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Email meaningfuluseteam@ihs.gov with topics for the next issue.

2014 RPMS EHR CERTIFICATION AND RELEASE

As of August 22, 2014, InfoGard Laboratories issued certification numbers for the 2014 RPMS EHR (BCER v 2.0) as a complete EHR for ambulatory settings, and as a complete EHR for inpatient settings. The certification numbers are as follows:

- Ambulatory – 1314E01PJHPUEAL
- Inpatient – 1314E01PJHPQEA1

Now that 2014 RPMS Suite (BCER v2) has been released, facilities will need to install all applications and patches to have the certified version. (Note that EPs and EHs must use all associated functionality and patches to demonstrate MU.) Check with your area MU coordinator to learn when your facility is scheduled for deployment, and visit <http://www.ihs.gov/meaningfuluse/certificationoverview/> for more information.

INTRODUCING THE 2014 FLEXIBILITY RULE

Because of the complexity of the Stage 2 Rule, many vendors experienced delays in producing an EHR certified according to the 2014 ONC standards. To assist EPs and EHs in attesting to MU in FY/CY 2014, CMS recently released the *2014 Flexibility Rule* (posted at <https://www.federalregister.gov/articles/2014/09/04/2014-21021/medicare-and-medicaid-programs-modifications-to-the-medicare-and-medicaid-electronic-health-record>). This Rule allows EPs and EHs to demonstrate MU in FY/CY 2014 with a variety of

options if an EP or EH are unable to fully implement 2014 CEHRT*:

- Use 2011 CEHRT to meet 2013 Stage 1 performance measures and CQMs.
- Use a combination of 2011 and 2014 CEHRT to meet either 2013 Stage 1 performance measures and CQMs or 2014 Stage 1 performance measures and CQMs.
- Use 2014 CEHRT to meet either 2014 Stage 1 or Stage 2 performance measures or CQMs.

In addition to these accommodations for participants in FY/CY 2014, the *2014 Flexibility Rule* also pushes back the start date for Stage 3 from 2016 to 2017.

*Note that to A/I/U in 2014, users are only allowed to adopt, implement, or upgrade to 2014 CEHRT.

Listed in the next two tables are the number of objectives required to demonstrate each stage of MU.

Eligible Professionals

2013 Stage 1	2014 Stage 1	Stage 2
13 core objectives	13 core objectives	17 core objectives
5 of 10 menu set objectives	5 of 9 menu set objectives	3 of 6 menu set objectives
CQMs: 3 core/alternate core 3 additional measures	CQMs: 9 total (3 across 6 domains)	CQMs: 9 total (3 across 6 domains)

Eligible Hospitals

2013 Stage 1	2014 Stage 1	Stage 2
12 core objectives	11 core objectives	16 core objectives
5 of 10 menu set objectives	5 of 10 menu set objectives	3 of 6 menu set objectives
CQMs: 15 total	CQMs: 16 total (3 across 6 domains)	CQMs: 16 total (3 across 6 domains)

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Two update patches are available for the RPMS 2011 Certified EHR. The first patch, APCM v1.0, p4, updates the performance measure reports (specifically, CPOE and patient reminders). The second patch, CRS v14.1, p1 (RPMS namespace BGP), updates CQM reporting ability (allows reporting for user-defined date range).

Contact your national MU consultant (see <http://www.ihs.gov/meaningfuluse/resourcesstaff/>) for assistance. Also, be sure to visit the CMS web site at <http://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/EducationalMaterials.html> for numerous resources.

PRACTICE MANAGEMENT APPLICATION SUITE:

A New Resource and Patient Management System Era

The Practice Management Application Suite (PMAS) provides a variety of functions, from patient registration and scheduling to admissions, discharges, and transfers, through a consistent and easy-to-use graphical user interface (GUI). The PMAS is the first of the Resource and Patient Management System (RPMS) applications developed using the new Service Oriented Architecture (SOA) framework. The SOA framework presents these modules via a browser-accessible GUI and provides a common foundation for the various RPMS modules currently under development. In addition, the GUI environment offers a fresh, intuitive layout in contrast to the earlier text-based interface known as *roll and scroll*.

PMAS Patient Registration Module

The PMAS Patient Registration module provides EPs and EHRs with the functionality necessary to demonstrate meaningful use of 2014 CEHRT.

- Auditing functionality, for example, has been built into the PMAS Patient Registration that does not exist in the roll and scroll environment. (Note that this means the PMAS must be used to demonstrate 2014 MU.)

- Other PMAS functionality allows EPs and EHRs to record, modify, and retrieve patient demographic data electronically. This data includes sex, date of birth, preferred language, race and ethnicity.
- Likewise, staff can record electronically whether a patient 65 years old or older has an Advance Directive.
- In addition, EHRs can electronically record, change, and access preliminary cause of death in the event of mortality.

The following new choices, menu options, and fields have been incorporated into the Patient Registration module as a result of MU Stage 2:

- The "Unknown" option has been added to indicate patient's sex.
- The "Declined to Answer" option has been added to the Preferred Language choices.
- The "Do Not Notify" option has been added to the Method of Communication choices.
- The capability to enter multiple races and ethnicities has been added.
- "Method of Communication" has been changed to read, "What is your preferred method of communication?"
- The "M – Mail" option has been changed to "L – Letter" in the Method of Communication choices.
- A new option has been added to indicate whether a patient has received a PHR handout.
- A new option has been added to indicate whether a patient has registered to access his or her Patient Health Record (PHR).

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- A new field has been added to capture Preliminary Cause of Death information (inpatient setting only).

PMAS and Clinical Quality Measures

The PMAS also includes the Clinical Quality Measures (CQM) module. While Performance Measures assess how the CEHRT is used, CQMs measure the outcomes of patient care.

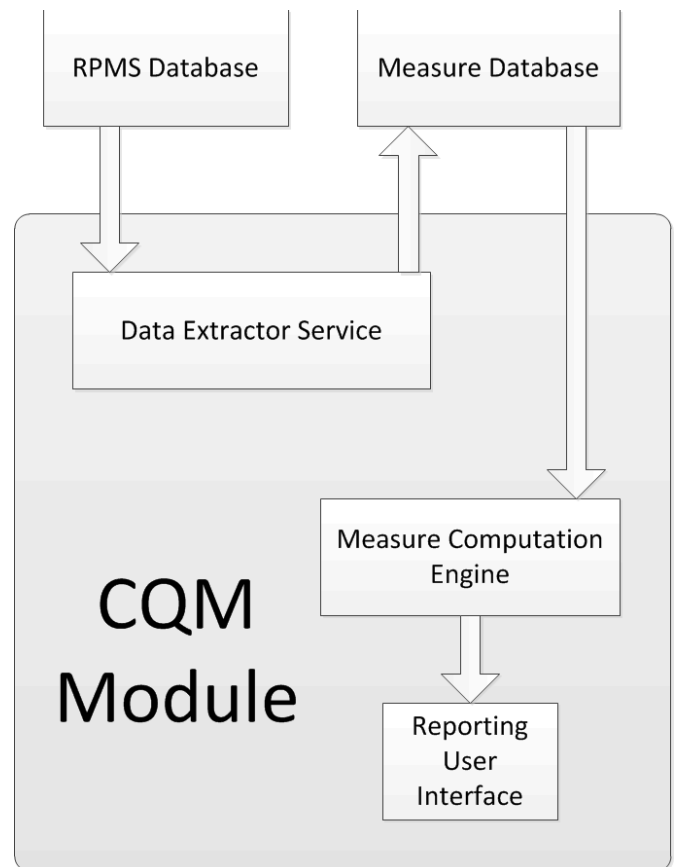
The CQM module of the PMAS automatically extracts individual patient data from the RPMS EHR. The extracted patient data resides within the eCQM engine and is used to calculate performance rates. These performance rates can be viewed in a summary and/or detailed report run by the CQM module. The performance rates can be reported to CMS in two ways: 1) through the QualityNet web site by uploading the data in a specialized format called the Quality Reporting Document Architecture (QRDA) Category 1 and Category 3, which is created by the eCQM engine, or 2) by attestation.

The CQM module is composed of four parts: Data Extractor Service, Measure Database, Measure Computation Engine, and Reporting User Interface.

- Data Extractor Service: individual patient data is extracted from the RPMS EHR according to the time schedule selected by the user.
- Measure Database: extracted patient data resides here.
- Measure Computation Engine: performance rates are computed based on the logic requirements determined by CMS.
- Reporting User Interface: detailed or summary reports can be run and exported through this

interface. QRDA reports can also be downloaded here.

The figure below illustrates the relationship among these components.



Summary

The PMAS provides the tools necessary to allow health care facilities to comply with MU and establishes the necessary foundation for future MU compliance. BMW V2.5 (the PMAS namespace) is required for Stage 2.