Guide for Eligible Professionals Practicing in Multiple Locations and Modified Stage 2 (2015 through 2017)

Meaningful Use and Multiple Locations

In order to achieve meaningful use, eligible professionals (EPs) must demonstrate the following:

- at least 50% of their patient encounters occurred at locations equipped with certified EHR technology (CEHRT) during the EHR reporting period
- at least 80% of their unique patients have stored data in certified EHR technology during the EHR reporting period

EPs who practice in multiple locations must attest with complete meaningful use data from all locations equipped with CEHRT during the EHR reporting period, i.e. combine numerator and denominator data from each CEHRT.

It is a provider's responsibility to retain supporting documentation for all meaningful use data (such as reports generated from the CEHRT or screenshots of the user interface). All supporting documentation must be retained for no less than six years after the payment year.

Measure Calculation

The following tables sort the Modified Stage 2 objectives and measures based on method of calculation for the denominators.

For the objectives and measures in Table 1, EPs must calculate the denominators based on all patient records regardless of whether the records are maintained using certified EHR technology (e.g. paper records).

For the objectives and measures in Table 2, EPs must attest which calculation method they used.

Table 3 lists the objectives that are activity-based and therefore, do not require numerator and denominator information. Supporting documentation must still be retained to prove that the activities were achieved during the EHR reporting period.

Click the links below to navigate to a specific objective in this document.

Table 1

Denominator must include ALL Patient Records	
Modified Stage 2 Objectives	**Modified Stage 2 Measures**
Patient-Specific Education Use clinically relevant information from Certified EHR Technology to identify patient-specific education resources and provide those resources to the patient.	Patient-specific education resources identified by Certified EHR Technology are provided to patients for more than 10 percent of all unique patients with office visits seen by the EP during the EHR reporting period.
Patient Electronic Access (VDT) 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.	An EP must meet the following 2 measures: Measure 1: More than 50 percent 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. Measure 2: In 2015 and 2016: At least 1 patient seen by the EP during the EHR reporting period (or patient-authorized representative) views, downloads or transmits his or her health information to a third party during the EHR reporting period. In 2017: More than 5 percent 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.

Secure Messaging	In 2016:
Use secure electronic messaging to communicate with patients on relevant health information.	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
	In 2017: For more than 5 percent 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.

Table 2

Denominator may include ALL Patient Records OR Only patient records maintained using certified EHR technology	
Modified Stage 2 Objectives	**Modified Stage 2 Measures**
Computerized Provider Order Entry (CPOE) 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.	An EP must meet the following 3 measures: Measure 1: More than 60 percent of medication orders created by the EP during the EHR reporting period are recorded using computerized provider order entry. Measure 2: More than 30 percent of laboratory orders created by the EP during the EHR reporting period are recorded using computerized provider order entry. Measure 3: More than 30 percent of radiology orders created by the EP during the EHR reporting period are recorded using computerized provider order entry.

Electronic Prescribing Generate and transmit permissible prescriptions electronically (eRx).	More than 50 percent of all permissible prescriptions written by the EP are queried for a drug formulary and transmitted electronically using CEHRT.
Health Information Exchange The EP who transitions a patient to another setting of care or provider of care or refers a patient to another provider of care provides a summary care record for each transition of care or referral.	The EP who transitions or refers his or her patient to another setting of care or provider of care must use CEHRT to create a summary of care record and electronically transmit such summary to a receiving provider for more than 10 percent of transitions of care and referrals.
Medication Reconciliation The EP that receives a patient from another setting of care or provider of care or believes an encounter is relevant performs medication reconciliation.	The EP performs medication reconciliation for more than 50 percent of transitions of care in which the patient is transitioned into the care of the EP.

Table 3

Measures requiring only a Yes/No Attestation	
Modified Stage 2 Objectives	**Modified Stage 2 Measures**
Protect Patient Health Information Protect electronic protected health information created or maintained by the CEHRT through the implementation of appropriate technical capabilities.	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 by CEHRT in accordance with requirements under 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.

Clinical Decision Support Use clinical decision support to improve performance on high-priority health conditions.	An EP must meet the following 2 measures: 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. Absent four clinical quality measures related to an EP's scope of practice or patient population, the clinical decision support interventions must be related to high-priority health conditions. Measure 2: Enabled and implemented the functionality for drug-drug and drug-allergy interaction checks for the entire EHR reporting period.
Secure Messaging Use secure electronic messaging to communicate with patients on relevant health information.	In 2015: The capability for patients to send and receive a secure electronic message with the EP was fully enabled during the EHR reporting period.
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.	In 2015: • Stage 1 EPs must meet at least 1 of the following measures. • Stage 2 EPs must meet at least 2 of the following measures. In 2016 and 2017, all EPs must meet at least 2 of the following measures. Measure 1: Immunization registry reporting -- The EP is in active engagement with a public health agency to submit immunization data. Measure 2: Syndromic surveillance reporting -- The EP is in active engagement with a public health agency to submit syndromic surveillance data. Measure 3: Specialized registry reporting -- The EP is in active engagement to submit data to specialized registry.

Additional Resources

For further guidance about meaningful use and practicing in multiple locations, please refer to these resources:

- CMS FAQ 3609 https://questions.cms.gov/faq.php?id=5005&faqId=3609
- CMS FAQ 7815 https://questions.cms.gov/faq.php?faqId=7815&id=5005&r=p
- CMS FAQ 2765 https://questions.cms.gov/faq.php?faqId=2765&id=5005&r=p
- CMS Guide for EPs Practicing in Multiple Locations https://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/Downloads/EP_MultipleLocationsTipsheet.pdf
- Stage 3 and Modifications to Meaningful Use in 2015 Through 2017 final rule http://www.gpo.gov/fdsys/pkg/FR-2015-10-16/pdf/2015-25595.pdf

Questions?

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