

Overview of the CMS Proposed Modifications for 2015-2017 and Stage 3
Key Medicaid Eligible Provider Changes
See objective and measure details on the next page

	Stage 1 2015 Only	Stage 1: 2016-2017 & Stage 2: 2015-2017	Stage 1, 2 & 3 2018 and beyond
Reporting Period	All Eligible Providers will attest to a continuous 90-day reporting period in 2015	All Eligible Providers will attest to a continuous 90-day reporting period in 2015 Medicaid EP's in their first year (after AIU) will attest to a continuous 90-day reporting period. All EP's beyond their first year will attest to a full year.	Medicaid EP's in their first year (after AIU) will attest to a continuous 90-day reporting period. All EP's beyond their first year will attest to a full year.
Number of Objectives	10 Required Objectives* (*Eligible Providers are not required to attest to the 4 measures that were not part of Stage 1 or menu measures for the 2015 reporting period.) Select 1 out of 5 new consolidated public health	10 Required Objectives Select 2 out of 5 new consolidated public health	8 Required Objectives Select 2 out of 3 Coordination of Care Select 3 out of 5 new consolidated public health
Required Objectives	Protect Electronic Health Information Electronic Prescribing Clinical Decision Support CPOE Patient Electronic Access Patient Engagement HIE/Summary of Care Public Health Patient Specific Education Medication Reconciliation	Protect Electronic Health Information Electronic Prescribing Clinical Decision Support CPOE Patient Electronic Access Patient Engagement HIE/Summary of Care Public Health Patient Specific Education Medication Reconciliation	Protect Electronic Health Information Electronic Prescribing Clinical Decision Support CPOE Patient Electronic Access Patient Engagement HIE/Summary of Care Public Health
Redundant or Topped Out Objectives and Measures that were removed as separate measures *Most are required as part of the patient portal but are not separate measures.	Record Active Problem List Record Medication Allergies Record Current Medications Record Demographics Record Vital Signs Record Smoking Status Clinical Summaries Structured Lab Results Patient Lists Patient Reminders Summary of Care print/fax	Record Active Problem List Record Medication Allergies Record Current Medications Record Demographics Record Vital Signs Record Smoking Status Clinical Summaries Structured Lab Results Patient Lists Patient Reminders Summary of Care print/fax Summary of Care Test Exchange Electronic Notes Imaging Results Family Health History	Record Active Problem List Record Medication Allergies Record Current Medications Record Demographics Record Vital Signs Record Smoking Status Clinical Summaries Structured Lab Results Patient Lists Patient Reminders Summary of Care print/fax Summary of Care Test Exchange Electronic Notes Imaging Results Family Health History Patient Specific Education Medication Reconciliation
Patient Engagement		Removed the Stage 5% threshold for patients Viewing, Downloading or Transmitting data from the portal. Instead require that at least 1 patient seen by the provider during the EHR reporting period views, downloads, or transmits their health information to a third party.	Increased the threshold for patients viewing, downloading, or transmitting their health information to more than 25%.
Summary of Care for referrals		Kept the >10% of referrals to be sent electronically.	Increased the threshold for sending referrals electronically to >50%.
Public Health Reporting	Added options to types of public health reporting. Public Health and Clinical Data registries can be used up to 3 times each. Select 1 out of 5	Added options to types of public health reporting. Public Health and Clinical Data registries can be used up to 3 times each. Select 2 out of 5	Added options to types of public health reporting. Public Health and Clinical Data registries can be used up to 3 times each. Select 3 out of 5
Clinical Quality Measures	Medicaid Providers will follow State Requirements for CQM attestations	Medicaid Providers will follow State Requirements for CQM attestations	Medicaid Providers will follow State Requirements for CQM attestations. Vendors will update the clinical quality measures (CQM) to the 2016 version. This is separate from the EHR Certification edition. Number of CQMs required for submission may increase
CEHRT Edition	2014 or 2015 Edition	2014 or 2015 Edition	2015 Edition

Stage 1, 2 and 3 CMS Proposed Objectives - NPRM Comparison

	Stage 1 Objectives 2015 Only	Modified Objectives Stage 1: 2016-2017 & Stage 2: 2015-2017	Stage 3 Objectives Stage 1, 2 & 3 2018+ (Optional in 2017)
	Report on 10 Objectives with some items not required	Report on 10 Objectives	Report on 8 Objectives
Objective	Measure	Measure	Measure
Protect ePHI	Conduct/review security risk assessment and address security including encryption	Conduct/review security risk assessment and address security including encryption	Conduct/review security risk assessment and address security including encryption
Electronic Prescribing	>40% of permissible prescriptions are transmitted electronically.	>50% of permissible prescriptions are queried for a drug formulary and transmitted electronically.	>80% of permissible prescriptions are queried for a drug formulary and transmitted electronically.
Clinical Decision Support	Implement 1 CDSS rule	Implement 5 CDSS rules associated to 4 or more CQMs	Implement 5 CDSS rules associated to 4 or more CQMs
	Enable drug/drug, drug/allergy checking	Enable drug/drug, drug/allergy checking	Enable drug/drug, drug/allergy checking
Computerized Provider Order Entry (CPOE) Licensed Healthcare Professional *Some exclusions apply	>30% of Medication orders entered using CPOE	>60% of Medication orders entered using CPOE	>80% of Medication orders entered using CPOE
	>30% of Lab orders entered using CPOE. Not Required	>30% of Lab orders entered using CPOE	>60% of Lab orders entered using CPOE
	>30% of Diagnostic Image orders entered using CPOE Not Required	>30% of Diagnostic Image orders entered using CPOE	>60% of Diagnostic Image orders entered using CPOE
Patient Electronic Access to Health Information	>50% of unique patients are provided online access to view, download and transmit within 4 business days. Elements required include: Patient name, provider name, office contact, problem list, procedures, lab test results, current medication and history, medication allergies, vitals, smoking status, demographic, care plan goals and instructions, PCP and care team members.	>50% of unique patients are provided online access to view, download and transmit within 4 business days. Elements required include: Patient name, provider name, office contact, problem list, procedures, lab test results, current medication and history, medication allergies, vitals, smoking status, demographic, care plan goals and instructions, PCP and care team members.	>50% of unique patients or authorized representative are provided online access to view, download and transmit within 24 hours. Elements required include: Patient name, provider name, office contact, problem list, procedures, lab test results, current medication and history, medication allergies, vitals, smoking status, demographic, care plan goals and instructions, PCP and care team members.
			>35% of patients are provided electronic access to patient-specific education resources.
Coordination of Care Through Patient Engagement (Stage 3: Complete 2 out of 3)	At least one patient seen by the provider views, downloads, or transmits their [online] information. Not Required	At least one patient seen by the provider views, downloads, or transmits their [online] information.	>25% of unique patients seen by the provider views, downloads, or transmits their [online] information.
	Capability for patient to send and receive a secure electronic message is enabled. (Attestation) Not Required	Capability for patient to send and receive a secure electronic message is enabled. (Attestation)	>35% of patients were sent a secure electronic message
			Patient generated health data is incorporated into the CEHRT for more than 15% of all unique patients.

	Stage 1 Objectives 2015 Only	Modified Objectives Stage 1: 2016-2017 & Stage 2: 2015-2017	Stage 3 Objectives Stage 1, 2 & 3 2018+ (Optional in 2017)
	Report on 10 Objectives with some items not required	Report on 10 Objectives	Report on 8 Objectives
Objective	Measure	Measure	Measure
Health Information Exchange (HIE) (Stage 3: 2 out of 3)	>10% of transitions of care/referrals include a summary of care document created by the CEHRT and is exchanged electronically. Not Required	>10% of transitions of care/referrals include a summary of care document created by the CEHRT and is exchanged electronically.	>50% of transitions of care/referrals include a summary of care and is exchanged electronically
			>40% of transitions received for new patients are incorporate the patient's summary of care record into the EHR.
			>80% of transitions received for new patients have the clinical information for medication, allergies and problems reconciled.
Public Health and Clinical Data Registry Reporting Stage 1 in 2015: 1 of 5 Stage 2 Modified: 2 out of 5 Stage 3: 3 out of 5	Immunization Registry	Immunization Registry (Only one can be used)	Immunization Registry (Only one can be used)
	Syndromic Registry	Syndromic Registry (Only one can be used)	Syndromic Registry (Only one can be used)
	Case Reporting	Case Reporting (Only one can be used)	Case Reporting (Only one can be used)
	Public Health Registry	Public Health Registry (Can use up to three different registries)	Public Health Registry (Can use up to three different registries)
	Clinical Data Registry	Clinical Data Registry (Can use up to three different registries)	Clinical Data Registry (Can use up to three different registries)
Patient Education	>10% of patients receive patient specific education resources recommended by CEHRT Not Required	>10% of patients receive patient specific education resources recommended by CEHRT	
Medication Reconciliation	>50% of transitions of care have the medications reconciled. Not Required	>50% of transitions of care have the medications reconciled.	

Note: Portions of the information presented today were to support the Medicaid Eligible Professional Expansion Program and Meaningful Use activities and adoption of electronic health records (EHR). The related content was adopted from either or both NY State DOH eMedNY or CMS resources.