



STATE OF MARYLAND
DHMH

Maryland Department of Health and Mental Hygiene
201 W. Preston Street • Baltimore, Maryland 21201

Martin O'Malley, Governor – Anthony G. Brown, Lt. Governor – Joshua M. Sharfstein, M.D., Secretary

MEMORANDUM

TO: Eligible Hospitals (EHs) Participating in the EHR Incentive Program

FROM: Maryland Department of Health and Mental Hygiene

DATE: December 12, 2013

RE: Updates for Meaningful Use Resulting from Stage 2 Final Rule and Details for Public Health Reporting

EXECUTIVE SUMMARY

This memorandum addresses: the timeline for launch of Stage 2, “Meaningful Use” in Maryland’s Registration and Attestation System (eMIPP); special changes for Program Year 2014; changes to Stage 1 Program Year 2013; changes to Stage 1 Program 2014 and onward; Stage 2 Final Rule Requirements; and Stage 2 Public Health reporting requirements.

The Stage 2 Final Rule revises certain Stage 1 criteria, and applies changes regardless of Stage.

TIMELINE FOR LAUNCH

From Wednesday, December 18, 2013 after 5:00 P.M. through Friday, December 20, 2013 at 5:00 P.M., Maryland’s EHR Incentive Program Registration and Attestation System, eMIPP, will be unavailable. During this time, Maryland will be updating eMIPP to allow for updates for Meaningful Use, Stages 1 and 2. On Friday, December 20, 2013 after 5:00 pm, Maryland will allow all eligible providers to register and attest for either adopt, implement, or upgrade (AIU) or for “Meaningful Use” Stage 1 or 2.

If you are eligible and have not already attested for Program Year 2013, hospitals will have until December 31, 2013 to do so. All hospitals participating in MU in 2013 are still in Stage 1.

SPECIAL CHANGE FOR PROGRAM YEAR 2014

As a result of the Stage 2 Final Rule, regardless of your Stage of or year within MU, everyone participating in Program Year 2014 will have a 90-day reporting period to demonstrate MU.

CHANGES TO STAGE 1 (PROGRAM YEAR 2013)

The changes for EHs for Program Year 2013 **only** are as follows:

- Objective 8: ‘record and chart changes in vital signs,’ there will be **an addition of alternative age limitations** (this will be **optional** in 2013; however, will be required in 2014 and onward).

The changes for EHs for Program Year 2013 and onward are as follows:

- Objective 1: ‘use CPOE for medication orders directly entered by any licensed healthcare professional who can enter orders into the medical record per state, local and professional guidelines,’ there will be **an addition of an alternative measure** (this will be **optional** from 2013 and onward). Please reference the Stage 1 Changes table attachment (or view online) for full information and details.
- The Stage 1 objective regarding the ‘capability to exchange key clinical information (for example, problem list, medication list, medication allergies, and diagnostic test results), among providers of care and patient authorized entities electronically,’ will **no longer be required** from 2013 and onward.
- Regarding the Stage 1 objective to ‘report ambulatory (hospital) clinical quality measures to CMS or the states,’ the objective will now be **incorporated directly into the definition of a meaningful EHR user and eliminated as an objective under §495.6** (this will be **required** from 2013 and onward).
- Regarding the Stage 1 Public Health objective, there will be the **addition of “except where prohibited”** to the objective regulation text for the public health objectives under §495.6 from 2013 and onward.

*Please reference the Stage 1 Changes table for full information and details at:

<https://mmcp.dhmdh.maryland.gov/ehr/SitePages/Eligible%20Provider%20and%20Eligible%20Hospital%20Updates%20for%20Meaningful%20Use%20Resulting%20from%20Stage%202%20Final%20Rule.aspx>

CHANGES TO STAGE 1 (PROGRAM YEAR 2014 AND ONWARD)

The changes for EHs for Program Year 2014 and onward are as follows:

- Objective 8: ‘record and chart changes in vital signs,’ there will be **the addition of age limitations on height, weight and blood pressure** (this will be **required** from 2014 and onward).
- Objective 12: ‘provide patients with an electronic copy of their health information (including diagnostics test results, problem list, medications lists, medication allergies, discharge summary, procedures) upon request’ along with ‘an electronic copy of their discharge instructions at time of discharge, upon request,’ patients will now be able **to access and have the ability to view online, download, and transmit their information about a hospital admission**, after discharge.
- There is also a required Stage 1 Policy Change for year 2014 and onward. Now, meeting an exclusion for a menu set objective **does not** count towards the number of menu set objectives that must be satisfied to meet meaningful use.

*Please reference the Stage 1 Changes table for full information and details at:

<https://mmcp.dhmdh.maryland.gov/ehr/SitePages/Eligible%20Provider%20and%20Eligible%20Hospital%20Updates%20for%20Meaningful%20Use%20Resulting%20from%20Stage%202%20Final%20Rule.aspx>

STAGE 2 FINAL RULE REQUIREMENTS

Under the Stage 1 criteria, EHs and CAHs had to meet 14 core objectives and 5 menu objectives that they selected from a total list of 10.

In order to demonstrate meaningful use (MU) under Stage 2 criteria:

- EHs and CAHs must meet 16 core objectives and 3 menu objectives that they select from a total list of 6, or a total of 19 core objectives.

New Stage 2 Core Objectives:

- Automatically track medications from order to administration using assistive technologies in conjunction with an electronic medication administration record (eMAR) (for EHs/CAHs only).
- Stage 2 also replaces the previous Stage 1 objectives to provide electronic copies of health information or discharge instructions and provide timely access to health information with objectives that allow patients to access their health information.

Stage 2 Patient Access Objectives:

- Provide patients the ability to view online, download and transmit their health information within 36 hours after discharge from the hospital (for EH/CAHs only).

New Stage 2 Menu Objectives:

- Record electronic notes in patient records.
- Imaging results accessible through CEHRT.
- Record patient family health history.
- Generate and transmit permissible discharge prescriptions electronically (eRx) (new for EHs/CAHs only).
- Provide structured electronic lab results to ambulatory providers (for EHs/CAHs only).

PUBLIC HEALTH REPORTING MEANINGFUL USE REQUIREMENTS FOR STAGE 2

EHs must show successful ongoing submission or testing for the following data from certified EHR technology to a public health agency or registry for the reporting period:

- Immunization Registries Data
- Electronic Reportable Laboratory Results
- Syndromic Surveillance Data

Please plan ahead and assess the current status of your systems to prepare for any upgrades and/or new interfaces necessary to meet the requirements, including the following:

- Certified EHR technology
- HL7 version 2.5.1 interfaces

- LOINC & SNOMED CT®

For detailed information on Stage 2 Objectives and Measures resulting from the Stage 2 Final Rule, please visit:

<https://mmcp.dhmf.maryland.gov/ehr/SitePages/Eligible%20Provider%20and%20Eligible%20Hospital%20Updates%20for%20Meaningful%20Use%20Resulting%20from%20Stage%202%20Final%20Rule.aspx>

For further information on Stage 2 Objectives and Measures, please reference the following CMS website: http://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/Stage_2.html

Thank you for your patience and your commitment to improving the quality of health care in Maryland.

Regards,

EHR Incentive Program Team

Website: <http://mmcp.dhmf.maryland.gov/ehr/SitePages/Home.aspx>

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