

## Final Meaningful Use Objectives for Program Year 2020



### Final Meaningful Use Objectives Stage 3

**All Eligible Professionals (EPs) must attest to all objectives using a 2015 Edition CEHRT for Stage 3**

| Stage 3 Objective                         | Stage 3 Objective Description   | Measure Amount  | Stage 3 Measure(s)   | Exclusion(s)   |
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| <b>Protect Patient Health Information</b> | Protect electronic protected health information (ePHI) created or maintained by the CEHRT through the implementation of appropriate technical, administrative, and physical safeguards. | Yes/No  | Conduct or review a security risk analysis in accordance with the requirements under 45 CFR 164.308(a)(1), including addressing the security (including encryption) of data created or maintained by CEHRT in accordance with requirements under 45 CFR 164.312(a)(2)(iv) and 45 CFR 164.306(d)(3), implement security updates as necessary, and correct identified security deficiencies as part of the provider's risk management process.   | None   |
| <b>Electronic Prescribing (eRx)</b>       | Generate and transmit permissible prescriptions electronically (eRx).   | More than 60%   | More than 60 percent of all permissible prescriptions written by the EP are queried for a drug formulary and transmitted electronically using CEHRT.   | Any EP who:<br>1)Writes fewer than 100 permissible prescriptions during the EHR reporting period; or<br>2)Does not have a pharmacy within their 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. |
| <b>Clinical Decision Support (CDS)</b>    | Implement clinical decision support (CDS) interventions focused on improving performance on high-priority health conditions.  | 5 CDS interventions related to at least 4 CQMs.<br>Yes/No | An EP must satisfy both measures for this objective through a combination of meeting the thresholds and exclusions:<br><br><u>Measure 1:</u> Implement five clinical decision support interventions related to four or more CQMs at a relevant point in patient care for the entire EHR reporting period. Absent four CQMs related to an EP's scope of practice or patient population, the clinical decision support interventions must be related to high-priority health conditions. | Measure 2: Any EP who writes fewer than 100 medication orders during the EHR reporting period.   |

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|   |   |                              | <p><u>Measure 2:</u> The EP has enabled and implemented the functionality for drug-drug and drug-allergy interaction checks for the entire EHR reporting period.</p>   |   |
| <p><b>Computerized Provider Order Entry (CPOE)</b></p>        | <p>Use computerized provider order entry (CPOE) for medication, laboratory, and diagnostic imaging orders directly entered by any licensed healthcare professional, credentialed medical assistant, or a medical staff member credentialed to and performing the equivalent duties of a credentialed medical assistant, who can enter orders into the medical record per state, local, and professional guidelines.</p> | <p>More than 60%/60%/60%</p> | <p>An EP, through a combination of meeting the thresholds and exclusions (or both), must satisfy all three measures for this objective:</p> <p><u>Measure 1:</u> More than 60 percent of medication orders created by the EP during the EHR reporting period are recorded using computerized provider order entry.</p> <p><u>Measure 2:</u> More than 60 percent of laboratory orders created by the EP during the EHR reporting period are recorded using computerized provider order entry.</p> <p><u>Measure 3:</u> More than 60 percent of diagnostic imaging orders created by the EP during the EHR reporting period are recorded using computerized provider order entry.</p> | <p><u>Measure 1:</u> Any EP who writes fewer than 100 medication orders during the EHR reporting period.</p> <p><u>Measure 2:</u> Any EP who writes fewer than 100 laboratory orders during the EHR reporting period.</p> <p><u>Measure 3:</u> Any EP who writes fewer than 100 diagnostic imaging orders during the EHR reporting period.</p>  |
| <p><b>Patient Electronic Access to Health Information</b></p> | <p>The EP provides patients (or patient-authorized representative) with timely electronic access to their health information and patient-specific education.</p>  | <p>More than 80%/35%</p>     | <p>EPs must satisfy both measures for this objective through a combination of meeting the thresholds and exclusions:</p> <p><u>Measure 1:</u> For more than 80 percent of all unique patients seen by the EP:<br/>1) The patient (or the patient-authorized representative) is provided timely access to view online, download, and transmit his or her health information; and</p>  | <p><u>Measure 1 and Measure 2:</u><br/>An EP may take an exclusion for either measure, or both, if either of the following apply:</p> <ul style="list-style-type: none"> <li>(i) An EP may exclude from the measure if they have no office visits during the EHR reporting period.</li> <li>(ii) Any EP that conducts 50 percent or more of his or her patient encounters in a county that does not have 50 percent or more of its</li> </ul> |

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|   |  |                              | <p>2) The provider ensures the patient’s health information is available for the patient (or patient-authorized representative) to access using any application of their choice that is configured to meet the technical specifications of the Application Programming Interface (API) in the provider’s CEHRT.</p> <p><u>Measure 2:</u> The EP must use clinically relevant information from CEHRT to identify patient-specific educational resources and provide electronic access to those materials to more than 35 percent of unique patients seen by the EP during the EHR reporting period.</p>   | <p>housing units with 4Mbps broadband availability according to the latest information available from the FCC on the first day of the EHR reporting period may exclude the measure.</p>   |
| <p><b>Coordination of Care through Patient Engagement</b></p> | <p>Use CEHRT to engage with patients or their authorized representatives about the patient’s care.</p> | <p>More than +5%/+5%/+5%</p> | <p>An EP must attest to all three measures and meet the threshold for two measures for this objective. If the EP meets the criteria for exclusion from two measures, they must meet the threshold for the one remaining measure. If they meet the criteria for exclusion from all three measures, they may be excluded from meeting this objective.</p> <p><u>Measure 1:</u> More than 5 percent of all unique patients (or their authorized representatives) seen by the EP actively engage with the EHR made accessible by the EP and either—</p> <ol style="list-style-type: none"> <li>1. View, download or transmit to a third party their health information; or</li> <li>2. Access their health information through an Application Programming Interface (API) that can be used by applications chosen by the patient and configured to the API in the EP’s CEHRT; or</li> <li>3. A combination of (1) and (2)</li> </ol> <p><u>Measure 2:</u> For more than 5 percent of all unique patients seen by the EP during the EHR reporting</p> | <p><u>Measure 1, 2 and 3 Exclusion:</u><br/>An EP may take an exclusion for any or all measures if either of the following apply: (i) An EP may exclude from the measure if they have no office visits during the EHR reporting period, or; (ii) Any EP that 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 may exclude the measure.</p> |

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|   |  |                              | <p>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 their authorized representative.</p> <p><u>Measure 3:</u> Patient generated health data or data from a non-clinical setting is incorporated into the CEHRT for more than 5 percent of all unique patients seen by the EP during the EHR reporting period</p>   |   |
| <p><b>Health Information Exchange</b></p> | <p>The EP provides a summary of care record when transitioning or referring their patient to another setting of care, receives or retrieves a summary of care record upon the receipt of a transition or referral or upon the first patient encounter with a new patient, and incorporates summary of care information from other providers into their EHR using the functions of CEHRT.</p> | <p>More than 50%/40%/80%</p> | <p>An EP must attest to all three measures and meet the threshold for two measures for this objective. If the EP meets the criteria for exclusion from two measures, they must meet the threshold for the one remaining measure. If they meet the criteria for exclusion from all three measures, they may be excluded from meeting this objective.</p> <p><u>Measure 1:</u> For more than 50 percent of transitions of care and referrals, the EP that transitions or refers their patient to another setting of care or provider of care: 1) Creates a summary of care record using CEHRT; and 2) Electronically exchanges the summary of care record</p> <p><u>Measure 2:</u> For more than 40 percent of transitions or referrals received and patient encounters in which the EP has never before encountered the patient, the EP incorporates into the patient’s EHR an electronic summary of care document.</p> <p><u>Measure 3:</u> For more than 80 percent of transitions or referrals received and patient encounters in which the EP has never before encountered the patient, the EP</p> | <p><u>Measure 1:</u> An EP may exclude from the measure if either or both of the following apply:</p> <p>1)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. 2)Any EP that 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 may exclude the measures.</p> <p><u>Measure 2:</u> An EP may exclude from the measure if either or both of the following apply:</p> <p>1)Any EP for whom the total of transitions or referrals received and patient encounters in which the EP has never before encountered the patient, is fewer than 100 during the EHR reporting period.</p> |

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|  |   |                                  | <p>performs a clinical information reconciliation. The EP must implement clinical information reconciliation for the following three clinical information sets:</p> <p>1) Medication. Review of the patient’s medication, including the name, dosage, frequency, and route of each medication.</p> <p>2) Medication allergy. Review of the patient’s known medication allergies.</p> <p>3) Current Problem list. Review of the patient’s current and active diagnoses.</p>   | <p>2) Any EP that 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 may exclude the measures.</p> <p><u>Measure 3:</u> Any EP for whom the total of transitions or referrals received and patient encounters in which the provider has never before encountered the patient, is fewer than 100 during the EHR reporting period is excluded from this measure.</p>  |
| <p><b>Public Health and Clinical Data Registry Reporting</b></p> | <p>The EP is in active engagement with a public health agency (PHA) or clinical data registry (CDR) to submit electronic public health data in a meaningful way using CEHRT, except where prohibited, and in accordance with applicable law and practice.</p> | <p>Yes/No for all 5 measures</p> | <p>An EP must satisfy two measures for this objective. If the EP cannot satisfy at least two measures, they may take exclusions from all measures they cannot meet.</p> <p><u>Measure 1</u> - Immunization Registry Reporting: The EP is in active engagement with a PHA to submit immunization data and receive immunization forecasts and histories from the public health immunization registry/immunization information system (IIS).</p> <p><u>Measure 2</u> – Syndromic Surveillance Reporting: The EP is in active engagement with a PHA to submit syndromic surveillance data.</p> <p><u>Measure 3</u> – Electronic Case Reporting: The EP is in active engagement with a PHA to submit case reporting of reportable conditions.</p> | <p><u>Measure 1:</u> An EP may take an exclusion if any of the following apply:</p> <p>1) Does not administer any immunizations to any of the populations for which data is collected by their jurisdiction’s immunization registry or immunization information system (IIS) during the EHR reporting period;</p> <p>2) Operates in a jurisdiction for which no immunization registry or IIS is capable of accepting the specific standards required to meet the CEHRT definition at the start of the EHR reporting period; or</p> <p>3) Operates in a jurisdiction where no immunization registry or IIS has declared readiness to receive immunization data as of 6 months prior to the start of the EHR reporting period.</p> |

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|  |  |  | <p><u>Measure 4</u> – Public Health Registry Reporting: The EP is in active engagement with a PHA to submit data to public health registries.</p> <p><u>Measure 5</u> – Clinical Data Registry Reporting (CDR): The EP is in active engagement to submit data to a CDR.</p> | <p><u>Measure 2</u>: An EP may take an exclusion if any of the following apply:</p> <ol style="list-style-type: none"> <li>1) Is not in a category of providers from which ambulatory syndromic surveillance data is collected by their jurisdiction’s syndromic surveillance system;</li> <li>2) Operates in a jurisdiction for which no public health agency (PHA) 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; or</li> <li>3) Operates in a jurisdiction where no public health agency (PHA) has declared readiness to receive syndromic surveillance data from EPs as of 6 months prior to the start of the EHR reporting period.</li> </ol> <p><u>Measure 3</u>: An EP may take an exclusion if any of the following apply:</p> <p>They do not diagnose or directly treat any reportable diseases for which data is collected by their jurisdiction’s reportable disease system during the EHR reporting period;</p> <ol style="list-style-type: none"> <li>(2) They practice in a jurisdiction for which no PHA is capable of receiving electronic case reporting data in the specific standards required to meet the CEHRT definition at the start of the EHR reporting period; or</li> <li>(3) They practice in a jurisdiction where no PHA has declared readiness to receive electronic case reporting data as of six months prior to the start of the EHR reporting period.</li> </ol> |
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|  |  |  |  | <p><u>Measure 4:</u> An EP may take an exclusion if any of the following apply:</p> <ol style="list-style-type: none"> <li>1) Does not diagnose or directly treat any disease or condition associated with a public health registry in their jurisdiction during the EHR reporting period;</li> <li>2) They practice in a jurisdiction for which no PHA can accept electronic registry transactions in the specific standards required to meet the CEHRT definition at the start of the EHR reporting period; or</li> <li>3) They practice in a jurisdiction where no PHA for which the EP is eligible to submit data has declared readiness to receive electronic registry transactions as of six months prior to the start of the EHR reporting period.</li> </ol> <p><u>Measure 5:</u> An EP may take an exclusion if any of the following apply:</p> <ol style="list-style-type: none"> <li>1) Does not diagnose or directly treat any disease or condition associated with a CDR in their jurisdiction during the EHR reporting period;</li> <li>2) They practice in a jurisdiction for which no CDR 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; or</li> <li>3) They practice in a jurisdiction where no CDR for which the EP is eligible to submit data has declared readiness to receive electronic registry transactions as of six</li> </ol> |
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|  |  |  |  | months prior to the start of the EHR reporting period. |
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