

EHR for Meaningful Use: Resource and Training Reference Tool for Eligible Hospitals/CAHs With Scavenger Hunt

Eligible Hospitals/Critical Access Hospitals are responsible for the achievement of Meaningful Use; however, the support of the entire healthcare delivery team is required to accomplish the objectives and improve health outcomes. This tool is intended to provide Meaningful Use (MU) Performance Measures in detail including any measure exclusions, where to find each measure in the RPMS-EHR MU Configuration Guide, guidance on how to meet MU using the Resource and Patient Management System (RPMS) Electronic Health Record (EHR), all necessary software requirements to meet MU certification, an EHR Scavenger Hunt for each MU Performance Measure, an iCare Scavenger Hunt for those MU Performance Measures that apply, and a Suggested Work Flow recommending when to capture the data or complete the task in a typical practice process. In addition, there is a Performance Measures Quick Overview for EHs/CAHs and a Meaningful Use Exclusions Table at the end of the document. The purpose of the EHR for Meaningful Use: Resource and Training Reference Tool for Eligible Hospitals/Critical Access Hospitals is to provide a centralized source of information for training, education, and outreach.

It is recommended that the Performance Measures Report be run periodically in order to monitor how well the EH/CAH is performing on each core set and menu set measure and to ensure that RPMS and PCC are configured correctly. Use the “Stage 1 Meaningful Use (MU) Performance Report-Hospitals” in the Patient Care Component (PCC) Management Reports to monitor measure performance.

The software requirements column includes the namespace, followed by the software or application in parentheses, the version number of the software release, as well as the patch number. EHs/CAHs must ensure that all versions and patches of the software that comprise the certified RPMS EHR are installed. Please refer to the Certified RPMS EHR Application Checklist at: <http://www.ihs.gov/meaningfuluse/docs/NEWCertEHR-MUAppChecklist.doc>.

Please ensure that you are viewing the most recent version of this document by referencing the “Last Updated” date in the footer. The most recent version will remain available on the IHS Meaningful Use website at: <http://www.ihs.gov/meaningfuluse>.

Core Set Measures

For Stage 1, EHs/CAHs must report on all fourteen (14) measures of the Core Set simultaneously, unless the EH/CAH meets measure exclusions.

Core Set Measure	How to Meet it Using RPMS EHR	Software Requirements	EHR Scavenger Hunt	iCare Scavenger Hunt	Suggested Work Flow Step
<p>Computerized Provider Order Entry (CPOE) for Medication Orders: >30% of all unique patients with at least one medication in their medication list admitted to the EH/CAH inpatient or emergency department (POS 21 or 23) during the EHR reporting period have at least one medication order entered using CPOE.</p> <p>Exclusion: none.</p>	<p><i>RPMS-EHR MU Configuration Guide: Section 4.1.1</i></p> <ul style="list-style-type: none"> • Maintain and clean up Drug file. • Configure medications for CPOE in Pharmacy Data Management (PDM) and Order Entry/Results Reporting (OE/RR) Quick Orders and Menus. • CPOE of a medication through EHR. • Ensure only licensed healthcare professionals are assigned the ORES or ORELSE keys. • Orders entered by Pharmacy or Nursing staff must be sent to the provider for review, signature, and release. <p><i>What would lower your rate for this measure?</i></p> <ul style="list-style-type: none"> • Medication orders entered by ORELSE key holders and signed on chart. • If order is not signed and release by the provider within the EHR, it will be excluded from the count. 	<ul style="list-style-type: none"> • BGO (EHR) v1.1 patch 8 • BJPC (PCC) v2 patch 6 	<ol style="list-style-type: none"> 1. Select Meds tab 2. Order a Medication <p>OR</p> <p>Use Medication Review button for reviewed then either order a med or record no active meds. This can be done from the cover sheet.</p>	<p>N/A</p>	<p>Medication order at patient visit during the EHR reporting period.</p> <p>Check for presence of medication order or entry of “No Active Medications” during the EHR reporting period.</p>

Core Set Measure	How to Meet it Using RPMS EHR	Software Requirements	EHR Scavenger Hunt	iCare Scavenger Hunt	Suggested Work Flow Step
<p>Drug Interaction Checks: The EH/CAH has enabled this functionality for the entire EHR reporting period.</p> <p>(Yes/No attestation)</p> <p>Exclusion: none.</p>	<p><i>RPMS-EHR MU Configuration Guide: Section 4.1.2</i></p> <ul style="list-style-type: none"> • Enable and set to mandatory ten order checks to include: ⁽¹⁾ Allergy-Contrast Media Interaction, ⁽²⁾ Allergy-Drug Interaction, ⁽³⁾ Critical Drug Interaction, ⁽⁴⁾ Dangerous Meds for Patients >64, ⁽⁵⁾ Estimated Creatinine Clearance, ⁽⁶⁾ Glucophage-Contrast Media, ⁽⁷⁾ Glucophage-Lab Results, ⁽⁸⁾ No Allergy Assessment, ⁽⁹⁾ Allergy Unassessible and ⁽¹⁰⁾ Renal Functions Over Age 65. • Run the MUCD (Meaningful Use Clean Date) system check in PCC to verify that order checks are configured correctly. • Configure order checks and run the MUCD prior to the first day of the EHR reporting period. <p><i>What would prevent you from meeting this measure?</i></p> <ul style="list-style-type: none"> • Not having your order checks configured correctly. • Not running the MUCD prior to the first day of the EHR reporting period. • <u>Note:</u> When site is configured correctly, the MUCD will be set equal to that day's date. Running the option again doesn't reset the date. The initial clean date remains the same. 	<ul style="list-style-type: none"> • BGO (EHR) v1.1 patch 8 • BJPC (PCC) v2 patch 6 	<ol style="list-style-type: none"> 1. Select Options from Tools menu 2. Select Order Checks tab 3. Scroll through list to verify that all required Adverse Reaction order checks are enabled 	<p>N/A</p>	<p>No suggested work flow step is needed once order checks are configured correctly.</p>

Core Set Measure	How to Meet it Using RPMS EHR	Software Requirements	EHR Scavenger Hunt	iCare Scavenger Hunt	Suggested Work Flow Step
<p>Maintain Problem List: >80% of all unique patients admitted to the EH/CAH inpatient or emergency departments (POS 21 or 23) during the EHR reporting period have an active problem on their Problem List or an indication of no active problems recorded as structured data.</p> <p>Exclusion: None.</p>	<p><i>RPMS-EHR MU Configuration Guide: Section 4.1.3</i></p> <ul style="list-style-type: none"> • Maintain active and inactive Problem List for each patient. • Delete any non-Problem List-related entries. • If patient has no active problems, you must use functionality for entering No Active Problems. 	<ul style="list-style-type: none"> • BGO (EHR) v1.1 patch 8 • BJPC (PCC) v2 patch 6 	<ol style="list-style-type: none"> 1. Select Cover Sheet (or Review Sheet) 2. Right Click Active Problem List 3. Select Chart Review: 4. Select Reviewed to review active problems 5. Select No Active Problems to set structured data 6. Select Chief Complaint/Problem/POV tab 7. Add Chronic Diagnosis to Problem List 8. Select Purpose of Visit (POV) tab 9. Add Chronic Diagnosis to Problem List from Historical POVs 10. View, add, edit, delete problems from a selected patient's Problem List in iCare (<i>where available</i>) 	<ol style="list-style-type: none"> 1. Select Problem List tab 2. Click: <ul style="list-style-type: none"> • Add Problem • Edit Problem • Delete Problem 	<p>Problems/active diagnoses captured during patient visit.</p> <p>When data exists in paper form, problems must be entered into EHR technology. Data may be entered upon patients' first visit using EHR.</p>

Core Set Measure	How to Meet it Using RPMS EHR	Software Requirements	EHR Scavenger Hunt	iCare Scavenger Hunt	Suggested Work Flow Step
<p>Active Medication List: >80% of all unique patients admitted to the EH/CAH inpatient or emergency departments (POS 21 or 23) during the EHR reporting period have at least one entry (or an indication that the patient has no active medications) recorded as structured data.</p> <p>Exclusion: None.</p>	<p><i>RPMS-EHR MU Configuration Guide: Section 4.1.4</i></p> <ul style="list-style-type: none"> • Optimize the Pharmacy suite of applications to include the outside medication option and medication reconciliation. • Maintain and clean up Drug file • Configure medications for CPOE in PDM and OE/RR Quick Orders and Menus. • Document No Active Meds in the Cover Sheet or click the Medication Chart Review button. 	<ul style="list-style-type: none"> • BGO (EHR) v1.1 patch 8 • BJPC (PCC) v2 patch 6 	<ol style="list-style-type: none"> 1. Select Cover Sheet 2. Right Click Medication List 3. Select Chart Review: 4. Select Reviewed to review active problems 5. Select No Active Medications to set structured data 	<ol style="list-style-type: none"> 1. Select PCC tab 2. Select Type =Medications 	<p>Medications captured during patient visit. When data exists in paper form, medications must be entered into certified EHR technology; medications may be entered upon patients' first visit using EHR.</p>

Core Set Measure	How to Meet it Using RPMS EHR	Software Requirements	EHR Scavenger Hunt	iCare Scavenger Hunt	Suggested Work Flow Step
<p>Medication Allergy List: >80% of all unique patients admitted to the EH/CAH inpatient or emergency departments (POS 21 or 23) during the EHR reporting period have at least one entry (or an indication that the patient has no known medication allergies) recorded as structured data.</p> <p>Exclusion: None.</p>	<p><i>RPMS-EHR MU Configuration Guide: Section 4.1.5</i></p> <ul style="list-style-type: none"> • Configure Adverse Reaction Tracking Package parameters. • Enable Order Checks in OE/RR Package. • Document allergies to include no known allergies through EHR. • The Problem List Allergy List (PLAL) Report can be used to identify patient drug allergies that are on the patient's Problem List but not on their Allergies List. • Pharmacy to generate Adverse Reaction tracking non-verified allergies report and verify unverified allergies. <p><i>What would lower your rate for this measure?</i></p> <ul style="list-style-type: none"> • Entering adverse reactions in the Problem List and not in Adverse Reaction Tracking Package. 	<ul style="list-style-type: none"> • BGO (EHR) v1.1 patch 8 • BJPC (PCC) v2 patch 6 	<ol style="list-style-type: none"> 1. Right Click in Adverse Reactions 2. Review the following: <ul style="list-style-type: none"> • Edit Adverse Reaction • Delete Adverse Reaction • New Adverse Reaction • Sign Adverse Reaction • Select Inability to Assess • Select a Reason 3. Select Chart Review: <ul style="list-style-type: none"> • Click on Adverse Reaction box • Select New Adverse Reaction from right click menu • Check No Known Allergies Checkbox in the corner of the Look Up Causative Agent dialogue 	<ol style="list-style-type: none"> 1. Select Summ/Sup tab 2. Select Type=Patient Wellness Handout 3. Select Medication Reconciliation from second list 	<p>Allergies captured in EHR during patient visit. When data exists in paper form, allergies must be entered into EHR technology. Data may be entered upon patients' first visit using EHR.</p>

Core Set Measure	How to Meet it Using RPMS EHR	Software Requirements	EHR Scavenger Hunt	iCare Scavenger Hunt	Suggested Work Flow Step
<p>Record Demographics: >50% of all unique patients admitted to the EH/CAH inpatient or emergency departments (POS 21 or 23) during the EHR reporting period have all demographics recorded as structured data.</p> <p>Exclusion: None.</p>	<p><i>RPMS-EHR MU Configuration Guide: Section 4.1.6</i></p> <ul style="list-style-type: none"> • Set Patient Registration options to mandatory for Preferred Language, Race, Ethnicity, Sex, and Date of Birth. • Patient Registration to review and update Preferred Language, Gender, Race, Ethnicity, Date of Birth, and Date and preliminary cause of death in the event of mortality in the EH/CAH at each patient encounter. <p><i>What would lower your rate for this measure?</i></p> <ul style="list-style-type: none"> • Skipping ANY demographic element will eliminate the patient from your count. <p>Notes:</p> <ul style="list-style-type: none"> • Race and ethnicity are separate demographic entries, and are both required. • Preferred language and primary language are separate demographic entries, but only preferred language is required for this measure. 	<ul style="list-style-type: none"> • AG (Patient Registration) v7.1 patch 9 • BJPC (PCC) v2 patch 6 	<ol style="list-style-type: none"> 1. Click the Patient Detail button 2. View: <ul style="list-style-type: none"> • Preferred Language • Gender • Race • Ethnicity • Date of Birth • Date and preliminary cause of death 	<ol style="list-style-type: none"> 1. Enter and view: <ul style="list-style-type: none"> • Preferred Language • Gender • Race • Ethnicity • Date of Birth • Date and preliminary cause of death 	<p>Demographics captured and entered into EHR during patient visit check-in at front office. When data exists in paper form, demographics must be entered into EHR technology; data may be entered upon patients' first visit using EHR.</p>

Core Set Measure	How to Meet it Using RPMS EHR	Software Requirements	EHR Scavenger Hunt	iCare Scavenger Hunt	Suggested Work Flow Step
<p>Record Vital Signs: >50% of all unique patients age 2+ years admitted to the EH/CAH inpatient or emergency departments (POS 21 or 23) during the EHR reporting period have height, weight, and blood pressure recorded as structured data.</p> <p>Exclusion: None.</p>	<p><i>RPMS-EHR MU Configuration Guide: Section 4.1.7</i></p> <ul style="list-style-type: none"> • Create a vital signs template for EHR data entry. • Create a template for display of measurements on EHR Cover Sheet. • Assign data entry permission to appropriate providers and user classes. • Ensure each patient has their height, weight and blood pressure recorded. <p>Note: For Clinical Quality Measures, Weight Assessment and Counseling for Children and Adolescents requires that the BMI percentile range be appropriately coded; not just calculated.</p>	<ul style="list-style-type: none"> • BGO (EHR) v1.1 patch 8 • BJPC (PCC) v2 patch 6 	<ol style="list-style-type: none"> 1. Select Vitals tab or Vitals Summary in Chief Complaint/Problem/POV tab 2. Click New Date/Time 3. Select Now 4. Enter vitals: <ul style="list-style-type: none"> • Height • Weight • Blood pressure 	<ol style="list-style-type: none"> 1. Select Snapshot tab 2. View Measurements pane 	<p>Vital signs captured and entered in EHR during patient visit. RPMS EHR will calculate and generate BMI and growth charts when configured correctly.</p>

Core Set Measure	How to Meet it Using RPMS EHR	Software Requirements	EHR Scavenger Hunt	iCare Scavenger Hunt	Suggested Work Flow Step
<p>Record Smoking Status: >50% of all unique patients 13+ years old or older admitted to the eligible hospital's or CAH's inpatient or emergency departments (POS 21 or 23) during the EHR reporting period have smoking status recorded as structured data.</p> <p>Exclusion: Any EH/CAH that admits no patients 13 years of age or older to their inpatient or emergency department (POS 21 or 23) during the EHR reporting period.</p>	<p><i>RPMS-EHR MU Configuration Guide: Section 4.1.8</i></p> <ul style="list-style-type: none"> • Ensure that all patients 13 and older seen during the EHR reporting period have been screened for smoking status. • Use Tobacco (Smoking) health factors. <p><i>What would lower your rate for this measure?</i></p> <ul style="list-style-type: none"> • Not documenting Tobacco (Smoking) status. <p>Note: Record smoking health factors in addition to any other tobacco related health factors.</p>	<ul style="list-style-type: none"> • BGO (EHR) v1.1 patch 8 • BJPC (PCC) v2 patch 6 	<ol style="list-style-type: none"> 1. Select Wellness tab 2. Locate Health Factors pane 3. Click Add 4. Click '+' to expand Tobacco (Smoking) Group list 5. Select appropriate Tobacco (Smoking) Health factor 	<ol style="list-style-type: none"> 1. Select PCC tab 2. Select Type=Health Factors 3. View Smoking Status 	<p>Assess patient Tobacco (Smoking) status and then verify Tobacco (Smoking) status is recorded.</p>

Core Set Measure	How to Meet it Using RPMS EHR	Software Requirements	EHR Scavenger Hunt	iCare Scavenger Hunt	Suggested Work Flow Step
<p>Clinical Quality Measures (CQMs): Successfully report Clinical Quality Measures to CMS or appropriate state Medicaid.</p> <p>(Yes/No attestation).</p> <p>Exclusion: None.</p>	<p><i>RPMS-EHR MU Configuration Guide: Section 4.1.9</i></p> <ul style="list-style-type: none"> • Run EH/CAH Clinical Quality Measure Report for a selected 90-day period during the first participation year or the full calendar year for subsequent participation years. • Choose the Selected Measures (User Defined) report. • Choose three core or alternate core measures (marked with (C) and (A)) and three menu set measures (marked with (M)). • You must choose three core or alternate core measures that do not have a denominator=0. • If any of the menu set measures have denominator=0, you must select three other measures that do not have denominator=0. • Save report. The Clinical Quality Measures Summary Report will be used for attestation. <p>Note: For Stage 1, there are no CQM performance targets that must be met. Data derived from the CQM Report should be used for performance improvement and in preparation for future stages when CQMs will include performance targets.</p>	<ul style="list-style-type: none"> • BGP (CRS) v11 patch 3 • BJPC (PCC) v2 patch 6 	<p>Generate the Clinical Quality Measures Report through the Clinical Reporting System (CRS) in RPMS roll and scroll.</p> <p>CORE>CRS</p>	<p>N/A</p>	<p>RPMS calculation (of core, alternate core, or menu Clinical Quality Measures) and on demand reporting.</p>

Core Set Measure	How to Meet it Using RPMS EHR	Software Requirements	EHR Scavenger Hunt	iCare Scavenger Hunt	Suggested Work Flow Step
<p>Clinical Decision Support Rule: Implement one clinical decision support rule during EHR reporting period.</p> <p>(Yes/No attestation).</p> <p>Exclusion: None.</p>	<p><i>RPMS-EHR MU Configuration Guide: Section 4.1.10</i></p> <ul style="list-style-type: none"> • Ensure Clinical Reminders are installed and national reminders are configured. • The report will automatically display "Yes" if any of the above are found to be installed, or "No" if none of the above are found to be installed. • Have at least one of the following configured on the EHR Reports tab: Diabetes, Pre-Diabetes, Asthma, Anti-coagulation, or Women's Health Supplement; Immunization Package Forecasting; or Health Maintenance Reminders. 	<ul style="list-style-type: none"> • BGO (EHR) v1.1 patch 8 • PXR (EHR Reminders) v1.5 patch 1007 • BJPC (PCC) v2 patch 6 	<ol style="list-style-type: none"> 1. Select Reports tab 2. Select a Health Summary: <ul style="list-style-type: none"> • Diabetes • Pre-Diabetes • Asthma • Anti-coagulation • Women's Health • View the report 	<ol style="list-style-type: none"> 1. Select Summ/Sup tab 2. Select Type=Supplements 3. Select from second list: <ul style="list-style-type: none"> • Asthma • Diabetes • Pre-diabetes • Women's Health 	<p>Verify that reminders are configured correctly</p>
<p>Electronic Copy of Health Information: >50% of patients of the inpatient or emergency departments of the EH/CAH (POS 21 or 23) who request an electronic copy of their health information are provided it within 3 business days.</p> <p>Exclusion: Any EH/CAH that has no requests from patients or their agents for an electronic copy of patient's health information during the EHR reporting period.</p>	<p><i>RPMS-EHR MU Configuration Guide: Section 4.1.11</i></p> <ul style="list-style-type: none"> • Configure PCC Health Summary, Patient Wellness Handout (PWH), Discharge Summary, and Discharge Instructions within the EHR. • Provide the information electronically to the patient, such as by CD provided by the facility or encrypted e-mail (HIM). • Document in Release of Information (ROI) requests for electronic copy of health information (enter as Patient/Agent Request Type=Electronic). • Document in ROI information was provided electronically (enter as Record Dissemination =Electronic) AND record the Disclosure Date 	<ul style="list-style-type: none"> • BGO (EHR) v1.1 patch 8 • BJMD (C32) v1 patch 1 • BJPC (PCC) v2 patch 6 • BRN (ROI) v2 patch 3 	<p>Click C32 button</p>	<p>N/A</p>	<p>Provide electronic copy when requested at point of care or post-patient visit.</p>

Core Set Measure	How to Meet it Using RPMS EHR	Software Requirements	EHR Scavenger Hunt	iCare Scavenger Hunt	Suggested Work Flow Step
<p>Electronic Copy of Discharge Instructions: >50% of patients who are discharged from an EH/CAH inpatient or emergency departments (POS 21 or 23) and who request an electronic copy of their discharge instructions are provided it.</p> <p>Exclusion: Any EH/CAH that has no requests from patients or their agent for an electronic copy of the discharge instructions during the EHR reporting period.</p>	<p><i>RPMS-EHR MU Configuration Guide: Section 4.1.12</i></p> <ul style="list-style-type: none"> • Run the post-install routine from the TIU patch (TIU1008 DOCUMENT DEFS) • Create or import a TIU Discharge Instruction template and attach to the Discharge Instruction Note Title • Create or import the e-copy templates and tie them to the appropriate Note Title • Use TIU Note Titles to document either “E-copy discharge instructions received” OR “E-copy discharge instructions not received” • Consider using Quick Notes functionality 	<ul style="list-style-type: none"> • BGO (EHR) v1.1 patch 8 • BJPC (PCC) v2 patch 6 	<p>1. Select Note Title: E-copy discharge instructions received or e-copy discharge instructions not received.</p>	<p>N/A</p>	<p>Provide an electronic copy of discharge instructions upon request by patient or their agent.</p>
<p>Electronic Exchange of Clinical Information: Perform at least one test of certified EHR technology's capacity to electronically exchange key clinical information.</p> <p>(Yes/No attestation).</p> <p>Exclusion: None.</p>	<p><i>RPMS-EHR MU Configuration Guide: Section 4.1.13</i></p> <ul style="list-style-type: none"> • This will be accomplished using the C32 button to enable delivery of C32 documents to outside destinations. • All federal sites will perform the test by submitting their C32s to the IHS national repository. • Results from this test should be entered as a “Yes” or “No” in the Stage 1 Meaningful Use Performance Report for Hospitals for the purposes of attestation. • Tribal RPMS sites have the option to perform the test as described above or with another entity (e.g. a state Health Information Exchange (HIE)). 	<ul style="list-style-type: none"> • BGO (EHR) v1.1 patch 8 • BJMD (C32) v1 patch 1 	<p>N/A</p>	<p>N/A</p>	<p>Ensure at least one test of clinical information exchange was performed during the EHR reporting period.</p>

Core Set Measure	How to Meet it Using RPMS EHR	Software Requirements	EHR Scavenger Hunt	iCare Scavenger Hunt	Suggested Work Flow Step
<p>Protect Electronic Health Information: Conduct or review a security risk analysis of the certified EHR, implement security updates as necessary, and correct identified security deficiencies as part of risk management process.</p> <p>(Yes/No attestation).</p>	<p><i>RPMS-EHR MU Configuration Guide: Section 4.1.14</i></p> <ul style="list-style-type: none"> • Conduct security risk analysis (RA) by using the OIT-developed template located on the IHS Meaningful Use website: http://www.ihs.gov/meaningfuluse/docs/continuous_risk_analysis.docx. • Correct deficiencies noted as part of the RA. • Ensure a sanction policy is adopted (required for federal sites; tribal/urban sites may elect to adopt IHS policy). If your site adopts sections from Part 8 of the IHS Manual, in whole or in part and IHS SOPs and appropriate SGMS, this will meet the requirements of adopting a sanction policy. • Review Logs and Incident Reports: Use ArcSight or the logs implemented through RPMS to support MU. • Use Secure Fusion reports for vulnerability identification. 	<ul style="list-style-type: none"> • VanDyke for AIX • IPSEC for Windows • Winhasher 1.6 <p>And one of the following:</p> <ul style="list-style-type: none"> • Symantec 8.0 • Symantec 8.2 • Credant 2Go • 7-Zip 	<p>N/A</p>	<p>N/A</p>	<p>Ensure security risk analysis was performed during reporting year.</p>

Menu Set Measures

For Stage 1, Eligible Hospitals/Critical Access Hospitals (EHs/CAHs) must report on five (5) measures in the Menu Set simultaneously, unless the EH/CAH meets measure exclusions. EHs/CAHs must choose at least one of the three public health measures which are indicated with an asterisk (*) below.

Menu Set Measure	How to Meet it Using RPMS EHR	Software Requirements	EHR Scavenger Hunt	iCare Scavenger Hunt	Suggested Work Flow Step
<p>Drug-Formulary Checks: The EH/CAH has enabled this functionality and has access to at least one internal or external formulary for the entire EHR reporting period.</p> <p>(Yes/No attestation).</p> <p>Exclusion: None.</p>	<p><i>RPMS-EHR MU Configuration Guide: Section 4.2.1</i></p> <ul style="list-style-type: none"> • Use the RPMS EHR for pharmacy CPOE (drug-formulary check is always enabled). • Mark non-formulary drugs as “non-formulary” in the drug file. • Run the MUCD (Meaningful Use Clean Date) system check in PCC to verify that order checks are configured correctly. • Configure order checks and run the MUCD prior to the first day of the EHR reporting period. <p><i>What would prevent you from meeting this measure?</i></p> <ul style="list-style-type: none"> • Not having your formulary checks configured correctly. • Not running the MUCD prior to the first day of the EHR reporting period. <p>Note: When site is configured correctly, the MUCD will be set equal to that day’s date. Running the option again doesn’t reset the date. The initial clean date remains the same.</p>	<ul style="list-style-type: none"> • BGO (EHR) v1.1 patch 8 • BJPC (PCC) v2 patch 6 • APSP (Pharmacy MOD) v7.0 patch 1010 	<ol style="list-style-type: none"> 1. Select Meds tab 2. Order a Medication 3. Select a non-formulary med (‘NF’ is appended to the name) 4. Formulary Alternatives dialog displays 	N/A	No suggested work flow step is needed once formulary checks are configured correctly.

Menu Set Measure	How to Meet it Using RPMS EHR	Software Requirements	EHR Scavenger Hunt	iCare Scavenger Hunt	Suggested Work Flow Step
<p>Advance Directives: >50% of all unique patients 65 years or older admitted to the EH/CAH inpatient department (POS 21) have an indication of an advance directive status recorded as structured data.</p> <p>Exclusion: EHs/CAHs who have no patient admissions for patients with an age of ≥65 years on date of admission during the EHR reporting period.</p>	<p><i>RPMS-EHR MU Configuration Guide: Section 4.2.2</i></p> <ul style="list-style-type: none"> • In the Patient Registration Package there is a field for capturing Advance Directives • Activate the class and document of Advance Directives • Activate the Note Title of Advance Directives • Utilize the Advance Directives Note Title for documenting the presence of an Advance Directive • HIM staff must search Advance Directives Note Titles at least monthly, and if they are incorrect, reassign to correct Note Title <p><i>What would lower your rate for this measure?</i></p> <ul style="list-style-type: none"> • Not capturing the presence of Advance Directives in Patient Registration • Not using appropriate Note Title 	<ul style="list-style-type: none"> • BGO (EHR) v1.1 patch 8 • BJPC (PCC) v2 patch 6 	<ol style="list-style-type: none"> 1. Select advance directives Note Title. 2. Record Advance Directive status as structured data in EHR during patient visit. 	<p>N/A</p>	<p>Record Advance Directive status as structured data in EHR during patient visit.</p> <p>Ensure that appropriate note title is assigned to Advance Directives.</p>

Menu Set Measure	How to Meet it Using RPMS EHR	Software Requirements	EHR Scavenger Hunt	iCare Scavenger Hunt	Suggested Work Flow Step
<p>Clinical Lab Test Results: >40% of all clinical lab test results ordered by an authorized provider of the EH/CAH for patients admitted to its inpatient or emergency departments (POS 21 or 23) during the EHR reporting period whose results are either in a positive/negative or numerical format are incorporated in certified EHR technology as structured data.</p> <p>Exclusion: None.</p>	<p><i>RPMS-EHR MU Configuration Guide: Section 4.2.3</i> Sites Using RPMS Lab Package to Order & Result Lab Tests:</p> <ul style="list-style-type: none"> • Use and maintain Lab package for use with EHR. • Data Innovations in-house interface is not required for in-house labs. If not using, order labs using RPMS EHR but manually enter test results into RPMS Lab package. • Use Bi-directional Reference Lab Interface for labs that are performed by a reference lab (e.g. Quest, LabCorp, etc.). • If NOT using the bi-directional interface for Send-out labs, order labs using RPMS EHR but manually enter test results into RPMS Lab package. • Configure the EHR Point of Care lab button. • For small sites without labs or laboratory professionals who choose to enter lab results into PCC via Data Entry, please ensure that you are working from patch 7 or later (not yet released as of 11/22/11) for the inclusion of the additional data entry fields. <p><i>What would lower your rate for this measure?</i></p> <ul style="list-style-type: none"> • Not Using RPMS Lab Package for laboratory orders and results. • Using a uni-directional interface, because orders are not entered into RPMS, nor are results populated into the Lab Package. 	<ul style="list-style-type: none"> • BGO (EHR) v1.1 patch 8 • BJPC (PCC) v2 patch 6 • LR (Lab Package) v5.2 patch 1027 (includes VA patches 372 and 334) 	<ol style="list-style-type: none"> 1. Select Labs tab 2. Review Lab Results 3. Select Reports tab 4. View Most Recent Lab Results Health Summary by clicking on the "I" button. 5. View Lab Status to find out what test(s) have been ordered, the urgency of each and the status of each test. 	<ol style="list-style-type: none"> 1. Select PCC tab 1. Select Type=Labs 2. View Lab Results 	<p>Point-to-point interfaces between EHR and an outside entity, clinical messaging capability, or connection through HIE.</p>

Menu Set Measure	How to Meet it Using RPMS EHR	Software Requirements	EHR Scavenger Hunt	iCare Scavenger Hunt	Suggested Work Flow Step
<p>Patient Lists: Generate at least one report listing patients of the EH/CAH with a specific condition. (Yes/No attestation). Exclusion: None.</p>	<p><i>RPMS-EHR MU Configuration Guide: Section 4.2.4</i></p> <ul style="list-style-type: none"> • Generate at least one list of patients by specific conditions to use for quality improvement, reduction of disparities, research or outreach. • Examples of reports include Diabetes, Women’s Health, Adverse Reaction Tracking, Immunizations, Obesity Prevalence, Clinical Report System and iCare. • Another way to create lists is through Qman by including the following data elements at a minimum: problem list, medication list, demographics, and laboratory test results. For example, use Qman to generate a list of patients 2-64 years of age with a visit to the EH/CAH in the past year who have diabetes indicated on their problem list. • Save the list to a file, if desired, as proof of its generation. 	<ul style="list-style-type: none"> • BJPC (PCC) v2 patch 6 • BQI (iCare) v2.1 • BGP (CRS) v11 patch 3 	<p>1. Generate a List using the RPMS Roll and Scroll for:</p> <ul style="list-style-type: none"> • Diabetes • Asthma • Women’s Health • Adverse Reaction Tracking • Immunizations • Obesity Prevalence • Clinical Report System 	<ol style="list-style-type: none"> 1. Select Panel List tab 2. Click New 3. Select Ad Hoc Search 4. Type the Panel Name 5. Select the Patient filter 6. Select the Diagnostic Tag filter 7. Click Edit 8. Select the diagnosis 9. Click Add to move the selection to Current Selections 10. Click OK 11. Set additional filters as desired 12. Click OK 13. View the panel 	<p>RPMS on demand reporting.</p>

Menu Set Measure	How to Meet it Using RPMS EHR	Software Requirements	EHR Scavenger Hunt	iCare Scavenger Hunt	Suggested Work Flow Step
<p>Patient Specific Education Resources: >10% of all unique patients admitted to the EH/CAH inpatient or emergency departments (POS 21 or 23) are provided patient-specific education resources.</p> <p>Exclusion: None.</p>	<p><i>RPMS-EHR MU Configuration Guide: Section 4.2.5</i></p> <ul style="list-style-type: none"> In the Education component (normally on the Wellness tab), add patient education by selecting the applicable category/disease/procedure and a sub-topic of "Literature." For example, Diabetes Mellitus-Literature <p>Note: Provide printed patient education materials to patients.</p>	<ul style="list-style-type: none"> BGO (EHR) v1.1 patch 8 BJPC (PCC) v2 patch 6 	<ol style="list-style-type: none"> Select Chief Complaint/Problem/POV tab View Visit Diagnosis Click on the "I" button Print information Document education at the Add Patient Education dialog 	<p>N/A</p>	<p>Provide education resources at time of patient visit.</p>

Menu Set Measure	How to Meet it Using RPMS EHR	Software Requirements	EHR Scavenger Hunt	iCare Scavenger Hunt	Suggested Work Flow Step
<p>Medication Reconciliation: Perform medication reconciliation for >50% of transitions of care in which the patient is admitted to the EH/CAH inpatient or emergency departments (POS 21 or 23).</p> <p>Exclusion: None.</p>	<p><i>RPMS-EHR MU Configuration Guide: Section 4.2.6</i></p> <ul style="list-style-type: none"> • Provide patient with medication reconciliation PWH. • Perform the medication reconciliation for transitions of care. • Document Medication Reconciliation patient education code (M-MR). <p>Notes:</p> <ul style="list-style-type: none"> • Printing the Patient Wellness Handout (PWH) and presenting a copy to the patient is recommended as this will allow the EH/CAH to meet additional Performance Measures. • This MU Performance Measure addresses medication reconciliation (MR) when an EH/CAH admits a patient, but other accreditation bodies (e.g., the Joint Commission, AAAHC) require MR to be done at every transition of care. 	<ul style="list-style-type: none"> • BGO (EHR) v1.1 patch 8 • BJPC (PCC) v2 patch 6 	<ol style="list-style-type: none"> 1. Select Medication tab 2. Add new outside Medication – Calcium 500mg BID 3. Select the Wellness tab 4. Click on the Add button on the Education panel 5. Find and Print the Medication Reconciliation Patient Wellness Handout 6. Document M-MR Patient Education Code 	<p>N/A</p>	<p>Complete and document medication reconciliation at the beginning of every patient visit.</p> <p>During patient visit, system enables online comparison of two or more medication lists (the one included in patient's current EHR and an external list).</p>

Menu Set Measure	How to Meet it Using RPMS EHR	Software Requirements	EHR Scavenger Hunt	iCare Scavenger Hunt	Suggested Work Flow Step
<p>Transition of Care Summary: The EH/CAH that transitions or refers their patient to another care setting/provider provides a summary of care record for >50% of transitions of care/referrals.</p> <p>Exclusion: None.</p>	<p><i>RPMS-EHR MU Configuration Guide: Section 4.2.7</i></p> <ul style="list-style-type: none"> • Print C32 Summary of Care record for all active referrals and give to patient and/or receiving provider. • Access the RCIS tab to view list of referrals, including those that have not had a C32 printed. • To print a C32, select the patient, click Referrals tab, click the referral, and click the “Print C32 for Referral” button • Or RCIS staff views a list of active referrals for which C32s need to be printed by running the “Active Referrals without a Printed C32” report from the Administrative Reports menu. They can then login to the RPMS EHR to print the C32 for a specific referral and provide to the patient and/or receiving provider. 	<ul style="list-style-type: none"> • BGO (EHR) v1.1 patch 8 • BJPC (PCC) v2 patch 6 • BMC (RCIS) v4.0 patch 7 	<ol style="list-style-type: none"> 1. Select Referrals tab and specify date range 2. Click on Print C32 for Referral 	<p>N/A</p>	<p>Integrate C32 print into referred care and contract health processes.</p> <p>Print C32 during or post patient visit.</p>

Menu Set Measure	How to Meet it Using RPMS EHR	Software Requirements	EHR Scavenger Hunt	iCare Scavenger Hunt	Suggested Work Flow Step
<p>Immunization Registries Data Submission *: Performed at least one test of certified EHR's capacity to submit electronic data to immunization registries and follow-up submission if the test is successful.</p> <p>(Yes/No/Not Available attestation).</p> <p>Exclusion: EH/CAHs should not choose this measure if they administer no immunizations, or if their respective state does not have an immunization registry and/or the registry does not have the capacity to receive the information electronically.</p>	<p><i>RPMS-EHR MU Configuration Guide: Section 4.2.8</i></p> <ul style="list-style-type: none"> • Contact IIS for instructions on test submission. • USE BYIM TEST command to generate test file. • Only one test per RPMS facility of data submission to IIS is needed. <p>Notes:</p> <ul style="list-style-type: none"> • EH/CAHs must choose at least one of the three public health measures. • States with no immunization registry or registries which cannot receive HL7 messages are excluded. • Please refer to the IHS Meaningful Use website at http://www.ihs.gov/meaningfuluse for the Test Procedure for 170.302 (k) Submission to Immunization Registries. • IIS State Registry Staff Main & Technical Contacts: http://www.cdc.gov/vaccines/programs/iis/contact-state.htm. • American Immunization Registry Association Registry Profiles: http://www.immregistries.org/public.php/ImmRegs/reqMain.php. 	<ul style="list-style-type: none"> • BYIM (Immunization Exchange) v2 patch 1 • BJPC (PCC) v2 patch 6 	<p>N/A</p>	<p>N/A</p>	<p>Point-to-point interface between EHR and Immunization Information System, or connection through HIE.</p>

Menu Set Measure	How to Meet it Using RPMS EHR	Software Requirements	EHR Scavenger Hunt	iCare Scavenger Hunt	Suggested Work Flow Step
<p>Reportable Lab Results to Public Health Agencies *: Performed at least one test of certified EHR technology's capacity to provide electronic submission of reportable lab results to public health agencies and follow-up submission if the test is successful (unless none of the public health agencies to which the EH/CAH submits such information have the capacity to receive the information electronically).</p> <p>(Yes/No/Not available attestation)</p> <p>Exclusion: EHs/CAHs that have no public health agency with the capacity to receive electronic information during the EHR reporting period.</p>	<p><i>RPMS-EHR MU Configuration Guide: Section 4.2.9</i></p> <ul style="list-style-type: none"> • Ensure that the facility is transmitting the revised RPMS Reportable Labs Export to the IHS Division of Epidemiology and Disease Prevention. • Sign up to receive an e-mail export file receipt notification • A copy of the e-mail confirmation export file receipt will serve as the attestation of this measure for MU <p>Notes:</p> <ul style="list-style-type: none"> • EH/CAHs must choose at least one of the three public health measures. 	<ul style="list-style-type: none"> • BJPC (PCC) v2 patch 6 • APCL (ILI Export) v3 patch 27 	<p>N/A</p>	<p>N/A</p>	<p>Point-to-point interface between EHR and IHS Division of Epidemiology and Disease Prevention, or connection through HIE.</p>

Menu Set Measure	How to Meet it Using RPMS EHR	Software Requirements	EHR Scavenger Hunt	iCare Scavenger Hunt	Suggested Work Flow Step
<p>Syndromic Surveillance Data Submission *: Performed at least one test of certified EHR's capacity to provide electronic syndromic surveillance data to public health agencies and follow-up submission if the test is successful.</p> <p>(Yes/No/Not available attestation).</p> <p>Exclusion: EH/CAHs who have no public health agency with the capacity to receive information electronically to which it may submit such information.</p>	<p><i>RPMS-EHR MU Configuration Guide: Section 4.2.10</i></p> <ul style="list-style-type: none"> • Ensure the facility is transmitting the revised RPMS ILI/H1N1 Surveillance Export to the IHS Division of Epidemiology and Disease Prevention. • Ensure data is being sent by setting up an e-mail export file receipt notification. If notifications cease, contact your site manager to restart the exports. <p>Note:</p> <ul style="list-style-type: none"> • EH/CAHs must choose at least one of the three public health measures. • Please refer to the IHS Meaningful Use website at http://www.ihs.gov/meaningfuluse for the Test Procedure for 170.302 (I) Public Health Surveillance. • Transmission of data to the IHS Division of Epidemiology and Disease Prevention qualifies for this measure. A copy of the e-mail confirmation export file receipt will serve as the attestation of this measure for MU. 	<ul style="list-style-type: none"> • BJPC (PCC) v2 patch 6 • APCL (ILI Export) v3 patch 27 	<p>In the RPMS Roll and Scroll, Create a file of HL7 messages that will be exported to the IHS EPI program.</p> <p>CORE>PCC>AR P>EPIX>HLIL</p>	<p>N/A</p>	<p>Point-to-point interface between EHR and IHS Division of Epidemiology, or connection through HIE.</p>

Performance Measures Quick Overview for EH/CAHs

Responsible Party	Core Set Measure	
Provider	CPOE Medication Maintain Problem List Active Medication List Medication Allergy List Record Vital Signs Record Smoking Status Clinical Quality Measures	Transition of Care Summary Patient Specific Education Resources Medication Reconciliation
Nurse	CPOE Medication Active Medication List Medication Allergy List Record Vital Signs Record Smoking Status	Patient Lists Patient Specific Education Resources Medication Reconciliation
Pharmacist	CPOE Medication Drug Interaction Checks Active Medication List Medication Allergy List Electronic Exchange of Clinical Information	Drug-Formulary Checks Patient Specific Education Resources Medication Reconciliation Immunization Registries Data Submission*
Case Manager		Patient Lists Patient Specific Education Resources Transition of Care Summary
Patient Registration	Record Demographics	
Lab Professionals/Medical Technologist		Clinical Lab Test Results Patient Specific Education Resources
Immunization Coordinator		Immunization Registries Data Submission*
Public Health Nurse		Patient Specific Education Resources Immunization Registries Data Submission* Reportable Lab Results to Public Health Agencies* Syndromic Surveillance Data Submission*
Health Information Management	Maintain Problem List Active Medication List Medication Allergy List Record Demographics	Advance Directives Clinical Lab Test Results Patient Lists Transition of Care Summary

Responsible Party	Core Set Measure	
	Record Smoking Status Clinical Quality Measures Electronic Copy of Health Information Electronic Copy of Discharge Instructions Electronic Exchange of Clinical Information Protect Electronic Health Information	Immunization Registries Data Submission* Reportable Lab Results to Public Health Agencies* Syndromic Surveillance Data Submission*
Quality Manager	All Performance Measures and Clinical Quality Measures	All Performance Measures and Clinical Quality Measures
Contract Health Services		Transitions of Care Summary
IT Support	Electronic Exchange of Clinical Information Protect Electronic Health Information	Immunization Registries Data Submission* Reportable Lab Results to Public Health Agencies* Syndromic Surveillance Data Submission*
Clinical Applications Coordinator	Configuration of RPMS & EHR GUI for all Performance Measures and Clinical Quality Measures	Configuration of RPMS & EHR GUI for all Performance Measures and Clinical Quality Measures

Meaningful Use Exclusions for EHs/CAHs

Core Set Measure	Exclusions
Computerized Provider Order Entry (CPOE) for Medication Orders	None
Drug Interaction Checks	None
Maintain Problem List	None
Active Medication List	None
Medication Allergy List	None
Record Demographics	None
Record Vital Signs	None
Record Smoking Status	EHs/CAHs who admit no patients 13 years of age or older
Clinical Quality Measures	None
Clinical Decision Support Rule	None
Electronic Copy of Health Information	EHs/CAHs who have received no requests from patients or their agents for an electronic copy of patient's health information
Electronic Copy of Discharge Instructions	EHs/CAHs who have received no requests from patients or their agents for an electronic copy of discharge instructions
Electronic Exchange of Clinical Information	None
Protect Electronic Health Information	None

Menu Set Measure	Exclusions
Drug Formulary Checks	None
Advance Directives	EH/CAH that admits no patients => 65 yrs
Clinical Lab Test Results	None
Patient Lists	None
Patient Specific Education Resources	None
Medication Reconciliation	None
Transition of Care Summary	None
Immunization Registries Data Submission *	EHs/CAHs who administer no immunizations or where no immunization

Menu Set Measure	Exclusions
	registry exists that can receive electronic information
Reportable Lab Results to Public Health Agencies *	EHs/CAHs that have no public health agency with the capacity to receive electronic information
Syndromic Surveillance Data Submission *	EHs/CAHs who have no public health agency with the capacity to receive information electronically