

Final Meaningful Use Objectives for Program Year 2018



Final Meaningful Use Objectives Stage 3

All Eligible Hospitals (EH) and Critical Access Hospitals (CAH) must attest to all objectives for Stage 3 using a 2015 Edition CEHRT. If it is available, EHs and CAHs may also attest using CEHRT combination of 2014 and 2015 edition.

Stage 3 Objective	Stage 3 Objective Description	Measure Amount	Stage 3 Measure(s)	Exclusion(s)	2017 Alternate Objective, Measure or Exclusion ²
Protect Patient Health Information	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	None
Electronic Prescribing	Generate and transmit permissible discharge prescriptions electronically (eRx).	More than 25%	More than 25 percent of hospital discharge medication orders for permissible prescriptions (for new and changed prescriptions) are queried for a drug formulary and transmitted electronically using CEHRT.	Any eligible hospital or CAH that does not have an internal pharmacy that can accept electronic prescriptions and there are no pharmacies that accept electronic prescriptions within 10 miles at the start of their EHR reporting period.	None
Clinical Decision Support (CDS)	Implement clinical decision support (CDS) interventions focused on improving performance on high-priority health conditions.	5 CDS interventions related to at least 4 CQMs/ Yes/No	In order for eligible hospitals and CAHs to meet the objective they must satisfy both of the following measures:	None	None

Final Meaningful Use Objectives for Program Year 2018



			<p><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 eligible hospital or CAH's scope of practice or patient population, the clinical decision support interventions must be related to high-priority health conditions.</p> <p><u>Measure 2:</u> The eligible hospital or CAH has enabled and implemented the functionality for drug-drug and drug-allergy interaction checks for the entire EHR reporting period.</p>		
<p>Computerized Provider Order Entry (CPOE)</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</p>	<p>More than 60%/60%/60%</p>	<p>An eligible hospital/CAH must meet the thresholds for all three measures:</p> <p><u>Measure 1:</u> More than 60 percent of medication orders created by the authorized providers of the eligible hospital or CAH inpatient or emergency department (POS 21 or 23) 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 authorized providers of the eligible hospital or CAH inpatient or emergency department (POS 21</p>	<p>None</p>	<p>None</p>

Final Meaningful Use Objectives for Program Year 2018



	record per state, local, and professional guidelines.		or 23) during the EHR reporting period are recorded using computerized provider order entry. <u>Measure 3:</u> More than 60 percent of diagnostic imaging orders created by the authorized providers of the eligible hospital or CAH inpatient or emergency department (POS 21 or 23) during the EHR reporting period are recorded using computerized provider order entry.		
Patient Electronic Access	The eligible hospital or CAH provides patients (or patient authorized representative) with timely electronic access to their health information and patient-specific education.	More than 80%/35%	Eligible Hospitals and CAHs must satisfy both measures in order to meet the objective: <u>Measure 1:</u> For more than 80 percent of all unique patients discharged from the eligible hospital or CAH inpatient or emergency department (POS 21 or 23): i) The patient (or the patient authorized representative) is provided timely access to view online, download, and transmit his or her health information; and ii) 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 API in the provider’s CEHRT.	<u>Measures 1 and 2:</u> Any eligible hospital or CAH will be excluded from the measure if it is located in a county that does not have 50 percent or more of their housing units with 4Mbps broadband availability according to the latest information available from the FCC at the start of the EHR reporting period.	None

Final Meaningful Use Objectives for Program Year 2018



			<p><u>Measure 2:</u> The eligible hospital or CAH 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 or discharged from the eligible hospital or CAH inpatient or emergency department (POS 21 or 23) during the EHR reporting period.</p>		
<p>Coordination of Care through Patient Engagement</p>	<p>Use CEHRT to engage with patients or their authorized representatives about the patient’s care.</p>	<p>Must meet at least two measures to meet the objective.</p> <p>More than +5%/+5%</p>	<p>Providers must attest to all three measures and must meet the thresholds for at least two measures to meet the objective:</p> <p><u>Measure 1:</u> For an EHR reporting period in 2018, more than 5 percent of all unique patients (or their authorized representatives) discharged from the eligible hospital or CAH inpatient or emergency department (POS 21 or 23) actively engage with the electronic health record made accessible by the provider and either—</p> <ol style="list-style-type: none"> 1. View, download or transmit (VDT) to a third party their health information; or 2. Access their health information through the use of an API that can be used by applications chosen by 	<p><u>Measure 1, 2 and 3 Exclusion:</u> Any eligible hospital or CAH will be excluded from the measure if it is located in a county that does not have 50 percent or more of their housing units with 4Mbps broadband availability according to the latest information available from the FCC at the start of the EHR reporting period.</p>	<p>None</p>

Final Meaningful Use Objectives for Program Year 2018



		<p>the patient and configured to the API in the provider's CEHRT; or 3. A combination of (1) and (2) Threshold for 2019 and Subsequent Years: The resulting percentage must be more than 10 percent.</p> <p><u>Measure 2:</u> For an EHR reporting period in 2018, more than 5 percent of all unique patients discharged from the eligible hospital or CAH inpatient or emergency department (POS 21 or 23) 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 their authorized representative.</p> <p><u>Measure 3:</u> Patient generated health data or data from a nonclinical setting is incorporated into the CEHRT for more than 5 percent of all unique patients discharged from the eligible hospital or CAH inpatient or emergency department (POS 21 or 23) during the EHR reporting period.</p>		
--	--	--	--	--

Final Meaningful Use Objectives for Program Year 2018



<p>Health Information Exchange</p>	<p>The eligible hospital or CAH 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>Must meet the thresholds for at least two measures to meet the objective. More than 50%/40%/80%</p>	<p>Providers must attest to all three measures and must meet the thresholds for at least two measures to meet the objective.</p> <p><u>Measure 1:</u> For more than 50 percent of transitions of care and referrals, the eligible hospital or CAH 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 provider has never before encountered the patient, the eligible hospital or CAH 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 provider has never before encountered the patient, the eligible hospital or CAH performs a clinical information reconciliation. The provider must implement clinical information</p>	<p><u>Measure 1:</u> Any eligible hospital or CAH will be excluded from the measure if it is located in a county that does not have 50 percent or more of their housing units with 4Mbps broadband availability according to the latest information available from the FCC at the start of the EHR reporting period.</p> <p><u>Measure 2:</u> A provider may exclude from the measure if any of the following apply: 1) Any eligible hospital or CAH 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. 2) Any eligible hospital or CAH that is located in a county that does not have 50 percent or more of their housing units with 4Mbps broadband availability according to the latest information available from the FCC at the start of the EHR reporting period.</p> <p><u>Measure 3:</u> Any eligible hospital or CAH 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</p>	<p>None</p>
---	--	--	--	--	-------------

Final Meaningful Use Objectives for Program Year 2018



			<p>reconciliation for the following three clinical information sets:</p> <ol style="list-style-type: none"> 1) Medication. Review of the patient’s medication, including the name, dosage, frequency, and route of each medication. 2) Medication allergy. Review of the patient’s known medication allergies. 3) Current Problem list. Review of the patient’s current and active diagnoses. 	EHR reporting period is excluded from this measure.	
Public Health and Clinical Data Registry Reporting	The eligible hospital or CAH 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 certified EHR technology, except where prohibited, and in accordance with applicable law and practice.	Yes/No for all 6 measures	<p><u>Measure 1</u>– Immunization Registry Reporting: The eligible hospital or CAH 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 eligible hospital or CAH is in active engagement with a PHA to submit syndromic surveillance data from an urgent care setting.</p> <p><u>Measure 3</u> – Electronic Case Reporting: The eligible hospital or CAH is in active engagement with a PHA to submit case reporting of reportable conditions.</p>	<p><u>Measure 1</u>: Any eligible hospital or CAH meeting one or more of the following criteria may be excluded from the immunization registry reporting measure if the eligible hospital or CAH—</p> <ol style="list-style-type: none"> 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 during the EHR reporting period; 2) 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; or 3) Operates in a jurisdiction where no immunization registry or 	None

Final Meaningful Use Objectives for Program Year 2018



			<p><u>Measure 4</u> – Public Health Registry Reporting: The eligible hospital or CAH is in active engagement with a PHA to submit data to public health registries.</p> <p><u>Measure 5</u> – Clinical Data Registry Reporting: The eligible hospital or CAH is in active engagement to submit data to a CDR.</p> <p><u>Measure 6</u> – Electronic Reportable Laboratory Result Reporting: The eligible hospital or CAH is in active engagement with a PHA to submit electronic reportable laboratory (ELR) results.</p>	<p>immunization information system (IIS) has declared readiness to receive immunization data as of 6 months prior to the start of the EHR reporting period.</p> <p><u>Measure 2</u>: Any eligible hospital or CAH meeting one or more of the following criteria may be excluded from the syndromic surveillance reporting measure if the eligible hospital or CAH—</p> <ol style="list-style-type: none"> 1) Does not have an emergency or urgent care department; 2) Operates in a jurisdiction for which no public health agency is capable of receiving electronic syndromic surveillance data from eligible hospitals or CAHs in the specific standards required to meet the CEHRT definition at the start of the EHR reporting period; or 3) Operates in a jurisdiction where no public health agency has declared readiness to receive syndromic surveillance data from eligible hospitals or CAHs as of 6 months prior to the start of the EHR reporting period. <p><u>Measure 3</u>: Any eligible hospital or CAH meeting one or more of the following criteria may be excluded from the case reporting measure if the eligible hospital or CAH—</p>	
--	--	--	--	---	--

Final Meaningful Use Objectives for Program Year 2018



				<p>1) Does not treat or diagnose any reportable diseases for which data is collected by their jurisdiction’s reportable disease system during the EHR reporting period; 2) Operates in a jurisdiction for which no public health agency 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 3) Operates in a jurisdiction where no public health agency has declared readiness to receive electronic case reporting data as of 6 months prior to the start of the EHR reporting period.</p> <p><u>Measure 4:</u> Any eligible hospital or CAH meeting at least one of the following criteria may be excluded from the public health registry reporting measure if the eligible hospital or CAH—</p> <p>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; 2) Operates in a jurisdiction for which no public health agency is capable of accepting electronic registry transactions in the specific standards required to meet the CEHRT</p>	
--	--	--	--	---	--

Final Meaningful Use Objectives for Program Year 2018



				<p>definition at the start of the EHR reporting period; or</p> <p>3) Operates in a jurisdiction where no public health registry for which the eligible hospital or CAH is eligible has declared readiness to receive electronic registry transactions as of 6 months prior to the start of the EHR reporting period.</p> <p><u>Measure 5:</u> Any eligible hospital or CAH meeting at least one of the following criteria may be excluded from the clinical data registry reporting measure if the eligible hospital or CAH—</p> <p>1) Does not diagnose or directly treat any disease or condition associated with a clinical data registry in their jurisdiction during the EHR reporting period;</p> <p>2) Operates 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</p> <p>3) Operates in a jurisdiction where no clinical data registry for which the eligible hospital or CAH is eligible has declared readiness to receive electronic registry transactions as of 6 months prior to the start of the EHR reporting period.</p>	
--	--	--	--	---	--

Final Meaningful Use Objectives for Program Year 2018



				<p><u>Measure 6:</u> Any eligible hospital or CAH meeting one or more of the following criteria may be excluded from the electronic reportable laboratory result reporting measure if the eligible hospital or CAH—</p> <ol style="list-style-type: none"> 1) Does not perform or order laboratory tests that are reportable in their jurisdiction during the EHR reporting period; 2) Operates in a jurisdiction for which no public health agency is capable of accepting the specific ELR standards required to meet the CEHRT definition at the start of the EHR reporting period; or 3) Operates in a jurisdiction where no public health agency has declared readiness to receive electronic reportable laboratory results from an eligible hospital or CAH as of 6 months prior to the start of the EHR reporting period. 	
--	--	--	--	---	--