

Issue Brief

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HHS Releases Two Final EHR Rules

The Department of Health & Human Services has issued two final rules regarding the use of electronic health record requirements. One rule is titled “2015 Edition Health Information Technology Certification Criteria, 2015 Edition Base Electronic Health Record Definition, and ONC Health IT Certification Program Modifications.” The other is CMS’ Electronic Health Record Incentive Program — Stage 3 and Modifications to Meaningful Use in 2015 through 2017.”

Both rules are scheduled for publication in the *Federal Register* on Oct. 16. The CMS rule is currently available at: <https://s3.amazonaws.com/public-inspection.federalregister.gov/2015-25595.pdf>.

COMMENT

Both rules are extensive and complex. The CMS version is some 752 pages. While CMS says the rule is simplifying many EHR requirements, the process to be a meaningful EHR user is still troublesome to navigate.

The process of developing rule’s continues to grow. Much history and other details clouds the bottom line of changes and requirements. CMS has provided six tables that summarize the changes. The following material relates to the CMS rule.

BASICS AS REPORTED BY CMS

CMS says it reviewed and considered more than 2,500 comments to create the final policies, with an opportunity for additional comment. CMS says it has made significant changes to ease reporting burden for all providers, supporting health information exchange, and improving patient outcomes. For example, the regulations:

- “Shift the paradigm so health IT becomes a **tool for care improvement**, not an end in itself.
- “Provide **simplicity and flexibility** so that providers can choose measures that use in their practices and report progress that are most meaningful to their practice.
- “Give providers and state Medicaid agencies more time – 27 months, until January 1, 2018 - to comply with the new requirements and prepare for the next set of system improvements.
- “Give developers **more time** to create the next advancements in technology that will be easier to use and more appropriate to new models of care and access to data by consumers.
- “Support **provider exchange of health information** and a more useful interoperable infrastructure for information exchange between providers and with patients.

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continued

- “Give developers more time to create the next advancements in technology that will be easier to use and more appropriate to new models of care and access to data by consumers.
- “**Address health information blocking** and interoperability between providers and with patients.”

For the EHR incentive programs in 2015 through 2017, major provisions include:

- Ten objectives for eligible professionals including one public health reporting objective, down from 18 total objectives in prior stages.
- Nine objectives for eligible hospitals and critical access hospitals including one public health reporting objective, down from 20 total objectives in prior stages.
- Clinical Quality Measures reporting for both eligible professionals and eligible hospitals/CAHs remains as previously finalized.

CMS says it evaluated the current programs and identified areas where modifications could be made to align with the long-term vision and goals for Stage 3. CMS restructured the objectives and measures of the EHR incentive programs in 2015 through 2017 to align with Stage 3, and modified “patient action” measures in Stage 2 objectives. These changes recognize the progress providers have made and realign with long term goals.

For Stage 3 of the EHR Incentive Programs in 2017 and subsequent years, major provisions include:

- Eight objectives for eligible professionals, eligible hospitals, and CAHs: In Stage 3, more than 60 percent of the proposed measures require interoperability, up from 33 percent in Stage 2.

- Public health reporting with flexible options for measure selection.
- CQM reporting aligned with the CMS quality reporting programs.
- Finalize the use of application program interfaces that enable the development of new functionalities to build bridges across systems and provide increased data access. This will help patients have unprecedented access to their own health records, empowering individuals to make key health decisions.

The Stage 3 requirements are optional in 2017. Providers who choose to begin Stage 3 in 2017 will have a 90-day reporting period. All providers will be required to comply with Stage 3 requirements beginning in 2018 using EHR technology certified to the 2015 Edition. Objectives and measures for Stage 3 include increased thresholds, advanced use of health information exchange functionality, and an overall focus on continuous quality improvement.

In addition, CMS says the final rule adopts flexible reporting periods that are aligned with other programs to reduce burden, including moving from fiscal year to calendar year reporting for all providers beginning in 2015, and offering a 90-day reporting period in 2015 for all providers, for new participants in 2016 and 2017, and for any provider moving to Stage 3 in 2017.

Tables

CMS has provided tables (Tables 11 through 16), which have been developed in conjunction with ONC of the technology requirements that support the CEHRT definition and each measure of this final rule.

The tables presented below are in order by provider group. The tables in the final rule begin on page 477 of the display copy.

Table 12: Eligible Hospital and CAH Objectives, Measures, and Certification Criteria for 2015 Through 2017				
Objective	Measure(s)	2014 Edition	2015 Edition	Additional Considerations
Objective 1: Protect Patient Health Information	Measure: --Conduct or review a security risk analysis in accordance with the requirements in 45 CFR 164.308(a)(1), including addressing the security (to include encryption) of data stored in CEHRT in accordance with requirements in 45 CFR 164.312(a)(2)(iv) and 45 CFR 164.306(d)(3), and implement security updates as necessary and correct identified security deficiencies as part of the eligible hospital or CAH's risk management process.	The requirements are included in the Base EHR Definition	The requirements are a part of CEHRT specific to each certification criterion	The requirements are a part of CEHRT specific to each certification criterion
Objective 2: Clinical Decision Support	Measure 1: -- Implement five clinical decision support interventions related to four or more clinical quality measures at a relevant point in patient care for the entire EHR reporting period.	§ 170.314(a)(8) (Clinical Decision Support)	§ 170.315(a)(9) (Clinical Decision)	N/A
	Measure 2: -- The eligible hospital or CAH has enabled and implemented the functionality for drug-drug and drug-allergy interaction checks for the entire EHR reporting period.	§ 170.314(a)(2) (Drug-drug, Drug-Allergy Interaction Checks)	§ 170.315(a)(4) (Drug-drug, Drug-Allergy Interaction Checks for CPOE)	N/A
Objective 3: Computerized Provider Order Entry CPOE	Measure 1: -- More than 60% of medication orders created by authorized providers of the eligible hospital's or CAH's inpatient or emergency department (POS 21 or 23) during the EHR reporting period are recorded using CPOE.	§ 170.314(a)(1) (Computerized Provider Order Entry) or §170.314(a)(18) (Optional – Computerized Provider Order Entry – Medications)	§ 170.315(a)(1) (Computerized Provider Order Entry - Medications)	N/A
	Measure 2: -- More than 30% of laboratory orders created by authorized providers of the eligible hospital's or CAH's inpatient or emergency department (POS 21 or 23) during the EHR reporting period are recorded using CPOE.	§ 170.314(a)(1) (Computerized Provider Order Entry) or § 170.314(a)(19) (Optional – Computerized Provider Order Entry – Laboratory)	§ 170.315(a)(2) (Computerized Provider Order Entry - Laboratory)	N/A

Table 12: Eligible Hospital and CAH Objectives, Measures, and Certification Criteria for 2015 Through 2017

Objective	Measure(s)	2014 Edition	2015 Edition	Additional Considerations
Objective 3: Computerized Provider Order Entry CPOE (cont.)	Measure 3: -- More than 30% of radiology orders created by authorized providers of the eligible hospital's or CAH's inpatient or emergency department (POS 21 or 23) during the EHR reporting period are recorded using CPOE.	§ 170.314(a)(1) (Computerized Provider Order Entry) or §170.314(a)(20) (Optional – Computerized Provider Order Entry – Diagnostic Imaging)	§ 170.315(a)(3) (Computerized Provider Order Entry – Diagnostic Imaging)	N/A
Objective 4: Electronic Prescribing	Measure: -- More than 10% of hospital discharge medication orders for permissible prescriptions (for new or changed prescriptions) are queried for a drug formulary and transmitted electronically using CEHRT.	§ 170.314(b)(3) (Electronic Prescribing) §170.314(a)(10) (Drug-Formulary and Preferred Drug List Checks)	§ 170.315(b)(3) (Electronic Prescribing) § 170.315(a)(10) (Drug-Formulary and Preferred Drug List Checks)	Eligible hospitals and CAHs may use a combination of technologies certified to either the 2014 Edition or 2015 Edition.
Objective 5: Health Information Exchange	Measure: -- The eligible hospital or CAH that transitions or refers their patient to another setting of care or provider of care (1) uses CEHRT to create a summary of care record; and (2) electronically transmits such summary to a receiving provider for more than 10 % of transitions of care and referrals.	§170.314(b)(2) (Transitions of Care-Create and Transmit Transition of Care/Referral Summaries) or §170.314(b)(8) (Optional - Transitions of care)	§ 170.315(b)(1) (Transitions of Care)	N/A
Objective 6: Patient-Specific Education	Measure: -- More than 10% of all unique patients admitted to the eligible hospitals or CAH's inpatient or emergency department (POS 21 or 23) are provided patient specific education resources identified by CEHRT.	§170.314(a)(15) (Patient-Specific Education Resources)	§ 170.315(a)(13) (Patient-Specific Education Resources)	N/A
Objective 7: Medication Reconciliation	Measure: -- The eligible hospital or CAH performs medication reconciliation for more than 50% of transitions of care in which the patient is admitted to the eligible hospital's or CAH's inpatient or emergency department (POS 21 or 23).	§170.314(b)(4) (Clinical Information Reconciliation) or §170.314(b)(9) (Optional – Clinical Information Reconciliation and Incorporation)	§ 170.315(b)(2) (Clinical Information Reconciliation and Incorporation)	N/A

Table 12: Eligible Hospital and CAH Objectives, Measures, and Certification Criteria for 2015 Through 2017

Objective	Measure(s)	2014 Edition	2015 Edition	Additional Considerations
Objective 8: Patient Electronic Access (VDT)	Measure 1: -- More than 50% of all unique patients who are discharged from the inpatient or emergency department (POS 21 or 23) of an eligible hospital or CAH are provided timely access to view online, download and transmit their health information to a third party their health information.	§ 170.314(e)(1) (View, Download, and Transmit to 3rd Party)	§ 170.315(e)(1) (View, Download, and Transmit to 3rd Party)	N/A
	Measure 2: -- For 2015 and 2016: At least 1 patient who is discharged from the inpatient or emergency department (POS 21 or 23) of an eligible hospital or CAH (or his or her authorized representative) views, downloads, or transmits to a third party his or her information during the EHR reporting period. For 2017: More than 5% of unique patients discharged from the inpatient or emergency department (POS 21 or 23) of an eligible hospital or CAH (or his or her authorized representative) view, download, or transmit to a third party their information during the EHR reporting period.	§ 170.314(e)(1) (View, Download, and Transmit to 3rd Party)	§ 170.315(e)(1) (View, Download, and Transmit to 3rd Party)	N/A
Objective 9: Secure Messaging	NA	N/A	N/A	N/A
Objective 10: Public Health Reporting	Measure 1-- Immunization Registry Reporting.	§ 170.314(f)(1) (Immunization Information) and § 170.314(f)(2) (Transmission to Immunization Registries)	N/A	N/A
	Measure 2 -- Syndromic Surveillance Reporting.	§ 170.314(f)(3) (Transmission to Public Health Agencies – Syndromic Surveillance)	§ 170.315(f)(2) (Transmission to Public Health Agencies – Syndromic Surveillance)	N/A

Table 12: Eligible Hospital and CAH Objectives, Measures, and Certification Criteria for 2015 Through 2017

Objective	Measure(s)	2014 Edition	2015 Edition	Additional Considerations
	Measure 3 -- Specialized Registry Reporting.	N/A	Eligible Hospitals/CAHs may choose one or more of the following: § 170.315(f)(5) (Transmission to Public Health Agencies – Electronic Case Reporting) § 170.315(f)(6) Transmission to Public Health Agencies – Antimicrobial Use and Resistance Reporting § 170.315(f)(7) Transmission to Public Health Agencies – Health Care Surveys	Certified EHR technology is not required for specialized registry reporting for 2015-2017, but EHR technology certified to the 2014 Edition or 2015 Edition may be used. Other non-named specialized registries unsupported by certification requirements may also be chosen.
	Measure 4 – Electronic Reportable Laboratory Result Reporting.	§ 170.314(f)(4) (Inpatient Setting Only – Transmission of Reportable Laboratory Tests and Values/Results	§ 170.315(f)(3) (Transmission to Public Health Agencies – Reportable Laboratory Tests and Values/Results)	N/A

Table 14: Eligible Hospital/CAH Objectives, Measures, and Certification Criteria for Stage 3 in 2017

Objective	Measure(s)	2014 Edition	2015 Edition	Additional Considerations
Objective 1: Protect Electronic Health Information	Measure: -- Conduct or review a security risk analysis in accordance with the requirements in 45 CFR 164.308(a) (1), including addressing the security (to include encryption) of ePHI data created or maintained by CEHRT in accordance with requirements in 45 CFR 164.312(a)(2)(iv) and 45 CFR 164.306(d)(3), and implement security updates as necessary and correct identified security deficiencies as part of the provider’s risk management process.	The requirements are included in the Base EHR Definition	The requirements are a part of CEHRT specific to each certification criterion	The requirements are a part of CEHRT specific to each certification criterion

Table 14: Eligible Hospital/CAH Objectives, Measures, and Certification Criteria for Stage 3 in 2017

Objective	Measure(s)	2014 Edition	2015 Edition	Additional Considerations
Objective 2: Electronic Prescribing	Measure: -- More than 25% of hospital discharge medication orders for permissible prescriptions (for new and changed prescriptions) are queried for a drug formulary and transmitted electronically using CEHRT.	§ 170.314(b)(3) (Electronic Prescribing) § 170.314(a)(10) (Drug- Formulary and Preferred Drug List Checks)	§ 170.315(b)(3) (Electronic Prescribing) § 170.315(a)(10) (Drug-Formulary and Preferred Drug List Checks)	Eligible Hospitals/ CAHs may use a combination of technologies certified to either the 2014 Edition or 2015 Edition.
Objective 3: Clinical Decision Support	Measure 1: -- The eligible hospital or CAH must implement five clinical decision support interventions related to four or more CQMs at a relevant point in patient care for the entire EHR reporting period.	§170.314(a)(8) (Clinical Decision Support)	§ 170.315(a)(9) (Clinical Decision Support)	N/A
	Measure 2: -- The eligible hospital or CAH has enabled and implemented the functionality for drug-drug and drug-allergy interaction checks for the entire EHR reporting period.	§170.314(a)(2) (Drug-Drug, Drug-Allergy Interaction Checks)	§ 170.315(a)(4) (Drug-Drug, Drug-Allergy Interaction Checks for CPOE)	N/A
Objective 4: Computerized Provider Order Entry (CPOE)	Measure 1: -- More than 60% of medication orders created by the authorized providers of the eligible hospital's or CAH's inpatient or emergency department (POS 21 or 23) during the EHR reporting period are recorded using CPOE.	§170.314(a)(1) (Computerized Provider Order Entry) or §170.314(a)(18) (Optional – Computerized Provider Order Entry – Medications)	§170.315(a)(1) (Computerized Provider Order Entry – Medications)	N/A
	Measure 2: -- More than 60% of laboratory orders created by the authorized providers of the eligible hospital's or CAH's inpatient or emergency department (POS 21 or 23) during the EHR reporting period are recorded using CPOE.	§170.314(a)(1) (Computerized Provider Order Entry) or §170.314(a)(19) (Optional – Computerized Provider Order Entry – Laboratory)	§170.315(a)(2) (Computerized Provider Order Entry – Laboratory)	N/A
	Measure 3: -- More than 60% of diagnostic imaging orders created by the authorized providers of the eligible hospital's or CAH's inpatient or emergency department (POS 21 or 23) during the EHR reporting period are recorded using CPOE.	§170.314(a)(1) (Computerized Provider Order Entry) or §170.314(a)(20) (Optional – Computerized Provider Order Entry – Diagnostic Imaging)	§170.315(a)(3) (Computerized Provider Order Entry – Diagnostic Imaging)	N/A

Table 14: Eligible Hospital/CAH Objectives, Measures, and Certification Criteria for Stage 3 in 2017

Objective	Measure(s)	2014 Edition	2015 Edition	Additional Considerations
Objective 5: Patient Electronic Access	Measure 1: For more than 80% of all unique patients discharged from the eligible hospital or CAH inpatient or emergency department (POS 21 or 23): (1) The patient (or the patient authorized representative) is provided timely access to view online, download, and transmit his or her health information.; and (2) The provider ensures the patient’s health information is available for the patient (or patient-authorized representative) to access using any application of their choice that is configured to meet the technical specifications of the API in the provider’s CEHRT.	§170.314(e)(1) (View, Download, and Transmit to 3rd Party)	§ 170.315(e)(1) (View, Download, and Transmit to 3rd Party) §170.315(g)(7)* (Application Access – Patient Selection) §170.315(g)(8)* (Application Access – Data Category Request)* §170.315(g)(9) (Application Access – All Data Request)* *The three criteria combined are the “API”	Eligible Hospitals/CAHs may use technologies certified to either the 2014 Edition or 2015 Edition VDT certification criteria (i.e., §170.314(e)(1) or §170.315(e)(1) in 2017). The 2014 Edition does not offer “API” certification criteria. Therefore, Eligible Hospitals/CAHs choosing to attest to the Stage 3 measures in 2017 would need to possess technology certified to §170.315(g)(7), §170.315(g)(8), and §170.315(g)(9).
	Measure 2: -- The eligible hospital or CAH must use clinically relevant information from CEHRT to identify patient-specific educational resources and provide electronic access to those materials to more than 35% of unique patients discharged from the eligible hospital or CAH inpatient or emergency department (POS 21 or 23) during the EHR reporting period.	§170.314(a)(15) (Patient-Specific Education Resources)	§ 170.315(a)(13) (Patient-Specific Education Resources)	N/A

Table 14: Eligible Hospital/CAH Objectives, Measures, and Certification Criteria for Stage 3 in 2017

Objective	Measure(s)	2014 Edition	2015 Edition	Additional Considerations
Objective 6: Coordination of Care through Patient Engagement	<p>Measure 1: -- During the EHR reporting period, more than 10% of all unique patients (or their authorized representatives) discharged from the eligible hospital or CAH inpatient or emergency department (POS 21 or 23) actively engage with the EHR made accessible by the provider and either:</p> <p>(1) view, download or transmit to a third party their health information; or (2) access their health information through the use of an API that can be used by applications chosen by the patient and configured to the API in the provider’s CEHRT; or (3) a combination of (1) and (2).</p>	§170.314(e)(1) (View, Download, and Transmit to 3rd Party)	<p>§ 170.315(e)(1) (View, Download, and Transmit to 3rd Party) § 170.315(g)(7) (Application Access – Patient Selection)* § 170.315(g)(8) (Application Access – Data Category Request)* §170.315(g)(9) (Application Access – All Data Request)*</p> <p>*The three criteria combined are the “API” certification criteria</p>	<p>Eligible Hospitals/CAHs may use technologies certified to either the 2014 Edition or 2015 Edition VDT certification criteria (i.e., §170.314(e)(1) or §170.315(e)(1)) in 2017.</p> <p>The 2014 Edition does not offer “API” certification criteria.</p> <p>Therefore, Eligible Hospitals/CAHs choosing to attest to the Stage 3 measures in 2017 would need to possess technology certified to §170.315(g)(7), §170.315(g)(8), and §170.315(g)(9).</p>
	<p>Measure 2: -- For more than 25% of all unique patients discharged from the eligible hospital or CAH inpatient or emergency department (POS 21 or 23) during the EHR reporting period, a secure message was sent using the electronic messaging function of CEHRT to the patient (or the patient-authorized representative), or in response to a secure message sent by the patient (or the patient-authorized representative) during the EHR reporting period.</p>	§170.314(e)(3) (Secure Messaging)	§ 170.315(e)(2) (Secure Messaging)	N/A

Table 14: Eligible Hospital/CAH Objectives, Measures, and Certification Criteria for Stage 3 in 2017

Objective	Measure(s)	2014 Edition	2015 Edition	Additional Considerations
	Measure 3: -- Patient-generated health data or data from a non-clinical setting is incorporated into the CEHRT for more than 5% of all unique patients discharged from the eligible hospital or CAH (POS 21 and 23) during the EHR reporting period.	N/A	§ 170.315(e)(3) (Patient Health Information Capture)* *Supports meeting the measure, but is NOT required to be used to meet the measure. The certification criterion is part of the CEHRT definition beginning in 2018.	N/A
Objective 7: Health Information Exchange	Measure 1: -- For more than 50% of transitions of care and referrals, the eligible hospital or CAH that transitions or refers their patient to another setting of care or provider of care-- (1) creates a summary of care record using CEHRT; and (2) electronically exchanges the summary of care record.	§170.314(b)(2) (Transitions of Care – Create and Transmit Transition of Care/Referral Summaries) or §170.314(b)(8) (Optional – Transitions of Care)	§ 170.315(b)(1) (Transitions of Care)	N/A
	Measure 2: For more than 40% of transitions or referrals received and patient encounters in which the provider has never before encountered the patient, the eligible hospital or CAH receives or retrieves and incorporates into the patient’s record in their EHR an electronic summary of care document.	§170.314(b)(1) (Transitions of Care – Receive, Display and Incorporate Transition of Care/Referral Summaries) or §170.314(b)(8) (Optional – Transitions of Care)	§ 170.315(b)(1) (Transitions of Care)	N/A
	Measure 3: -- For more than 80% of transitions or referrals received and patient encounters in which the provider has never before encountered the patient, the eligible hospital or CAH performs clinical information reconciliation.	§170.314(b)(4) (Clinical Information Reconciliation) or §170.314(b)(9) (Optional – Clinical Information Reconciliation and Incorporation)	§ 170.315(b)(2) (Clinical Information Reconciliation and	N/A

Table 14: Eligible Hospital/CAH Objectives, Measures, and Certification Criteria for Stage 3 in 2017

Objective	Measure(s)	2014 Edition	2015 Edition	Additional Considerations
Objective 8: Public Health and Clinical Data Registry Reporting	Measure 1: Immunization Registry Reporting	N/A	§ 170.315(f)(1) (Transmission to Immunization Registries)	N/A
	Measure 2: Syndromic Surveillance	§ 170.314(f)(3) (Transmission to Public Health Agencies – Syndromic Surveillance)	§ 170.315(f)(2) (Transmission to Public Health Agencies – Syndromic Surveillance)	N/A
	Measure 3: Electronic Case Reporting	N/A	§ 170.315(f)(5) (Transmission to Public Health Agencies – Electronic Case Reporting)	N/A
	Measure 4: Public Health Registry Reporting	N/A	Eligible Hospitals/CAHs may choose one or more of the following: § 170.315(f)(6) (Transmission to Public Health Agencies – Antimicrobial Use and Resistance) § 170.315(f)(7) (Transmission to Public Health Agencies – Health Care Surveys)	EPs may choose to use technologies certified to either the 2014 Edition or 2015 Edition certification criteria in 2017.
	Measure 5: Clinical Data Registry Reporting	§ 170.314(f)(4) (Inpatient Setting Only – Transmission of Reportable Laboratory Tests and Values/Results)	§ 170.315(f)(3) (Transmission to Public Health Agencies – § 170.315(f)(3) (Transmission to Public Health Agencies –	N/A

Table 16: Eligible Hospital/CAH Objectives, Measures, and Certification Criteria For Stage 3 In 2018 And Subsequent Years

Objective	Measure(s)	2015 Edition
Objective 1: Protect Electronic Health Information	Measure: Conduct or review a security risk analysis in accordance with the requirements in 45 CFR 164.308(a)(1), including addressing the security (to include encryption) of ePHI data created or maintained by CEHRT in accordance with requirements in 45 CFR 164.312(a)(2) (iv) and 45 CFR 164.306(d)(3), and implement security updates as necessary and correct identified security deficiencies as part of the provider’s risk management process.	The requirements are a part of CEHRT specific to each certification criterion
Objective 2: Electronic Prescribing	Measure: More than 25% of hospital discharge medication orders for permissible prescriptions (for new and changed prescriptions) are queried for a drug formulary and transmitted electronically using CEHRT.	§ 170.315(b)(3) (Electronic Prescribing) § 170.315(a)(10) (Drug-Formulary and Preferred Drug List Checks)
Objective 3: Clinical Decision Support	Measure 1: The eligible hospital or CAH must implement five clinical decision support interventions related to four or more CQMs at a relevant point in patient care for the entire EHR reporting period.	§ 170.315(a)(9) (Clinical Decision Support)
	Measure 2: The eligible hospital or CAH has enabled and implemented the functionality for drug-drug and drug-allergy interaction checks for the entire EHR reporting period.	§ 170.315(a)(4) (Drug-Drug, Drug-Allergy Interaction Checks for CPOE)
Objective 4: Computerized Provider Order Entry (CPOE)	Measure 1: More than 60% of medication orders created by the authorized providers of the eligible hospital’s or CAH’s inpatient or emergency department (POS 21 or 23) during the EHR reporting period are recorded using CPOE.	§170.315(a)(1) (Computerized Provider Order Entry – Medications)
	Measure 2: More than 60% of laboratory orders created by the authorized providers of the eligible hospital’s or CAH’s inpatient or emergency department (POS 21 or 23) during the EHR reporting period are recorded using CPOE.	§170.315(a)(2) (Computerized Provider Order Entry – Laboratory)
	Measure 3: More than 60% of diagnostic imaging orders created by the authorized providers of the eligible hospital’s or CAH’s inpatient or emergency department (POS 21 or 23) during the EHR reporting period are recorded using CPOE.	§170.315(a)(3) (Computerized Provider Order Entry–Diagnostic Imaging)

Table 16: Eligible Hospital/CAH Objectives, Measures, and Certification Criteria For Stage 3 In 2018 And Subsequent Years

Objective	Measure(s)	2015 Edition
<p>Objective 5: Patient Electronic Access</p>	<p>Measure 1: For more than 80% of all unique patients discharged from the eligible hospital or CAH inpatient or emergency department (POS 21 or 23):</p> <p>(1) The patient (or the patient authorized representative) is provided timely access to view online, download, and transmit his or her health information.; and</p> <p>(2) The provider ensures the patient’s health information is available for the patient (or patient-authorized representative) to access using any application of their choice that is configured to meet the technical specifications of the API in the provider’s CEHRT</p>	<p>§ 170.315(e)(1) (View, Download, and Transmit to 3rd Party)</p> <p>§170.315(g)(7)* (Application Access – Patient Selection)</p> <p>§170.315(g)(8)* (Application Access – Data Category Request)*</p> <p>§170.315(g)(9) (Application Access – All Data Request)*</p> <p>*The three criteria combined are the “API” certification criteria</p>
	<p>Measure 2: The eligible hospital or CAH must use clinically relevant information from CEHRT to identify patient-specific educational resources and provide electronic access to those materials to more than 35% of unique patients discharged from the eligible hospital or CAH inpatient or emergency department (POS 21 or 23) during the EHR reporting period.</p>	<p>§ 170.315(a)(13) (Patient-Specific Education Resources)</p>
<p>Objective 6: Coordination of Care through Patient Engagement</p>	<p>Measure 1: During the EHR reporting period, more than 10% of all unique patients (or their authorized representatives) discharged from the eligible hospital or CAH inpatient or emergency department (POS 21 or 23) actively engage with the EHR made accessible by the provider and either:</p> <p>(1) view, download or transmit to a third party their health information; or</p> <p>(2) access their health information through the use of an API that can be used by applications chosen by the patient and configured to the API in the provider’s CEHRT; or</p> <p>(3) a combination of (1) and (2).</p>	<p>§ 170.315(e)(1) (View, Download, and Transmit to 3rd Party)</p> <p>§ 170.315(g)(7) (Application Access – Patient Selection)*</p> <p>§ 170.315(g)(8) (Application Access – Data Category Request)*</p> <p>§170.315(g)(9) (Application Access – All Data Request)*</p> <p>*The three criteria combined are the “API” certification criteria</p>
	<p>Measure 2: For more than 25% of all unique patients discharged from the eligible hospital or CAH inpatient or emergency department (POS 21 or 23) during the EHR reporting period, a secure message was sent using the electronic messaging function of CEHRT to the patient (or the patient-authorized representative), or in response to a secure message sent by the patient (or the patient-authorized representative) during the EHR reporting period.</p>	<p>§ 170.315(e)(2) (Secure Messaging)</p>

Table 16: Eligible Hospital/CAH Objectives, Measures, and Certification Criteria For Stage 3 In 2018 And Subsequent Years

Objective	Measure(s)	2015 Edition
Objective 6: Coordination of Care through Patient Engagement (cont.)	Measure 3: Patient-generated health data or data from a non-clinical setting is incorporated into the CEHRT for more than 5% of all unique patients discharged from the eligible hospital or CAH (POS 21 and 23) during the EHR reporting period.	§ 170.315(e)(3) (Patient Health Information Capture)* *Supports meeting the measure, but is NOT required to be used to meet the measure. The certification criterion is part of the CEHRT definition beginning in 2018.
Objective 7: Health Information Exchange	Measure 1: For more than 50% of transitions of care and referrals, the eligible hospital or CAH that transitions or refers their patient to another setting of care or provider of care-- (1) creates a summary of care record using CEHRT; and (2) electronically exchanges the summary of care record.	§ 170.315(b)(1) (Transitions of Care)
	Measure 2: For more than 40% of transitions or referrals received and patient encounters in which the provider has never before encountered the patient, the eligible hospital or CAH receives or retrieves and incorporates into the patient’s record in their EHR an electronic summary of care document.	§ 170.315(b)(1) (Transitions of Care)
	Measure 3: For more than 80% of transitions or referrals received and patient encounters in which the provider has never before encountered the patient, the eligible hospital or CAH performs clinical information reconciliation.	§ 170.315(b)(2) (Clinical Information Reconciliation and Incorporation)
Objective 8: Public Health and Clinical Data Registry Reporting	Measure 1: Immunization Registry Reporting	§ 170.315(f)(1) (Transmission to Immunization Registries)
	Measure 2: Syndromic Surveillance Reporting	§ 170.315(f)(2) (Transmission to Public Health Agencies – Syndromic Surveillance)
	Measure 3: Electronic Case Reporting	§ 170.315(f)(5) (Transmission to Public Health Agencies – Electronic Case Reporting)

Table 16: Eligible Hospital/CAH Objectives, Measures, and Certification Criteria For Stage 3 In 2018 And Subsequent Years

Objective	Measure(s)	2015 Edition
Objective 8: Public Health and Clinical Data Registry Reporting (cont.)	Measure 4: Public Health Registry Reporting	Eligible Hospitals/CAHs may choose one or more of the following: § 170.315(f)(6) (Transmission to Public Health Agencies – Antimicrobial Use and Resistance) § 170.315(f)(7) (Transmission to Public Health Agencies – Health Care Surveys)
	Measure 5: Clinical Data Registry Reporting	No 2015 Edition health IT certification criteria at this time.
	Measure 6: Electronic Reportable Laboratory Result Reporting	§ 170.315(f)(3) (Transmission to Public Health Agencies – Reportable Laboratory Tests and Values/Results)

Table 11: EP Objectives, Measures, and Certification Criteria for 2015 Through 2017

Objective	Measure(s)	2014 Edition	2015 Edition	Additional Considerations
Objective 1: Protect Patient Health Information	Measure: -- Conduct or review a security risk analysis in accordance with the requirements in 45 CFR 164.308(a)(1), including addressing the security (to include encryption) of ePHI created or maintained in Certified EHR Technology in accordance with requirements in 45 CFR 164.312(a)(2)(iv) and 45 CFR 164.306(d)(3), and implement security updates as necessary and correct identified security deficiencies as part of the EP's risk management process.	The requirements are included in the Base EHR Definition	The requirements are a part of CEHRT specific to each certification criterion	The requirements are a part of CEHRT specific to each certification criterion
Objective 2: Clinical Decision Support	Measure 1: -- Implement five clinical decision support interventions related to four or more clinical quality measures at a relevant point in patient care for the entire EHR reporting period.	§ 170.314(a)(8) (Clinical Decision Support)	§ 170.315(a)(9) (Clinical Decision Support)	N/A
	Measure 2: -- The EP has enabled and implemented the functionality for drug-drug and drug-allergy interaction checks for the entire EHR reporting period.	§ 170.314(a)(2) (Drug-drug, Drug-Allergy Interaction Checks)	§ 170.315(a)(4) (Drug-drug, Drug-Allergy Interaction Checks for CPOE)	N/A

Table 11: EP Objectives, Measures, and Certification Criteria for 2015 Through 2017

Objective	Measure(s)	2014 Edition	2015 Edition	Additional Considerations
Objective 3: Computerized Provider Order Entry CPOE	Measure 1: -- More than 60% of medication orders created by the EP during the EHR reporting period are recorded using CPOE.	§ 170.314(a)(1) (Computerized Provider Order Entry) or § 170.314(a)(18) (Optional – Computerized Provider Order Entry – Medications)	§ 170.315(a)(1) (Computerized Provider Order Entry - Medications)	N/A
	Measure 2: -- More than 30% of laboratory orders created by the EP during the EHR reporting period are recorded using CPOE.	§ 170.314(a)(1) (Computerized Provider Order Entry) or § 170.314(a)(19) (Optional – Computerized Provider Order Entry – Laboratory)	§ 170.315(a)(2) (Computerized Provider Order Entry - Laboratory)	N/A
	Measure 3: -- More than 30% of radiology orders created by the EP during the EHR reporting period are recorded using CPOE.	§ 170.314(a)(1) (Computerized Provider Order Entry) or §170.314(a)(20) (Optional – Computerized Provider Order Entry – Diagnostic Imaging)	§ 170.315(a)(3) (Computerized Provider Order Entry – Diagnostic Imaging)	N/A
Objective 4: Electronic Prescribing	Measure: -- More than 50% of all permissible prescriptions written by the EP are queried for a drug formulary and transmitted electronically using CEHRT.	§ 170.314(b)(3) (Electronic Prescribing) § 170.314(a)(10) (Drug- Formulary and Preferred Drug List Checks)	§ 170.315(b)(3) (Electronic Prescribing) § 170.315(a)(10) (Drug- Formulary and Preferred Drug List Checks)	EPs may use a combination of technologies certified to either the 2014 Edition or 2015 Edition.

Table 11: EP Objectives, Measures, and Certification Criteria for 2015 Through 2017

Objective	Measure(s)	2014 Edition	2015 Edition	Additional Considerations
Objective 5: Health Information Exchanges.	Measure: -- The EP that transitions or refers their patient to another setting of care or provider of care (1) uses CEHRT to create a summary of care record; and (2) electronically transmits such summary to a receiving provider for more than 10% of transitions of care and referrals.	§ 170.314(b)(2) (Transitions of Care-Create and Transmit Transition of Care/Referral Summaries) or § 170.314(b)(8) (Optional - Transitions of care)	§ 170.315(b)(1) (Transitions of Care)	N/A
Objective 6: Patient-Specific Education	Measure: -- Patient-specific education resources identified by CEHRT are provided to patients for more than 10 % of all unique patients with office visits seen by the EP during the EHR reporting period.	§170.314(a)(15) (Patient-Specific Education Resources)	§170.315(a)(13) (Patient-Specific Education Resources)	N/A
Objective 7: Medication Reconciliation	Measure: -- The EP performs medication reconciliation for more than 50% of transitions of care in which the patient is transitioned into the care of the EP.	§ 170.314(b)(4) (Clinical Information Reconciliation) or § 170.314(b)(9) (Optional – Clinical Information Reconciliation and Incorporation)	§ 170.315(b)(2) (Clinical Information Reconciliation and Incorporation)	N/A
Objective 8: Patient Electronic Access (VDT)	Measure 1: -- More than 50% of all unique patients seen by the EP during the EHR reporting period are provided timely access to view online, download, and transmit to a third party their health information subject to the EP's discretion to withhold certain information.	§ 170.314(e)(1) (View, Download, and Transmit to 3rd Party)	§ 170.315(e)(1) (View, Download, and Transmit to 3rd Party)	N/A
	Measure 2: -- For 2015 and 2016: At least one patient seen by the EP during the EHR reporting period (or his or her authorized representatives) views, downloads, or transmits his or her health information to a third party, during the EHR reporting period. For 2017: More than 5% of unique patients seen by the EP during the EHR reporting period (or their authorized representatives) views, downloads, or transmits their health information to a third party, during the EHR reporting period.	§ 170.314(e)(1) (View, Download, and Transmit to 3rd Party)	§ 170.315(e)(1) (View, Download, and Transmit to 3rd Party)	N/A

Table 11: EP Objectives, Measures, and Certification Criteria for 2015 Through 2017

Objective	Measure(s)	2014 Edition	2015 Edition	Additional Considerations
Objective 9: Secure Messaging	<p>Measure: -- For 2015: During the EHR reporting period the capability for patients to send and receive a secure electronic message with the EP was fully enabled.</p> <p>For 2016: For at least 1 patient seen by the EP during the EHR reporting period, a secure message was sent using the electronic messaging function of CEHRT to the patient (or the patient-authorized representative), or in response to a secure message sent by the patient (or the patient-authorized representative) during the EHR reporting period.</p> <p>For 2017: For more than 5% of unique patients seen by the EP during the EHR reporting period, a secure message was sent using the electronic messaging function of CEHRT to the patient (or the patient-authorized representative), or in response to a secure message sent by the patient (or the patient-authorized representative) during the EHR reporting period.</p>	§ 170.314(e)(3) (Secure Messaging)	§ 170.315(e)(2) (Secure Messaging)	N/A
Objective 10: Public Health Reporting	Measure 1-- Immunization Registry Reporting	§ 170.314(f)(1) (Immunization Information) and § 170.314(f)(2) (Transmission to Immunization Registries)	N/A	N/A
	Measure 2-- Syndromic Surveillance Reporting	§ 170.314(f)(3) (Transmission to Public Health Agencies – Syndromic Surveillance) or § 170.314(f)(7) (Optional – Ambulatory Setting Only – Transmission to Public Health Agencies – Syndromic Surveillance)	§ 170.315(f)(2) (Transmission to Public Health Agencies – Syndromic Surveillance) Urgent Care Settings Only	N/A

Table 11: EP Objectives, Measures, and Certification Criteria for 2015 Through 2017

Objective	Measure(s)	2014 Edition	2015 Edition	Additional Considerations
Objective 10: Public Health Reporting (cont.)	Measure 3-- Specialized Registry Reporting	§ 170.314(f)(5) (Optional – Ambulatory Setting Only – Cancer Case Information) and § 170.314(f)(6) (Optional – Ambulatory Setting Only – Transmission to Cancer Registries)	EPs may choose one or more of the following: § 170.315(f)(5) (Transmission to Public Health Agencies – Electronic Case Reporting) § 170.315(f)(7) (Transmission to Public Health Agencies – Health Care Surveys § 170.315(f)(4) (Transmission to Cancer Registries	Certified EHR technology is not required for specialized registry reporting for 2015-2017, but EHR technology certified to the 2014 Edition or 2015 Edition may be used. Other non-named specialized registries unsupported by certification requirements may also be chosen.

Table 13: EP Objectives, Measures, and Certification Criteria for Stage 3 in 2017

Objective	Measure(s)	2014 Edition	2015 Edition	Combinations
Objective 1: Protect Electronic Health Information	Measure: -- Conduct or review a security risk analysis in accordance with the requirements in 45 CFR 164.308(a)(1), including addressing the security (to include encryption) of ePHI data created or maintained by CEHRT in accordance with requirements in 45 CFR 164.312(a)(2)(iv) and 45 CFR 164.306(d)(3), and implement security updates as necessary and correct identified security deficiencies as part of the provider’s risk management process.	The requirements are included in the Base EHR Definition	The requirements are a part of CEHRT specific to each certification criterion	The requirements are a part of CEHRT specific to each certification criterion
Objective 2: Clinical Decision Support	Measure: -- More than 60% of all permissible prescriptions written by the EP are queried for a drug formulary and transmitted electronically using CEHRT.	§ 170.314(b)(3) (Electronic Prescribing) § 170.314(a)(10) (Drug-Formulary and Preferred Drug List Checks)	§ 170.315(b)(3) (Electronic Prescribing) § 170.315(a)(10) (Drug-Formulary and Preferred Drug List checks)	EPs may use a combination of technologies certified to either the 2014 Edition or 2015 Edition.

Table 13: EP Objectives, Measures, and Certification Criteria for Stage 3 in 2017

Objective	Measure(s)	2014 Edition	2015 Edition	Combinations
Objective 3: Clinical Decision Support	Measure 1: -- The EP must Implement five clinical decision support interventions related to four or more clinical quality measures at a relevant point in patient care for the entire EHR reporting period.	§ 170.314(a)(8) (Clinical Decision Support)	§ 170.315(a)(9) (Clinical Decision Support)	N/A
	Measure 2: -- The EP has enabled and implemented the functionality for drug-drug and drug-allergy interaction checks for the entire EHR reporting period.	§ 170.314(a)(2) (Drug-drug, Drug-Allergy Interaction Checks)	§ 170.315(a)(4) (Drug-drug, Drug-Allergy Interaction Checks for CPOE)	N/A
Objective 4: Computerized Provider Order Entry CPOE	Measure 1: -- More than 60% of medication orders created by the EP during the EHR reporting period are recorded using CPOE.	§ 170.314(a)(1) (Computerized Provider Order Entry) or § 170.314(a)(18) (Optional – Computerized Provider Order Entry – Medications)	§ 170.315(a)(1) (Computerized Provider Order Entry - Medications)	N/A
	Measure 2: -- More than 60% of laboratory orders created by the EP during the EHR reporting period are recorded using CPOE.	§ 170.314(a)(1) (Computerized Provider Order Entry) or § 170.314(a)(19) (Optional – Computerized Provider Order Entry – Laboratory)	§ 170.315(a)(2) (Computerized Provider Order Entry - Laboratory)	N/A
	Measure 3: -- More than 60% of diagnostic imaging orders created by the EP during the EHR reporting period are recorded using CPOE.	§ 170.314(a)(1) (Computerized Provider Order Entry) or §170.314(a)(20) (Optional – Computerized Provider Order Entry – Diagnostic Imaging)	§ 170.315(a)(3) (Computerized Provider Order Entry – Diagnostic Imaging)	N/A

Table 13: EP Objectives, Measures, and Certification Criteria for Stage 3 in 2017

Objective	Measure(s)	2014 Edition	2015 Edition	Combinations
Objective 5: Patient Electronic Access	<p>Measure: 1 -- For more than 80% of all unique patients seen by the EP:</p> <p>(1) The patient (or the patient authorized representative) is provided timely access to view online, download, and transmit his or her health information; and</p> <p>(2) The EP ensures the patient’s health information is available for the patient (or patient-authorized representative) to access using any application of their choice that is configured to meet the technical specifications of the API in the provider’s CEHRT.</p>	§170.314(e)(1) (View, Download, and Transmit to 3rd Party)	<p>§170.315(e)(1) (View, Download, and Transmit to 3rd Party)</p> <p>§170.315(g)(7) (Application Access – Patient Selection)*</p> <p>§170.315(g)(8) (Application Access – Data Category Request)*</p> <p>§170.315(g)(9) (Application Access – All Data Request)*</p> <p>*The three criteria combined are the “API” certification criteria</p>	<p>EPs may use technologies certified to either the 2014 Edition or 2015 Edition VDT certification criteria (i.e., §170.314(e)(1) or §170.315(e)(1) in 2017).</p> <p>The 2014 Edition does not offer “API” certification criteria. Therefore, EPs choosing to attest to the Stage 3 measures in 2017 would need to possess technology certified to §170.315(g)(7), §170.315(g)(8), and §170.315(g)(9).</p>
	<p>Measure 2: -- The EP must use clinically relevant information from CEHRT to identify patient-specific educational resources and provide electronic access to those materials to more than 35% of unique patients seen by the EP</p>	§170.314(a)(15) (Patient-Specific Education Resources)	§ 170.315(a)(13) (Patient-specific Education Resources)	NA

Table 13: EP Objectives, Measures, and Certification Criteria for Stage 3 in 2017

Objective	Measure(s)	2014 Edition	2015 Edition	Combinations
Objective 6: Coordination of Care through Patient Engagement	<p>Measure 1: -- For 2017, during the EHR reporting period, more than 5% of all unique patients(or patient authorized representative) seen by the EP actively engage with the EHR made accessible by the provider. An EP may meet the measure by either-</p> <p>(1) view, download or transmit to a third party their health information; or (2) access their health information through the use of an API that can be used by applications chosen by the patient and configured to the API in the provider’s CEHRT; or (3) a combination of (1) and (2).</p>	§170.314(e)(1) (View, Download, and Transmit to 3rd Party	<p>§170.315(e)(1) (View, Download, and Transmit to 3rd Party)</p> <p>§170.315(g)(7) (Application Access – Patient Selection)*</p> <p>§170.315(g)(8) (Application Access – Data Category Request)*</p> <p>§170.315(g)(9) (Application Access – All Data Request)*</p> <p>*The three criteria combined are the “API” certification criteria</p>	<p>EPs may use a combination of technologies certified to either the 2014 Edition or 2015 Edition VDT certification criteria (i.e., §170.314(e)(1) or §170.315(e)(1)) in 2017.</p> <p>The 2014 Edition does not offer API certification criteria. Therefore, EPs choosing to attest to the Stage 3 measures in 2017 would need to possess technology certified to §170.315(g)(7), §170.315(g)(8), and §170.315(g)(9).</p>
	<p>Measure 2: -- For 2017, more than 5% of all unique patients seen by the EP during the EHR reporting period, a secure message was sent using the electronic messaging function of CEHRT to the patient (or the patient authorized representative), or in response to a secure message sent by the patient (or the patient-authorized representative.</p>	§ 170.314(e)(3) (Secure Messaging)	§ 170.315(e)(2) (Secure Messaging)	N/A

Table 13: EP Objectives, Measures, and Certification Criteria for Stage 3 in 2017

Objective	Measure(s)	2014 Edition	2015 Edition	Combinations
Objective 6: Coordination of Care through Patient Engagement (cont.)	Measure 3: -- Patient-generated health data or data from a nonclinical setting is incorporated into the CEHRT for more than 5 of all unique patients seen by the EP during the EHR reporting period.	N/A	§ 170.315(e)(3) (Patient Health Information Capture)* *Supports meeting the measure, but is NOT required to be used to meet the measure. The certification criterion is part of the CEHRT definition beginning in 2018.	
Objective 7: Health Information Exchanges	Measure 1: -- For more than 50% of transitions of care and referrals, the EP that transitions or refers their patient to another setting of care or provider of care— (1) creates a summary of care record using CEHRT; and (2) electronically exchanges the summary of care record.	§ 170.314(b)(2) (Transitions of Care-Create and Transmit Transition of Care/Referral Summaries) or § 170.314(b)(8) (Optional - Transitions of care)	§ 170.315(b)(1) (Transitions of Care)	N/A
	Measure 2: -- For more than 40% of transitions or referrals received and patient encounters in which the EP has never before encountered the patient, the EP receives or retrieves and incorporates into the patient's record an electronic summary of care document.	§ 170.314(b)(1) (Transitions of Care-Receive, Display and Incorporate Transition of Care/Referral Summaries) or § 170.314(b)(8) (Optional - Transitions of Care)	§ 170.315(b)(1) (Transitions of Care)	N/A

Table 13: EP Objectives, Measures, and Certification Criteria for Stage 3 in 2017

Objective	Measure(s)	2014 Edition	2015 Edition	Combinations
Objective 7: Health Information Exchanges (cont.)	Measure 3: -- For more than 80% of transitions or referrals received and patient encounters in which the EP has never before encountered the patient, the EP performs clinical information reconciliation.	§ 170.314(b)(4) (Clinical Information Reconciliation) or § 170.314(b)(9) (Optional – Clinical Information Reconciliation and Incorporation)	§ 170.315(b)(2) (Clinical Information Reconciliation and	N/A
Objective 8: Public Health and Clinical Data Registry Reporting	Measure 1: -- Immunization Registry Reporting	N/A	§ 170.315(f)(1) (Transmission to Immunization	N/A
	Measure 2: -- Syndromic Surveillance Reporting	§ 170.314(f)(3) (Transmission to Public Health Agencies – Syndromic Surveillance) or § 170.314(f)(7) (Optional – Ambulatory Setting Only – Transmission to Public Health Agencies – Syndromic Surveillance)	§ 170.315(f)(2) (Transmission to Public Health Agencies – Syndromic Surveillance) Urgent Care Setting Only	N/A
	Measure 3: -- Electronic Case Reporting	N/A	§ 170.315(f)(5) (Transmission to Public Health Agencies – Electronic Case Reporting)	N/A
	Measure 4: -- Public Health Registry Reporting	§ 170.314(f)(5) (Optional – Ambulatory Setting Only – Cancer Case Information) and § 170.314(f)(6) (Optional – Ambulatory Setting Only – Transmission to Cancer Registries)	EPs may choose one or more of the following: § 170.315(f)(4) (Transmission to Cancer Registries) § 170.315(f)(7) (Transmission to Public Health Agencies – Health Care Surveys)	EPs may choose to use technologies certified to either the 2014 Edition or 2015 Edition certification criteria in 2017.

Table 13: EP Objectives, Measures, and Certification Criteria for Stage 3 in 2017

Objective	Measure(s)	2014 Edition	2015 Edition	Combinations
Objective 8: Public Health and Clinical Data Registry Reporting (cont.)	Measure 5: -- Clinical Data Registry Reporting	N/A	No 2015 Edition health IT certification criteria at this time.	N/A

Table 15: EP Objectives, Measures, and Certification Criteria for Stage 3 in 2018 and Subsequent Years

Objective	Measure(s)	2015 Edition
Objective 1: Protect Electronic Health Information	Measure: Conduct or review a security risk analysis in accordance with the requirements in 45 CFR 164.308(a)(1), including addressing the security (to include encryption) of ePHI data created or maintained by CEHRT in accordance with requirements in 45 CFR 164.312(a)(2)(iv) and 45 CFR 164.306(d)(3), and implement security updates as necessary and correct identified security deficiencies as part of the provider’s risk management process.	The requirements are a part of CEHRT specific to each certification criterion
Objective 2: Electronic Prescribing	Measure: More than 60% of all permissible prescriptions written by the EP are queried for a drug formulary and transmitted electronically using CEHRT.	§ 170.315(b)(3) (Electronic Prescribing) § 170.315(a)(10) (Drug-Formulary and Preferred Drug List checks)
Objective 3: Clinical Decision Support	Measure 1: The EP must implement five clinical decision support interventions related to four or more CQMs at a relevant point in patient care for the entire EHR reporting period.	§ 170.315(a)(9) (Clinical Decision Support)
	Measure 2: The EP has enabled and implemented the functionality for drug-drug and drug-allergy interaction checks for the entire EHR reporting period.	§ 170.315(a)(4) (Drug-Drug, Drug-Allergy Interaction Checks for CPOE)
Objective 4: Computerized Provider Order Entry (CPOE)	Measure 1: More than 60% of medication orders created by the authorized providers of the eligible hospital’s or CAH’s inpatient or emergency department (POS 21 or 23) during the EHR reporting period are recorded using CPOE.	§170.315(a)(1) (Computerized Provider Order Entry – Medications)
	Measure 2: More than 60% of laboratory orders created by the EP during the EHR reporting period are recorded using CPOE.	§170.315(a)(2) (Computerized Provider Order Entry – Laboratory)
	Measure 3: More than 60% of diagnostic imaging orders created by the EP during the EHR reporting period are recorded using CPOE.	§170.315(a)(3) (Computerized Provider Order Entry–Diagnostic Imaging)

Table 15: EP Objectives, Measures, and Certification Criteria for Stage 3 in 2018 and Subsequent Years

Objective	Measure(s)	2015 Edition
Objective 5: Patient Electronic Access	<p>Measure 1: For more than 80% of all unique patients seen by the EP:</p> <p>(1) The patient (or the patient authorized representative) is provided timely access to view online, download, and transmit his or her health information; and</p> <p>(2) The EP ensures the patient’s health information is available for the patient (or patient-authorized representative) to access using any application of their choice that is configured to meet the technical specifications of the API in the provider’s CEHRT.</p>	<p>§ 170.315(e)(1) (View, Download, and Transmit to 3rd Party)</p> <p>§170.315(g)(7)* (Application Access – Patient Selection)</p> <p>§170.315(g)(8)* (Application Access – Data Category Request)*</p> <p>§170.315(g)(9) (Application Access – All Data Request)*</p> <p>*The three criteria combined are the “API” certification criteria</p>
	<p>Measure 2: The EP must use clinically relevant information from CEHRT to identify patient-specific educational resources and provide electronic access to those materials to more than 35% of unique patients seen by the EP.</p>	<p>§ 170.315(a)(13) (Patient-Specific Education Resources)</p>
Objective 6: Coordination of Care through Patient Engagement	<p>Measure 1: For 2017, during the EHR reporting period, more than 10% of all unique patients (or patient-authorized representative) seen by the EP actively engage with the EHR made accessible by the provider. An EP may meet the measure by either-</p> <p>(1) view, download or transmit to a third party their health information; or</p> <p>(2) access their health information through the use of an API that can be used by applications chosen by the patient and configured to the API in the provider’s CEHRT; or</p> <p>(3) a combination of (1) and (2).</p>	<p>§ 170.315(e)(1) (View, Download, and Transmit to 3rd Party)</p> <p>§ 170.315(g)(7) (Application Access – Patient Selection)*</p> <p>§ 170.315(g)(8) (Application Access – Data Category Request)*</p> <p>§170.315(g)(9) (Application Access – All Data Request)*</p> <p>*The three criteria combined are the “API” certification criteria</p>
	<p>Measure 2: For 2017, more than 25% of all unique patients seen by the EP during the EHR reporting period, a secure message was sent using the electronic messaging function of CEHRT to the patient (or the patient-authorized representative), or in response to a secure message sent by the patient (or the patient-authorized representative).</p>	<p>§ 170.315(e)(2) (Secure Messaging)</p>

Table 15: EP Objectives, Measures, and Certification Criteria for Stage 3 in 2018 and Subsequent Years

Objective	Measure(s)	2015 Edition
Objective 6: Coordination of Care through Patient Engagement (cont.)	Measure 3: Patient-generated health data or data from a non-clinical setting is incorporated into the CEHRT for more than 5 of all unique patients seen by the EP during the EHR reporting period.	§ 170.315(e)(3) (Patient Health Information Capture)* *Supports meeting the measure, but is NOT required to be used to meet the measure. The certification criterion is part of the CEHRT definition beginning in 2018.
Objective 7: Health Information Exchange	Measure 1: For more than 50% of transitions of care and referrals, the EP that transitions or refers their patient to another setting of care or provider of care-- (1) creates a summary of care record using CEHRT; and (2) electronically exchanges the summary of care record.	§ 170.315(b)(1) (Transitions of Care)
	Measure 2: For more than 40% of transitions or referrals received and patient encounters in which the EP has never before encountered the patient, the EP receives or retrieves and incorporates into the patient's record an electronic summary of care document.	§ 170.315(b)(1) (Transitions of Care)
	Measure 3: For more than 80% of transitions or referrals received and patient encounters in which the EP has never before encountered the patient, the EP performs clinical information reconciliation.	§ 170.315(b)(2) (Clinical Information Reconciliation and Incorporation)
Public Health and Clinical Data Registry Reporting	Measure 1: Immunization Registry Reporting	§ 170.315(f)(1) (Transmission to Immunization Registries)
	Measure 2: Syndromic Surveillance Reporting	§ 170.315(f)(2) (Transmission to Public Health Agencies – Syndromic Surveillance) Urgent Care Setting Only
	Measure 3: Electronic Case Reporting	§ 170.315(f)(5) (Transmission to Public Health Agencies – Electronic Case Reporting)
	Measure 4: Public Health Registry Reporting	EPs may choose one or more of the following: § 170.315(f)(4) (Transmission to Cancer Registries) § 170.315(f)(7) (Transmission to Public Health Agencies – Health Care Surveys)

Table 15: EP Objectives, Measures, and Certification Criteria for Stage 3 in 2018 and Subsequent Years

Objective	Measure(s)	2015 Edition
Public Health and Clinical Data Registry Reporting (cont.)	Measure 5: Clinical Data Registry Reporting	No 2015 Edition health IT certification criteria at this time.

*Analysis provided for MHA
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