

## STAGE 1 MEANINGFUL USE CHECKLIST

Priority primary care providers (PPCPs) are physicians and health care professionals with prescriptive privileges. PPCPs can be physicians, physician assistants, nurse practitioners, and nurse midwives. Primary care encompasses family medicine, geriatrics, OB/GYN, general or internal medicine, adolescent medicine, and pediatrics.

### I. Must meet 15 of the core meaningful use (MU) objectives:

- Computerized physician order entry (CPOE) for >30% of unique patients with at least one medication in their medication list
- E-Prescribing (eRx) for > 40% of the permissible scripts for patients for whom the EHR was used
- Report ambulatory clinical quality measures to CMS/States on all your patients in the EHR
- Implement one clinical decision support rule
- Provide >50% patients seen with the EHR, an electronic copy of their health information within 3 business days, upon request
- Provide > 50% of patients seen with the EHR, a clinical summary within 3 business days
- Drug-drug and drug-allergy interaction checks turned on
- Record demographics as structured data on >50% of all patients seen: preferred language, gender, race, ethnicity, DOB
- Maintain an up-to-date problem list of current and active diagnoses on >80% of all patients seen at least one entry as structured data
- > 80% of all patients seen have at least one entry as structured data in the medication list
- > 80% of all patients seen have at least one entry as structured data in the medication allergy list
- > 50% of all patients age 2 and above seen with the EHR have vital signs (height, weight and blood pressure) recorded as structured data.
- Record >50% of patients smoking status for patients 13 years or older and seen with the EHR.
- Capability to exchange key clinical information among providers of care. Must perform at least one test of electronic data exchange of key clinical information.
- Ensure adequate privacy and security protections for personal health information. Conduct or review a security risk analysis and implement security updates as necessary and correct identified security deficiencies.

### II. Must meet any five of the Meaningful Use Menu Set Objectives listed below\*:

- Implement drug -formulary checks with access to at least one internal or external drug formulary for the entire reporting period.
- > 40% of clinical lab test results are stored as structured data for patients seen with the EHR
- Generate at least one report of patients by specific conditions to use for quality improvement, reduction of disparities, research or outreach.
- > 20% of all unique patients 65 years or older or 5 years old or younger seen with the EHR were sent an appropriate reminder per patient preference for preventive/follow up care
- > 10% of all patients seen are provided with timely electronic access (within four business days) to their health information.
- > 10% of all patients seen are provided patient-specific education resources through the use of certified EHR technology.
- Performs medication reconciliation on > 50% of transitions of care or relevant encounters for EHR patients.
- EP who transitions or refers the patient seen with the EHR to another setting of care will provide a summary of care record for > 50% of transitions and referrals.

- Perform at least one test of certified EHR technology's capability to submit electronic data to immunization registries/systems. \*
- Perform at least one test of certified EHR technology's capability to provide electronic syndromic surveillance data to public health agencies. \*

\*At least 1 public health objective must be selected

### III. Must track the 3 required core Clinical Quality Measures (CQMs) below or the alternatives below on patients:

#### Core Set:

- Adult weight screening and follow-up
- Hypertension: blood pressure management
- Tobacco use assessment and intervention

#### Alternative Set:

- Childhood Immunization Status
- Influenza Immunization for Patients  $\geq$  50 Years Old
- Weight Assessment and Counseling for Children and Adolescents

### IV. Please identify at least 3 additional CQMs from the set of 38 CQMs that you commit to track on your patients

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| <ul style="list-style-type: none"> <li><input type="checkbox"/> Anti-depressant medication management:             <ul style="list-style-type: none"> <li>(a) Effective Acute Phase Treatment</li> <li>(b) Effective Continuation Phase Treatment</li> </ul> </li> <li><input type="checkbox"/> Appropriate Testing for Children with Pharyngitis</li> <li><input type="checkbox"/> Asthma Assessment</li> <li><input type="checkbox"/> Asthma Pharmacologic Therapy</li> <li><input type="checkbox"/> Breast Cancer Screening</li> <li><input type="checkbox"/> Cervical Cancer Screening</li> <li><input type="checkbox"/> Chlamydia Screening for Women</li> <li><input type="checkbox"/> Controlling High Blood Pressure</li> <li><input type="checkbox"/> Colorectal Cancer Screening</li> <li><input type="checkbox"/> Coronary Artery Disease (CAD): Beta-Blocker Therapy for CAD Patients w/ Prior Myocardial Infarction (MI)</li> <li><input type="checkbox"/> Coronary Artery Disease (CAD): Drug Therapy for Lowering LDL-Cholesterol</li> <li><input type="checkbox"/> Coronary Artery Disease (CAD): Oral Anti-platelet Therapy Prescribed for Patients with CAD</li> <li><input type="checkbox"/> Diabetes: Blood Pressure Management</li> <li><input type="checkbox"/> Diabetes: Eye Exam</li> <li><input type="checkbox"/> Diabetes: Foot Exam</li> <li><input type="checkbox"/> Diabetes: Hemoglobin A1c Poor Control (&lt;8)</li> <li><input type="checkbox"/> Diabetes: Hemoglobin A1c Poor Control</li> <li><input type="checkbox"/> Diabetes: Low Density Lipoprotein (LDL) Management and Control</li> <li><input type="checkbox"/> Diabetes: Urine Screening</li> <li><input type="checkbox"/> Diabetic Retinopathy: Communication with the Physician Managing Ongoing Diabetes Care</li> <li><input type="checkbox"/> Diabetic Retinopathy: Documentation of Presence or Absence of Macular Edema and Level of Severity of Retinopathy</li> <li><input type="checkbox"/> Heart Failure: ACE Inhibitor or ARB Therapy for Left Ventricular Systolic Dysfunction (LVSD)</li> </ul> | <ul style="list-style-type: none"> <li><input type="checkbox"/> Heart Failure (HF): Beta-Blocker Therapy for Left Ventricular Systolic Dysfunction (LVSD)</li> <li><input type="checkbox"/> Pneumonia Vaccination Status for Older Adults</li> <li><input type="checkbox"/> Heart Failure (HF): Warfarin Therapy Patients with Atrial Fibrillation</li> <li><input type="checkbox"/> Initiation and Engagement of Alcohol and Other Drug Dependence Treatment:             <ul style="list-style-type: none"> <li>(a) Initiation</li> <li>(b) Engagement</li> </ul> </li> <li><input type="checkbox"/> Ischemic Vascular Disease (IVD): Blood Pressure Management</li> <li><input type="checkbox"/> Ischemic Vascular Disease (IVD): Complete Lipid Panel and LDL Control</li> <li><input type="checkbox"/> Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antithrombotic</li> <li><input type="checkbox"/> Low Back Pain: Use of Imaging Studies</li> <li><input type="checkbox"/> Oncology Breast Cancer: Hormonal Therapy for Stage IC-III C Estrogen Receptor/Progesterone Receptor (ER/PR) Positive Breast Cancer</li> <li><input type="checkbox"/> Oncology Colon Cancer: Chemotherapy for Stage III Colon Cancer Patients</li> <li><input type="checkbox"/> Prenatal Care: Anti-D Immune Globulin</li> <li><input type="checkbox"/> Prenatal Care: Screening for Human Immunodeficiency Virus (HIV)</li> <li><input type="checkbox"/> Primary Open Angle Glaucoma (POAG): Optic Nerve Evaluation</li> <li><input type="checkbox"/> Prostate Cancer: Avoidance of Overuse of Bone Scan for Staging Low Risk Prostate Cancer Patients</li> <li><input type="checkbox"/> Smoking and Tobacco Use Cessation, Medical assistance: Advising Smokers and Tobacco Users to Quit, Discussing Cessation Medications and Strategies</li> <li><input type="checkbox"/> Use of Appropriate Medications for Asthma</li> </ul> |
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