

Meaningful Use Requirements

There are three components to Meaningful Use (MU):

- Use a certified EHR in a meaningful way
- Use a certified EHR to exchange health information electronically
- Use certified EHRs to submit clinical quality measures (CQMs) and other such measures selected by the Secretary of the U.S. Department of Health and Human Services

Reporting

- States can seek CMS prior approval to require four core MU objectives for their Medicaid providers
- MU reporting for year one is only 90 days of EHR use; each subsequent reporting year equals one full calendar year of reporting
- EPs must report on objectives and CQMs
- Some reporting is yes/no or numerator/denominator attestation for first year; and CQM submitted electronically in years two **Forward**
- For certain measures, 80 percent of patients must have certified EHR records
- EPs must report 15 core objectives
- EPs must submit data on five of 10 menu objectives and include one public health objective
- EPs must report six CQMs
 - Three from a core/alternate core set; and
 - Three from a menu set of 38

Reporting (cont.)

- Objectives and CQMs do not apply to each provider and will not count against the EP in determining incentive payments
- There are two types of percentage-based measures:
 - All patients seen during the EHR reporting period
 - All patients and actions taken for patients whose records are kept in a certified EHR

Helpful Links

CMS official website for EHR incentive programs:

<http://www.cms.gov/EHRIncentivePrograms>

Certification and certified EHRs:

<http://healthit.hhs.gov>

Meaningful use:

http://healthit.hhs.gov/portal/server.pt/community/healthit_hhs_gov_meaningful_use_-_providers/2998

