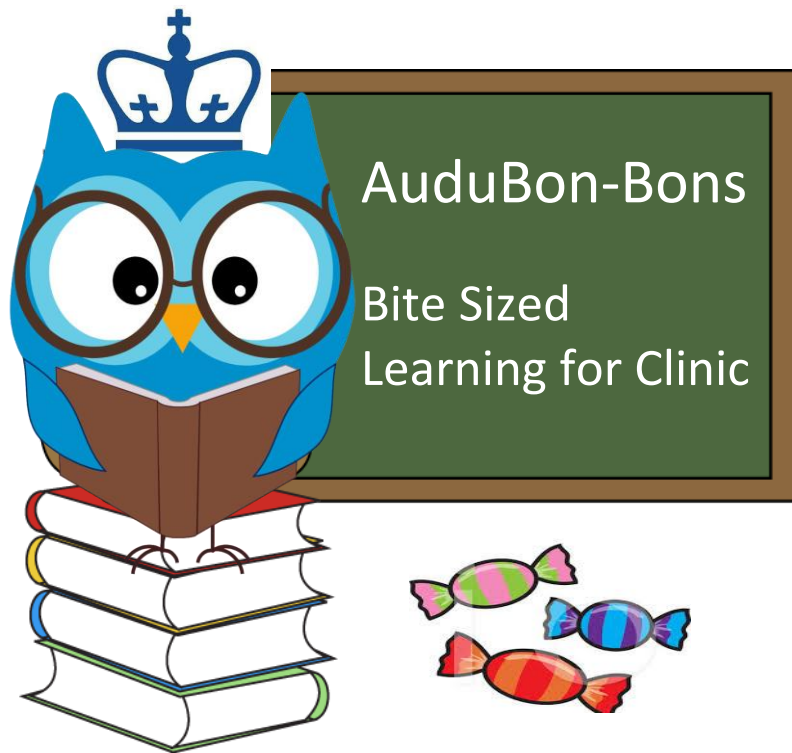# MEANINGFUL USE

Week 58

AuduBon-Bons

Bite Sized
Learning for Clinic

Prepared by: Stephanie Warsheski, MD
With SDH slide by Chloé Altchek, MS4

Reading Assignment:
Read the following webpage:
https://www.ama-assn.org/practice-management/medicare/meaningful-use-electronic-health-record-ehr-incentive-programs

LEARNING OBJECTIVES

- To review the meaning of Meaningful Use

- To understand the purpose of Meaningful Use

- To learn how to demonstrate Meaningful Use

WHAT IS MEANINGFUL USE?

- The Center for Medicare & Medicaid Services (CMS) EHR incentive program
  - Initially *provided incentives* to accelerate the adoption of EHRs to meet program requirements
  - Now, *physicians who fail to participate in MU will receive a penalty* in the form of reduced Medicare/Medicaid reimbursements

- Program that requires using CEHRT (certified health records technology) to CAPTURE, EXCHANGE and REPORT specific clinical data and quality measures
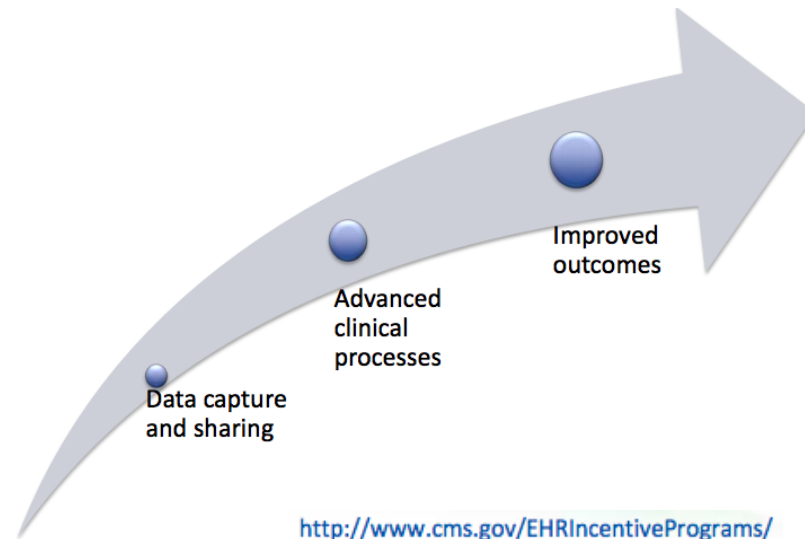
WHAT IS MEANINGFUL USE?

- The MU program began in 2011
- It has evolved over the course of 3 stages:
  - **Stage 1**: established requirements for electronic capturing of clinical data, including providing patients with electronic copies of health information
  - **Stage 2**: encouraged the use of EHRs for increased exchange of information and continuous quality improvement at the point of care in the most structured format possible
    - **Modified Stage 2**: current requirements all physicians should follow
  - **Stage 3**: focused on using CERHT to improve health outcomes

WHAT IS MEANINGFUL USE?

There are 3 main components of MU:

1. Use of certified EHR in a meaningful manner (e.g., e-prescribing)
2. Use of certified EHR technology for electronic exchange of health information to improve quality of health care
3. Use of certified EHR technology to submit clinical quality measures

Improved outcomes

Advanced clinical processes

Data capture and sharing

http://www.cms.gov/EHRIncentivePrograms/

WHAT IS THE PURPOSE OF MEANINGFUL USE?

MU was defined by the use of CEHRT in a meaningful manner and rests on the five pillars of health outcomes policy priorities:

1. Improving quality, safety, efficiency and reducing health disparities
2. Engage patients and families in their health
3. Improve care coordination
4. Improve population and public health
5. Ensure adequate privacy and security protection for personal health information

HOW DO YOU DEMONSTRATE MEANINGFUL USE?

- Physicians must use certified health records technology (CEHRT)

- Physicians must demonstrate MU through an attestation process at the end of each MU reporting period to avoid a penalty

- All physicians participating in MU must demonstrate the 10 new Modified Stage 2 requirements

Eligible Professional
EHR Incentive Program
Objectives and Measures for 2016
Table of Contents
Date updated: February 4, 2016

Eligible Professional Objectives and Measures	
(1)	Protect electronic protected health information created or maintained by the CEHRT through the implementation of appropriate technical capabilities.
(2)	Use clinical decision support to improve performance on high-priority health conditions.
(3)	Use computerized provider order entry 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.
(4)	Generate and transmit permissible prescriptions electronically (eRx).
(5)	Health Information Exchange -The EP who transitions their patient to another setting of care or provider of care or refers their patient to another provider of care provides a summary care record for each transition of care or referral.
(6)	Use clinically relevant information from CEHRT to identify patient-specific education resources and provide those resources to the patient.
(7)	The EP who receives a patient from another setting of care or provider of care or believes an encounter is relevant performs medication reconciliation.
(8)	Patient electronic access - Provide patients the ability to view online, download, and transmit their health information within 4 business days of the information being available to the EP.
(9)	Use secure electronic messaging to communicate with patients on relevant health information.
(10)	Public Health Reporting -The EP is in active engagement with a public health agency to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.

Eligible Professional
Medicaid EHR Incentive Program
Stage 3 Objectives and Measures
Table of Contents
Updated: August 2017

SOCIAL DETERMINANTS OF HEALTH

EMR-based tools that address social determinants of health:

EMR-based screening tool links patients with local social services

i.e. if a family screens positive for food insecurity- a referral through Epic is initiated. Advocates use EMR to complete application for services and document referral outcomes so referring physicians can track progress

Clinic-Level EMR-based efficiencies help physicians prevent electricity service disconnection for patients with medical devices (nebulizers, respirators)

An auto-populated shut-off protection letter is now integrated into EMR (decreased physician time spent from 30min to 30 sec)

Screening tool identifies patients who were homeless or at risk of homelessness to improve care

Veterans presenting to ED screened for housing needs & electronically referred to VA homeless programs-leads to streamlined documentation and higher reimbursement rates

When adequately leveraged, the EMR can improve collaboration between medical and social service delivery

ACOG

THE AMERICAN CONGRESS OF
OBSTETRICIANS AND GYNECOLOGISTS

February 2016

At this time, ACOG does not have a specialty registry that EPs can utilize to meet attestation requirements for MU Stage 2 (Objective 10: Public Health, Specialized Registry Reporting).

The list of the CMS specialized registries can be found here:
https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/PQRS/Downloads/2015QCDRPosting.pdf

One registry that might be appropriate for some obstetrics and gynecology practices is the American Urogynecologic Society Pelvic Floor Disorder Registry (AUGS PFDR), found on page 14 of the CMS specialized registries list.

REFERENCES

- HER Incentive Programs: 2015 – 2017 (Modified Stage 2) Overview https://www.cdc.gov/ehrmeaningfuluse/docs/CMS_Stage_3_MU_Overview_2015_2017.pdf (Accessed March 1, 2020).

- Meaningful Use: Electronic Health Record (EHR) incentive programs (https://www.ama-assn.org/practice-management/medicare/meaningful-use-electronic-health-record-ehr-incentive-programs (Accessed March 1, 2020).

- Medicare & Medicaid HER Incentive Program. https://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/downloads/MU_Stage1_ReqOverview.pdf (Accessed March 1, 2020).

- Public Health and Promoting Interoperability Programs (formerly, known as Electronic Health Records Meaningful Use). https://www.cdc.gov/ehrmeaningfuluse/introduction.html (Accessed March 1, 2020).

- Gottlieb LM, Tirozzi KJ, Manchanda R, Burns AR, Sandel MT. Moving electronic medical records upstream: incorporating social determinants of health. Am J Prev Med. 2015 Feb;48(2):215-218. doi: 10.1016/j.amepre.2014.07.009. Epub 2014 Sep 10. PMID: 252170