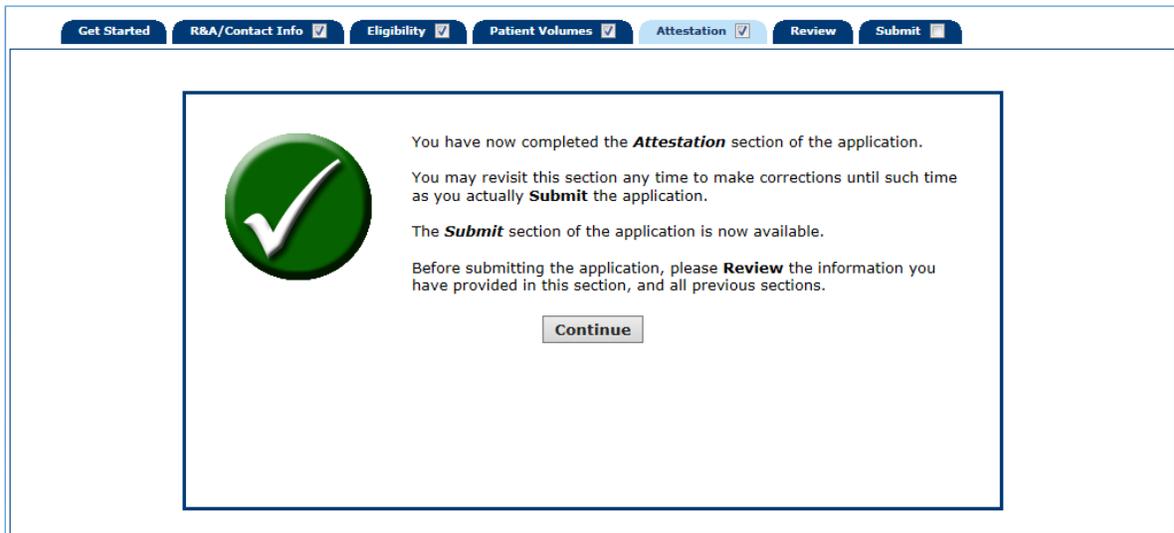
*Payment Address (Must Select One)	Provider ID	Location Name	Address	Additional Information
<input type="radio"/>	999999999, 9999999999	Dr. Medicaid Provider	2821 Coal Street Bedford, PA 15522-9422	Rel5.2

Previous Reset **Save & Continue**

This screen confirms you successfully completed the **Attestation** section.

Note the check box in the Attestation tab.

Click **Continue** to proceed to the **Review** tab.



Proceed to **EP User Guide Part 3** for guidance on the MAPIR screens for the following:

- Review Application
- Application Questionnaire
- File Uploads: Required and Recommended Documentation
- Application Submission
- Post Submission Activities
- Application Statuses
- Review and Adjustment

User Guides can be found at the Vermont Medicaid EHRIP website:

<http://healthdata.vermont.gov/ehrip/Apply>