MU Quick Reference Guide 2017

9 Required Measures

E-Prescribe
>50% of all meds written must be sent via E-Rx and query Drug Formulary

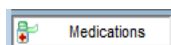
*Controlled Substances are Excluded
**Exclusion - If no pharmacy with E-Rx capability within 10 mile radius or fewer than 100 medications written

Must Have Valid NDC #!

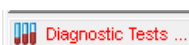### Computerized Provider Order Entry (CPOE)
(>60% Medications Ordered, >30% Lab Orders, >30 % Radiology Orders)

>60% of all Medications Ordered

RX Purposes which meet MU:
-Med to dispense
-Med administered
-Med office sample
-Med office vended

>30% of all Labs Ordered

>30% of all Radiology Orders

Patients Electronic Access/View, Download, Transmit Health Info
(>50 given Access and >5% have Viewed, Downloaded or Transmitted in 2017)

Provide online access to Health Information for greater than 50% of unique patients seen with >5% of patients Viewing, Downloading, Transmitting Information.
Note: You must have OP Patient Portal to meet this measure.

From Register, Contacts, enter the parent's email address and click the create/validate portal account button.

Protecting Electronic Health Information
(Attest Only Measure)

"Attest Only Measure" Attest that you have conducted or reviewed a security risk analysis, implemented security updates as necessary, and corrected identified security deficiencies as part of a risk management.
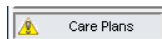*See the CyberSecurity Checklist*

Clinical Decision Support Rule (5 Intervention)

Implement five clinical decision support rules relevant to specialty or high clinical priority along with the ability to track compliance with that rule.

Use OP Care Plans to report, track and remind!

	Item	Most Recent Info.	Most Recent Date	Schedule (Months)	Recall Date	Interval Since Last	Care Plan
	⊟ Action Plan						
	Asthma Action Plan (	Start on Step 3	7/23/2014	12	07/23/2015	6 mos. 4 days	Asthma Care Plan Test

Patient Specific Education
>10 of Patients Seen Given a Handout

Document Handouts Given:
1. From any visit note go to Assess/Plan Tab
2. Click on Resource Tab
3. Add Handout
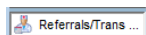4. Create Task
5. Patient Education Given will be checked
Note:
*You may manually check Patient education box & document handout given.
*Add Handouts to templates

Health Information Exchange-Transition of Care (Referral)
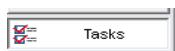## Transitions in Care/Referrals-Summary of Care Included

To Create a Referral:

1. Double-click on Task
   (blue text of referral task)

2. Select Referral to Specialist

3. Complete Information

4. Include Summary Check Box

>10% Sent Electronically (Using DIRECT messaging)

Medication Reconcilliation
(>50% of Inbound Transitions in Care)

Workflow:
- New patient Sick Visit CPT code (counts in the denominator automatically)
- Referral Trackng Entry created with "Performed" or "Not Required" selected (counts in the numerator).

Tracking Entry created and Med reconcilliation either "Performed" or "Not required"

Secure Electronic Messaging

- **Must have the OP Patient Portal.**
- **Patient seen during the reporting period with Message sent from the Portal to the Practice (PCP on Register is provider who gets credit)**
- **2017 5% of unique patients seen with a message sent from the portal**

Public Health Objective (2 of 3 objectives)
("Active Engagement" - Registered, In Testing, In Production)

- **Immunization Registry**
  - **Requires interface with state Registry. See OP Help for more information on how this works in OP.**

The interface is separate application from Office Practicum. It is typically *installed on your primary server. The interface monitors activity within Office Practicum. When a vaccine is administered through Office Practicum the interface automatically picks up that information and formats it according to your local registry's requirements. Each state interface works slightly differently so please refer to Supported Immunization Registry Interfaces page to understand how information is sent from Office practicum to the registry and how often that information is sent.

- **Syndromic Surveillance**
- **Specialized Registry Reporting**

- **Multiple exemptions apply**
  - **Not available to the EP in their area**
  - **As long as you either registered within 60 days of the start of your reporting period and are awaiting an invitation from the other party, *or* are in Testing/Validation, *or* in Production, you are covered for this objective.**

Overview of Stage 3
Optional in 2017
*All EP's regardless of previous stage will be required to move to Stage 3 in 2018
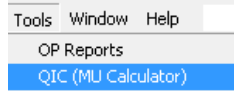
Click the link below to review the proposed Stage 3 requirements:

https://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/Downloads/Stage3Overview2015_2017.pdf

Viewing your MU Metrics: Running the QIC

Accessing the QIC

Tools-->QIC (MU Calculator)	Tools Window Help OP Reports QIC (MU Calculator)

Running the QIC

1. Report Group: Select Either:
   a. Clinical Quality Measures 2014
   b. MU Measures 2014 Stage 2 (includes Core and Menu)
2. Select Date Range for reporting period
3. Select All providers or 1 specific provider (remember reporting is done per provider)
4. Select All locations or 1 location (only for practices with mulitple locations)
5. Click on Refresh button:
6. Data wil appear in Grid
7. To Save a file select from: Grid, Save or XML file formats

Office Practicum Quality Improvement Calculator (QIC)

Reports | PCMH 2011 Custom | Database Administration

Report group: MU Measures, 2014 Stage 2 (OP ∨) Provider: ☑ All or [∨] 🔁 Refresh 🖨 Grid
Date range: 1/1/2015 ∨ to: 1/30/2015 ∨ Location: ☑ All or [∨] 💾 Save ⁿ⁋ XML

Results Grid | Results Chart | Patient List / Description

NQF	PQRI	Measure Name	Numerator	Denominator	Exclusions	Min %	Perf %
⊟ Measure Group : Core							
907C		CPOE for radiology orders	0	0	0	30.01%	.00%
907B		CPOE for laboratory orders	1	1	0	30.01%	100.00%
907A		CPOE for medication orders, 2014	0	0	0	60.01%	.00%
908		E-Prescribe (with formulary)	0	0	0	50.01%	.00%
904		Record demographics	1	1	0	80.01%	100.00%
909		Record/chart changes in vital signs, 2014	1	1	0	80.01%	100.00%
909B		Record/chart changes in vital signs, 2014 (BP only)	0	0	0	80.01%	.00%
909A		Record/chart changes in vital signs, 2014 (growth only)	1	1	0	80.01%	100.00%
910		Record smoking status, 13+ years of age	0	0	0	80.01%	.00%
14B		View, Download, Transmit B (use)	0	1	0	5.01%	.00%
14A		View, Download, Transmit A (access)	0	1	0	50.01%	.00%
15		Clinical summaries for each office visit, 2014 Stage 2	1	1	0	50.01%	100.00%
12		Clinical lab results as structured data, 2014	1	1	0	55.01%	100.00%
914		Patient reminders according to preference, 2014	0	0	0	10.01%	.00%
905		Patient-specific education resources, 2014	0	1	0	10.01%	.00%
17		Medication reconciliation, inbound care transitions, 2014 Stag	0	0	0	50.01%	.00%
18B		Transmit summary of care electronically, 2014	0	0	0	10.01%	.00%
18		Provide summary of care, outbound care transition, 2014	0	0	0	50.01%	.00%
923		Secure messaging	0	1	0	5.01%	.00%
⊟ Measure Group : Menu							
920		Electronic notes, 2014	1	1	0	30.01%	100.00%
922		Imaging results accessible	0	0	0	10.01%	.00%
921		Family health history	1	1	0	20.01%	100.00%

Understanding the QIC Results

1. Run QIC
2. Click on 3rd Tab: Patient List/Description
3. Description field: will explain the measure and how it is calculated
4. Grid will show patients who have met the measures and those who have not met it.

Note: not all measures such as % of E-rx are based on individual patients. They are based on totals for all patients.

NQF	PQRI	Measure Name	Numerator	Denominator	Exclusions	Min %	Perf %
905		Patient-specific education resources, 2014	0	1	0	10.01%	.00%

Office Practicum Quality Improvement Calculator (QIC)

Reports | PCMH 2011 Custom | Database Administration

Report group: MU Measures, 2014 Stage 2 (OP v)   Provider: ☑ All or [v]
Date range: 1/1/2015 v to: 1/30/2015 v   Location: ☑ All or [v]

Refresh   List   Save   XML

Results Grid | Results Chart | Patient List / Description

Measure name: Patient-specific education resources, 2014

Description: Requirement: More than 10% of all unique patients seen during the reporting period were provided patient-specific education resources.   Calculation: For all qualifying patients, performance is met for those who have at least one sick or well encounter at any time where the "Patient education given" checkbox was checked. (This happens automatically when Resources are ordered.)

Performance Status △

Pat ID	Patient Name	Birth Date	Sex
Performance Status : NOT Met (1)			
101	SMITH, ALLISTER	01/24/2012	M

Summary of Reporting Requirements

Summary - Reporting Requirements:
- Electronic Prescribing - Transmit permissible prescriptions and query Drug Formulary*
- CPOE: Computerized Provider Order Entry (E-Rx, Labs, Radiology)*
- Patients Electronic Access/View, Download, Transmit Health Info
- Protecting Electronic Health Information
- Clinical Decision Support Rule (5 interventions)*
- Patient Specific Education
- Health Information Exchange - Care Summaries for Outbound Transitions of Care (Referrals)
- Medication Reconciliation for Transitions of Care
- Secure Electronic Messaging

Public Health Measure (report 2 of 3)

- Electronic Submission to Immunization Registries
- Electronic Submission of syndromic surveillance data to a public health agency
- Specialized Registry Reporting

Modified Stage 2 Objectives on CMS

Clinical Quality Measures
(9 total to report from 3 of 6 Domains)
(There is no Threshold to meet these measures)

Pediatric Suggested Clinical Quality Measures
(Listed by Domain)

Measure	Domain
Appropriate Testing for Children with Pharyngitis	Efficient Use of Healthcare Resources
Appropriate Treatment for Children with Upper Respiratory Infection (URI)	Efficient Use of Healthcare Resources
Chlamydia Screening for Women	Population/ Public Health
Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents	Population/ Public Health
Childhood Immunization Status	Population/ Public Health
Preventive Care and Screening: Screening for Clinical Depression and Follow-Up Plan	Population/ Public Health
ADHD: Follow-Up Care for Children Prescribed Attention Deficit/Hyperactivity Disorder (ADHD) Medication	Clinical Process/ Effectiveness
Children who have dental decay or cavities	Clinical Process/ Effectiveness
Use of Appropriate Medications for Asthma	Clinical Process/ Effectiveness
Child and Adolescent Major Depressive Disorder: Suicide Risk Assessment	Patient Safety
Closing the Referral Loop: Receipt of Specialist Report	Care Coordination
Influenza Immunization	Population and Public Health
Initiation and Engagement of Alcohol and Other Drug Dependence Treatment	Clinical Processes/Effectiveness
Hemoglobin A1c Test for Pediatric Patients	Clinical Processes/Effectiveness
Primary Caries Prevention Intervention	Clinical Processes/Effectiveness

Other Clinical Quality Measures (Reports Available in OP)	
Documentation of Current Medication	Patient Safety
Preventive Care and Screening Pair: Tobacco Use Assessment and Tobacco Cessation Intervention	Population and Public Health
Adult Weight Screening and Follow-up	Population and Public Health
Maternal Depression Screening	Population and Public Health
Screening for High Blood Pressure and Follow-Up Documented	Population and Public Health
Use of Imaging Studies for Low Back Pain	Efficient Use of Healthcare Resources
Controlling High Blood Pressure	Clinical Processes/Effectiveness
Anti-Depressant Medication Management	Clinical Processes/Effectiveness