CCNC Pediatrics: Meaningful Use

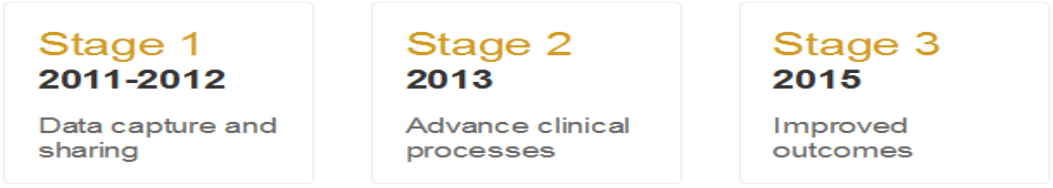
Meaningful use is using certified electronic health record (EHR) technology to:

- Improve quality, safety, efficiency, and reduce health disparities
- Engage patients and family
- Improve care coordination, and population and public health
- Maintain privacy and security of patient health information

Ultimately, it is hoped that the meaningful use compliance will result in:

- Better clinical outcomes
- Improved population health outcomes
- Increased transparency and efficiency
- Empowered individuals
- More robust research data on health systems

Stages of Meaningful Use



Stage 1: Meaningful use criteria focus on:	Stage 2: Meaningful use criteria focus on:	Stage 3: Meaningful use criteria focus on:
Electronically capturing health information in a standardized format	More rigorous health information exchange (HIE)	Improving quality, safety, and efficiency, leading to improved health outcomes
Using that information to track key clinical conditions	Increased requirements for e-prescribing and incorporating lab results	Decision support for national high-priority conditions
Communicating that information for care coordination processes	Electronic transmission of patient care summaries across multiple settings	Patient access to self-management tools
Initiating the reporting of clinical quality measures and public health information	More patient-controlled data	Access to comprehensive patient data through patient-centered HIE
Using information to engage patients and their families in their care		Improving population health

Requirements for Stage 1

- A practice must meet 20 of the 25 meaningful use objectives to qualify for an incentive payment.
- There are 15 required core objectives.
- The remaining 5 can be chosen from the list of 10 menu objectives.
- In addition, 6 total Clinical Quality Measures.

15 Core Objectives

- Computerized provider order entry (CPOE)
- E-Prescribing (eRx)
- Report ambulatory clinical quality measures to CMS/States
- Implement one clinical decision support rule
- Provide patients with an electronic copy of their health information, upon request
- Provide clinical summaries for patients for each office visit
- Drug-drug and drug-allergy interaction checks
- Record demographics
- Maintain an up-to-date problem list of current and active diagnoses
- Maintain active medication list
- Maintain active medication allergy list
- Record and chart changes in vital signs
- Record smoking status for patients 13 years or older
- Capability to exchange key clinical information among providers of care and patient-authorized entities electronically
- Protect electronic health information

10 Menu Objectives

- Drug-formulary checks
- Incorporate clinical lab test results as structured data
- Generate lists of patients by specific conditions
- Send reminders to patients per patient preference for preventive/follow up care
- Provide patients with timely electronic access to their health information
- Use certified EHR technology to identify patient-specific education resources and provide to patient, if appropriate
- Medication reconciliation
- Summary of care record for each transition of care/referrals
- Capability to submit electronic data to immunization registries/systems*
- Capability to provide electronic syndromic surveillance data to public health agencies*

* At least 1 public health objective must be selected.

6 measures total (3 core/alternate core and 3 additional)

3 core measures:

- Hypertension: Blood pressure measurement
- Preventative Care & Screening: a)Tobacco Use Assessment b) Tobacco Cessation Intervention
- Adult Weight Screening and Follow-Up

3 alternate core measures:

- Weight assessment and counseling for children and adolescents
- Childhood Immunization Status
- Preventative Care & Screening: Influenza immunization for patients ≥ 50 yrs old

Choose 3 additional measures from list of 38 Clinical Quality Measures