

Final Rule for Certification Criteria

- June 24, 1010 rule established the criteria for certification of electronic health record technology for Stage 1 (2011-2012)
- Established standards and authorization process for temporary testing & certification bodies
 - Bodies to be known as ONC-ATCB
 - ONC-ATCB is short for Office of the National Coordinator of Health Information Technology (ONC) Authorized Testing & Certification Body (ATCB)
- Final Rule did NOT grant “grandfather” status to existing certified products
- Even those with 2011 CCHIT certification and CCHIT Preliminary Certification must undergo retesting
- Authorized bodies will be private sector organizations that have demonstrated the capacity to both test and certify electronic health record technology
- Program Expires December 31, 2011
- Certifications issued under the Temporary Program by an ONC-ATCB will remain valid until issued expiration date and do not lose status when permanent program begins
- However, after the ONC has adopted new or modified certification criteria for the Permanent Program, EHR technology certified under the Temporary Program must be retested and recertified in order to continue to qualify as Certified EHR Technology for Stage 2 & 3
- Applications to become an ONC-ATCB are currently available
 - Part 1 – application outlining testing & certification processes
 - Part 2 – competency exam
- Over 30 organizations have already submitted requests for application
- ONC anticipates up to 5 testing & certification bodies will be authorized
- ONC has 30 days to either approve or deny from application submission date

CCHIT Certification

- Healthland will obtain Stage 1 certification with CCHIT once they receive authorization as an ONC-ATCB
- CCHIT submitted a completed application (Part 1 & Part 2) to the ONC on July 20, 2010
- The ONC has 30 days to either approve or deny from application submission date
 - No later than August 20, 2010 for CCHIT
- Once approved, CCHIT will offer testing under a new ONC authorized testing script
- Testing typically takes approximately 60 days
- Healthland will be issued a certification number for meaningful use submissions

Final Rule for Meaningful Use

- Two rules announced jointly on July 13, 2010 and published on July 28, 2010
- CMS Final Rule to establish the definition of meaningful use and the criteria required for eligible hospitals and CAHs to demonstrate meaningful use of certified electronic health record technology
- ONC Final Rule to establish the definition of meaningful use and the criteria required of certified electronic health record technology to enable meaningful use
- Final rules were more lenient than the criteria proposed in the Interim Final Rule Issued in January 2010

Significant Changes in Final Rule

Proposed Rule	Final Rule
23 measures for eligible hospitals	24 measures for eligible hospitals
Meet all 23 MU reporting objectives (“all or nothing”)	Must meet all Core Set measures, but can defer 5 from optional “menu set” - must meet 19 measures total
No classification of measures	Measures classified 14 Core Set (required) 10 Menu Set (choose 5)
Measure thresholds range from 10% to 80% of patients or orders (most at higher range)	Measure thresholds range from 10% to 80% of patients or orders (most at lower to middle range)
Administrative transactions (claims and eligibility) included	Administrative transactions removed
Measures for Patient-Specific Education Resources and Advanced Directives discussed but not proposed	Measures for Patient-Specific Education Resources and Advanced Directives included
Not all Core Quality Measures (CQM) electronically specified	All Core Quality Measures (CQM) have electronic specifications
35 CQM total for eligible hospitals	15 CQM total for eligible hospitals
Drug interaction checks include: drug-drug, drug-allergy, drug-formulary	Drug interaction checks divided Core Set: drug-drug, drug-allergy Menu Set: drug-formulary

Core Set

Use CPOE

Implement drug-drug and drug-allergy interaction checks

Record demographics

Maintain up-to-date problem list

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

Implement one clinical decision support rule

Report hospital clinical quality measures to CMS or States

Provide patients with an electronic copy of their health information, upon request

Provide patients with an electronic copy of their discharge instructions at time of discharge, upon request

Capability to exchange key clinical information among providers of care and patient-authorized entities electronically (transmit the Continuity of Care Document)

Protect electronic health information created or maintained by certified EHR

Menu Set

Record advanced directives for patients 65 years or older

Use certified EHR technology to identify patient-specific education resources and provide to patient, if appropriate

Drug-formulary checks

Incorporate clinical lab test results as structured data

Generate lists of patients by specific conditions

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 submission of reportable lab results to public health agencies*

Capability to provide electronic syndromic surveillance data to public health agencies*