## Eligible Professional Attestation Worksheet for Modified Stage 2 of the Medicare Electronic Health Record (EHR) Incentive Program in 2015

The Eligible Professional (EP) Attestation Worksheet is for EPs in the EHR Incentive Program in 2015, and allows them to log their meaningful use measures on this page to use as a reference when attesting for the Medicare EHR Incentive Program in the CMS system.

For each objective with a percentage-based measure, certified EHR technology must include the capability to electronically record the numerator and denominator and generate a report including the numerator, denominator, and resulting percentage for these measures. However, eligible professionals may use additional data to calculate numerators and denominators and to generate reports on all measures for the objectives.

*Note*: There are several alternate exclusions and specifications for certain measures in 2015, which some Stage 1 providers may not otherwise be able to meet because they require the implementation of certified EHR technology beyond the functions required for Stage 1. In order to provide complete and accurate information for certain measures, eligible professionals may also have to include information from paper-based patient records or from records maintained in uncertified EHR technology.

Eligible professionals can enter their meaningful use criteria in the blue boxes. Each measure's objective is included to help eligible professionals enter the correct criteria. Certain measures do not require a numerator and denominator, but rather a yes/no answer, and are marked as such. Measures with exclusions have the exclusion description listed in the measure information section.

Eligible professionals must report on the following:

- 1. **10 objectives**, which includes one consolidated public health reporting objective with measure options requiring EPs scheduled to be in Stage 1 to meet at least one public health measure, and EPs scheduled to be in Stage 2 to meet two public health measures.
- 2. **9 out of 64 of the clinical quality measures (CQMs)** covering at least 3 National Quality Strategy domains

EHR Reporting Period: For 2015, the EHR Reporting period is any continuous 90-day period within the calendar year (January 1, 2015 through December 31, 2015). For eligible professionals, the action may occur at any point during that time as long as it is no earlier than January 1, 2015 and no later than the date of attestation for their 2015 EHR reporting period.

## Meaningful Use Objectives and Measures

Must fill out for each of the 10 objectives including 1 public health measure for EPs previously scheduled to be in Stage 1 in 2015 and 2 public health measures for EPs previously scheduled to be in Stage 2 in 2015.

#	Measure Information	Measure Values
1	Objective: Protect electronic health information created or maintained by the 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 in CEHRT 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.  Note: This measure only requires a yes/no answer.	
	Numerator: N/A	VEC NO
	Denominator: N/A	YES NO
2	Objective: Use clinical decision support to improve performance on high-priority health conditions.  Note: EPs must satisfy both of the following measures in order to meet the objective.  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.  Measure 2: The EP has enabled and implemented the functionality for drug-drug and drug-allergy interaction checks for the entire EHR reporting period.  Exclusion for Measure 2: For the second measure, any EP who writes fewer than 100 medication orders during the EHR reporting period.  For an EHR reporting period in 2015 only, an EP who is scheduled to participate in Stage 1 in 2015 may satisfy the following in place of Measure 1:  Alternate Objective: Implement one clinical decision support rule relevant to specialty or high clinical priority, or high priority hospital condition, along with the ability to track compliance with that rule.	
	Alternate Measure 1: Implement one clinical decision support rule.  Note: This measure only requires a yes/no answer.	
	Does the exclusion apply to you?	Yes No
	Numerator Measure 1: N/A  Denominator Measure 1: N/A	YES NO
	Numerator Measure 2: N/A	YES NO
	Denominator Measure 2: N/A	

#	Measure Information	Measure Values
3	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.  Note: An EP, through a combination of meeting the thresholds and exclusions (or both), must satisfy all three measures for this objective.  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.  Exclusion for Measure 1: Any EP who writes fewer than 100 medication orders during the EHR reporting period.  Alternate Measure 1: For Stage 1 providers in 2015, more than 30 percent of all unique patients.	
	with at least one medication in their medication list seen by the EP diperiod have at least one medication order entered using CPOE; or medication orders created by the EP during the EHR reporting period computerized provider order entry.	ore than 30 percent of
Measure 2: More than 30 percent of laboratory orders created by the EP during the EH reporting period are recorded using computerized provider order entry.  Exclusion for Measure 2: Any EP who writes fewer than 100 laboratory orders during th reporting period.		
	Alternate Exclusion Measure 2: Providers scheduled to be in Stage 1 i exclusion for measure 2 (laboratory orders) of the Stage 2 CPOE obje period in 2015.	ctive for an EHR reporting
	Measure 3: More than 30 percent of radiology orders created by the reporting period are recorded using computerized provider order enterclusion for Measure 3: Any EP who writes fewer than 100 radiology reporting period.	try. orders during the EHR
	Alternative Exclusion Measure 3: Providers scheduled to be in Stage 1 exclusion for measure 3 (radiology orders) of the Stage 2 CPOE object period in 2015.	•
	Does the exclusion for Measure 1 apply to you?	Yes No No
	Does the exclusion for Measure 2 apply to you?	Yes No No
	Does the exclusion for Measure 3 apply to you?	Yes No
	Does the alternate exclusion for Measure 2 apply to you?	Yes No
	Does the alternate exclusion for Measure 3 apply to you?	Yes No No
	Numerator Measure 1/Alternate Measure 1 (Medication): Number of orders in the denominator recorded using CPOE.	
	<b>Denominator Measure 1 (Medication):</b> Number of medication orders created by the EP during the EHR reporting period.	
	Numerator 2 (Laboratory): Number of orders in the denominator recorded using CPOE.	
	<b>Denominator 2 (Laboratory):</b> Number of laboratory orders created by the EP during the EHR reporting period.	
	Numerator 3 (Radiology): Number of orders in the denominator	

#	Measure Information	Measure Values	
	recorded using CPOE.		
	<b>Denominator 3 (Radiology):</b> Number of radiology orders created by the EP during the EHR reporting period.		
4	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.  Alternate Measure: For Stage 1 providers in 2015, more than 40 percent of all permissible prescriptions written by the EP are transmitted electronically using CEHRT.  Exclusion 1: Any EP who writes fewer than 100 permissible prescriptions during the EHR reporting period; or  Exclusion 2: Any EP who 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/her EHR reporting period.		
	Does exclusion 1 apply to you?	Yes No No	
	Does exclusion 2 apply to you?	Yes No	
	Numerator: The number of prescriptions in the denominator generated, queried for a drug formulary, and transmitted electronically using CEHRT.		
	<b>Denominator:</b> Number of permissible prescriptions written during the EHR reporting period for drugs requiring a prescription in order to be dispensed.		
Objective: The EP who transitions their patient to another setting of care refers their patient to another provider of care provides a summary care refers their patient to another setting of care or referral.  Measure 1: The EP that transitions or refers their patient to another setting of care must - (1) use CEHRT to create a summary of care record; and (2) such summary to a receiving provider for more than 10 percent of transition referrals.  Exclusion: Any EP who transfers a patient to another setting or refers a paraprovider less than 100 times during the EHR reporting period.  Alternate Exclusion: Provider may claim an exclusion for the Stage 2 measurelectronic transmission of a summary of care document if for an EHR reporting were scheduled to demonstrate Stage 1, which does not have an equal to the stage in the summary of care document if for an EHR reporting were scheduled to demonstrate Stage 1, which does not have an equal transition of the stage in the stage in the setting of the stage in the stage in the setting of the		setting of care or provider d (2) electronically transmit ansitions of care and a patient to another measure that requires the reporting period in 2015,	
	Does the exclusion apply to you?	Yes No	
	Does the alternate exclusion apply to you?	Yes No	
	<b>Numerator Measure 1:</b> The number of transitions of care and referrals in the denominator where a summary of care record was created using CEHRT and exchanged electronically.		
	<b>Denominator Measure 1:</b> Number of transitions of care and referrals during the EHR reporting period for which the EP was the		

#	Measure Information	Measure Valu	ies
	transferring or referring provider.		
6	Objective: Use clinically relevant information from CEHRT 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.  Alternate Exclusion: Provider may claim an exclusion for the measure of the Stage 2 Patient Specific Education objective if for an EHR reporting period in 2015 they were scheduled to demonstrate Stage 1 but did not intend to select the Stage 1 Patient Specific Education menu objective.		
	Does the exclusion apply to you?	Yes 🔾	No O
	Does the alternate exclusion apply to you?	Yes 🔾	No O
	<b>Numerator:</b> Number of patients in the denominator who were provided patient-specific education resources identified by the CEHRT.		
	<b>Denominator:</b> Number of unique patients with office visits seen by the EP during the EHR reporting period.		
7	Objective: The EP who receives a patient from another setting of care or provider of care or believes an encounter is relevant performs medication reconciliation.  Measure: The EP 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.  Alternate Exclusion: Provider may claim an exclusion for the measure of the Stage 2 Medication Reconciliation objective if for an EHR reporting period in 2015 they were scheduled to demonstrate Stage 1 but did not intend to select the Stage 1 Medication Reconciliation menu objective.		ansitions of R reporting Medication to
	Does the exclusion apply to you?	Yes 🔾	No O
	Does the alternate exclusion apply to you?	Yes 🔾	No O
	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.		
8	Objective: Provide patients the ability to view online, download, and information within 4 business days of the information being available Note: EPs must satisfy both measures in order to meet the objective.  Measure 1: More than 50 percent of all unique patients seen by the E	e to the EP.	

#	Measure Information	Measure Values
	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.  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.  Exclusion 1 (for Measure1): Any EP who neither orders nor creates any of the information listed for inclusion as part of the measures except for "Patient Name" and "Provider's name and office contact information."  Exclusion 2 (for Measure 2): Any EP who neither orders nor creates any of the information listed for inclusion as part of the measures except for "Patient Name" and "Provider's name and office contact information;" or 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.  Alternate Exclusion: Provider may claim an exclusion for the second measure if for an EHR reporting period in 2015 they were scheduled to demonstrate Stage 1, which does not have an	
	equivalent measure.  Does exclusion 1 apply to you?	Yes O No O
	Does exclusion 2 apply to you?	Yes No
	Does the alternate exclusion apply to you?	Yes No
	<b>Numerator Measure 1:</b> The number of patients in the denominator who have access to view online, download and transmit their health information within 4 business days after the information is available to the EP.	
	<b>Denominator Measure 1:</b> Number of unique patients seen by the EP during the EHR reporting period.	
	Numerator Measure 2: The number of patients in the denominator (or patient-authorized representative) who view, download, or transmit to a third party their health information.	
	<b>Denominator Measure 2:</b> Number of unique patients seen by the EP during the EHR reporting period.	
9	Objective: Use secure electronic messaging to communicate with patients on relevant health information.  Measure: For an EHR reporting period in 2015, the capability for patients to send and receive a secure electronic message with the EP was fully enabled during the EHR reporting period.  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.  Alternate Exclusion: An EP may claim an exclusion for the measure if for an EHR reporting period in 2015 they were scheduled to demonstrate Stage 1, which does not have an equivalent measure.	

#	Measure Information	Measure Val	ues
	Note: This measure only requires a yes/no answer.		
	Does the exclusion apply to you?	Yes 🔾	No 🔾
	Does the alternate exclusion apply to you?	Yes 🔾	No O
	Numerator: N/A	YES	NO
	Denominator: N/A		
10	YES NO		

#	Measure Information	Measure Values
	has declared readiness to receive electronic registry transactions at t reporting period.	he beginning of the EHR
	Alternate Exclusions  EPs scheduled to be in Stage 1: Must attest to at least 1 measure from Reporting Objective Measures 1-3.	n the Public Health
	<ul> <li>May claim an Alternate Exclusion for Measure 1, Measure 2, or N</li> <li>An Alternate Exclusion may only be claimed for up to two measures either attest to or meet the exclusion requirements for described in 495.22 (e)(10)(i)(C).</li> <li>EPs scheduled to be in Stage 2: Must attest to at least 2 measures fro Reporting Objective Measures 1-3.</li> </ul>	easures, then the provider or the remaining measure m the Public Health
	• May claim an alternate exclusion for Measure 2 or Measure Measure or Specialized Registry Reporting Measure) or both.	3 (Syndromic Surveillance
	Does exclusion 1 apply to you?	Yes No
	Does exclusion 2 apply to you?	Yes No
	Does exclusion 3 apply to you?	Yes No
	Does exclusion 4 apply to you?	Yes No
	Does exclusion 5 apply to you?	Yes No
	Does exclusion 6 apply to you?	Yes No
	Does exclusion 7 apply to you?	Yes No
	Does exclusion 8 apply to you?	Yes No
	Does exclusion 9 apply to you?	Yes No
	Does an alternate exclusion apply to you?	Yes No
	Does a second alternate exclusion apply to you?	Yes No
	Measure 1 – Immunization Registry Reporting	YES NO
	Measure 2 - Syndromic Surveillance Reporting	YES NO
	Measure 3 – Specialized Registry Reporting (1)	YES NO
	For providers who choose to report to more than one Specialized Regisapply to Stage 1 providers in 2015 who only need to meet one measure	· ·
	Measure 3 – Specialized Registry Reporting (2)	YES NO