

**THE STEP-BY-STEP GUIDE TO
MEANINGFUL USE
FOR EVOLV-CS USERS**

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What is Meaningful Use?

As of the writing of this guide (summer 2011), nearly everyone associated with the human services industry has heard the term “Meaningful Use” and most are at least somewhat familiar with its basic characteristics. Within the larger American Recovery and Reinvestment Act of 2009 (ARRA), is the Health Information Technology for Economic and Clinical Health Act (HITECH Act). One purpose of the acts is to improve the nation’s health IT infrastructure and provide incentives designed to accelerate the adoption of electronic health record (EHR) systems among providers. Health care providers that adopt EHR technology may be eligible to receive financial incentives if they can demonstrate “Meaningful Use” – as use of the EHR results in improved quality of patient care and operating efficiency. This is so important that providers that do not demonstrate Meaningful Use by the end of 2015 will be subject to financial penalties.

The Purpose of this Guide

Demonstration of meaningful use requires the use of certified EHR technology by providers. Defran Systems’ Evolv-CS is a fully certified EHR, having completed testing by the Drummond Group in January 2011. Still, while Evolv-CS possesses all of the functionality necessary to achieve Meaningful Use, many agency users are still somewhat uncertain about the actual steps which must be taken to demonstrate that Meaningful Use has been achieved. The purpose of this guide is to assist you in learning how to successfully meet the criteria for Meaningful Use with Evolv-CS and receive your incentive payments.

How this Guide is Structured

The Centers for Medicare & Medicaid Services (CMS) have created 25 **OBJECTIVES** and **MEASURES** (15 Core and 10 Menu Set) to determine whether the EHR user is achieving Meaningful Use. The **OBJECTIVES** pertain to the EHR’s functional ability to record and track an individual patient’s information regarding a variety of measures such as medications, allergies, diagnosis, demographics and vital signs. The **MEASURES** determine if each objective is being captured by the EHR for a significant portion of the provider’s total number of patients. This guide’s basic structure will follow the CMS 25 Meaningful Use Objectives and explain where or how the data is captured in the Evolv-CS system.

This guide’s basic structure will follow the CMS 25 Meaningful Use Objectives. The guide will state the Meaningful Use Objective, then explain where or how the data for individual patients is captured in the Evolv-CS system. The Meaningful Use Measure is then stated, usually as a percent.

Official information regarding EHR incentive programs and Meaningful Use can be found on the Centers for Medicare & Medicaid Services (CMS) website <https://www.cms.gov/ehrincentiveprograms/>

Who is Eligible to Receive Meaningful Use Incentives?

There are two ways providers can participate in the EHR incentive program – either through Medicare or through Medicaid. Human services organizations can benefit more by pursuing the Medicaid Incentive Program, which pays a higher dollar amount for incentives than the Medicare program (\$63,750 per eligible professional vs. \$44,000 per eligible professional).

Criteria for demonstrating Meaningful Use

The following three criteria must be met to be eligible to receive EHR incentive funding.

The provider must:

1. Possess the proper **Eligible Professional (EP) licensing credentials** and serve the required proportion of needy patients.

EPs must serve a minimum Medicaid population of 30% of all patient encounters in any 90 day period in the previous calendar year.

- Physician (MD, DO, OD)
- Nurse Practitioner or Certified Nurse-Midwife
- Physician assistant who furnishes services in a Federally Qualified Health Center or Rural Health Clinic that is led by a physician assistant



2. Adopt and use an EHR that has been **certified by an Authorized Testing and Certification Body (ATCB)** as specified by the HHS' Office of the National Coordinator (ONC).

Defran Systems' Evolv-CS has been fully certified by the Drummond Group as a complete ambulatory EHR.

3. Meet the required measures for **the Objectives and Clinical Quality Measures.**

EPs are expected to complete 15 core objectives plus 5 additional objectives from a menu set of 10. Also to be completed are 6 total Clinical Quality Measures (3 core or alternate core, and 3 out of 38 from alternate set-- see Core Objective 10 for the Clinical Quality Measures).



However, Some MU objectives are not applicable to every provider's clinical practice. If the EP does not have any eligible patients or actions that pertain to the measure, the denominator would equal zero. In this case, the EP would be excluded from having to meet the measure. CMS has provided a set number of exclusions that an EP can use for a designated objective. By claiming the exclusion, the objective is fulfilled. EPs should refer to the CMS website for more information about objective and measure exclusions.

Core Objective 1:
Computerized provider order entry (CPOE)

Use computerized provider order entry (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.

Measure

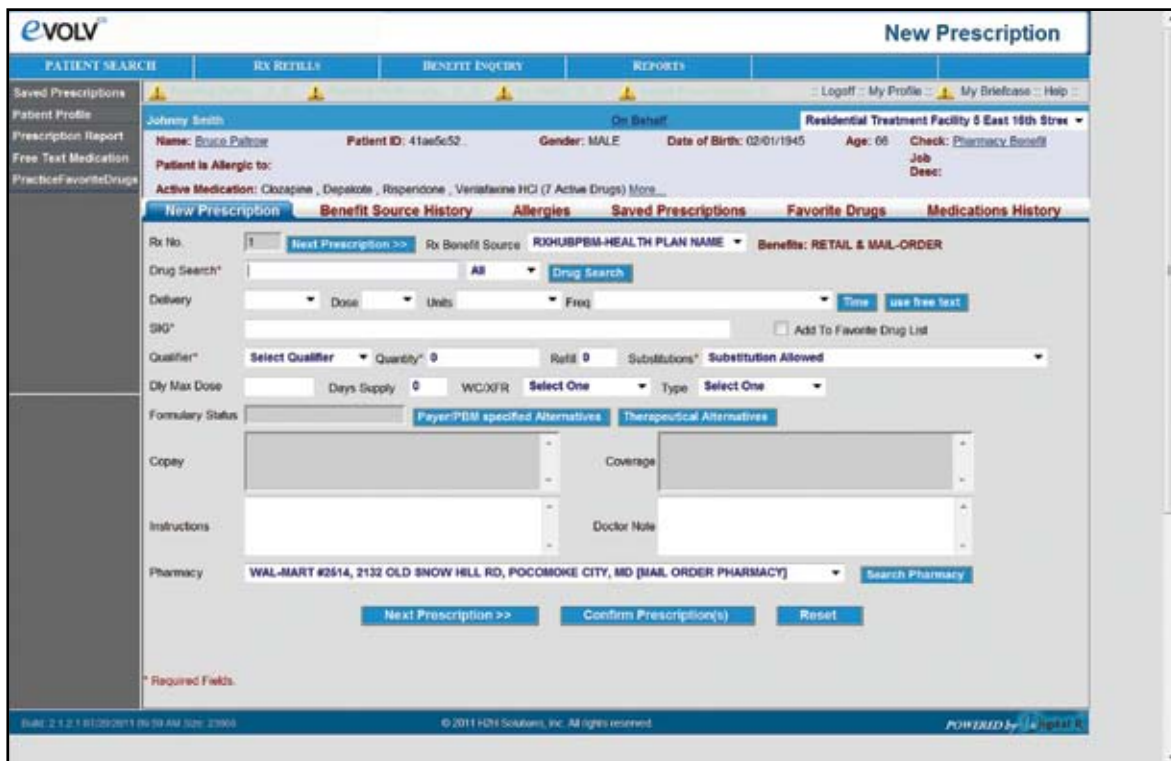
More than 30% of unique patients seen by the EP have at least one medication in their medication list entered using CPOE.

The computerized provider order entry (CPOE) is the process of entering medication orders or other physician instructions electronically instead of on paper charts.



Objective facilitated by Evolv-CS:

Evolv-CS seamlessly interfaces with H2H/Digital Rx as its e-prescribing software to execute CPOE.



Evolv-CS seamlessly interfaces with H2H/Digital Rx.

Core Objective 2:
Implement drug-drug and drug-allergy interaction checks

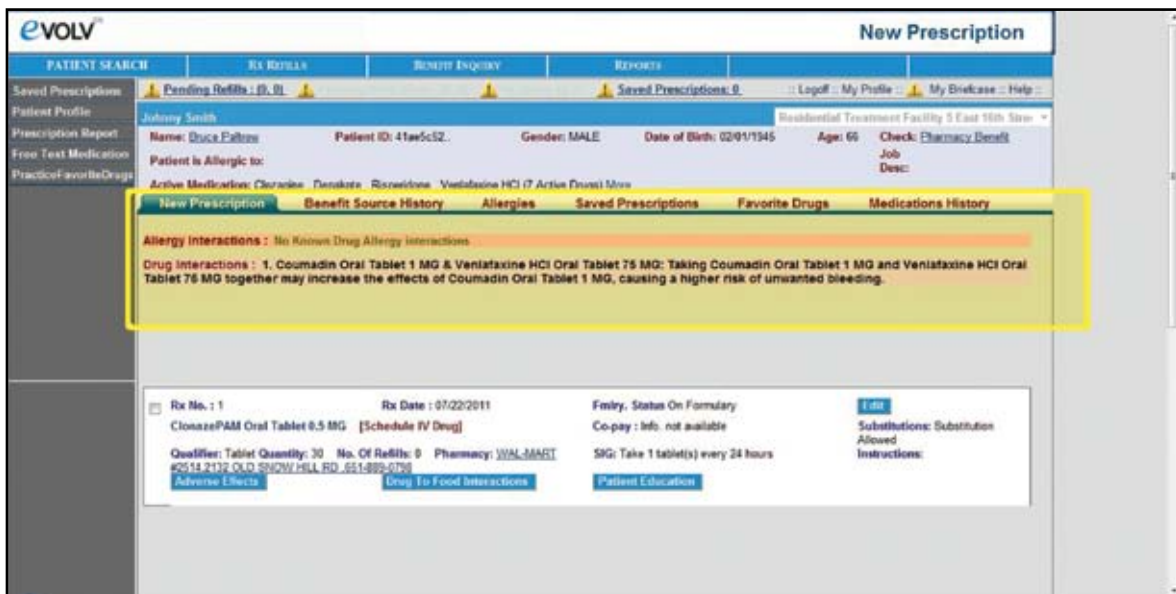
Measure
The EP has enabled this functionality for the entire EHR reporting period.



Objective facilitated by Evolv-CS:

Evolv-CS handles drug-drug and drug allergy interaction checks through Digital Rx, the system's e-Prescribe partner.

When entering a new prescription, Digital Rx will automatically inform you if the drug has any interactions with other drugs or allergies before you submit it to the pharmacy.



The New Prescription screen in the Digital Rx e-prescribing section of Evolv-CS

Core Objective 3:

Maintain an up-to-date problem list of current and active diagnoses

Measure

More than 80% of all unique patients seen by the EP have at least one entry or an indication that no problems are known for the patient recorded as structured data.



Objective facilitated by Evolv-CS:

Problem list and active diagnoses are maintained in the system database when client information is entered into Evolv-CS.

Entered With	Type	DC	ICD9	Diagnosis (DSM)	Date Diagnosed	End Date	Priority
Axis Diagnosis - 01/02/2010 00:00am	Axis I Diagnosis			ATTN DEFIC/HYPERACT; ICD9: 314.00; DSM: 314.00; Cat: Disorders Usually First Diagnosed in Infancy, Childhood, or Adolescence/ Attention Deficit and Disruptive Behavior Disorders	01/10/1989		Secondary
Referrals to the Agency - 12/27/2009 11:00am	Axis II Diagnosis			MOO MENTAL RETARDATION; ICD9: 318.0; DSM: 318.0; Cat: Disorders Usually First Diagnosed in Infancy, Childhood, or Adolescence/ Mental Retardation	04/15/1950		Primary
Axis Diagnosis - 01/02/2010 00:00am	Axis III (Medical) Diagnosis			Agree Spells; ICD9: 770.8; DSM: 770.8	02/05/1985		Tertiary
Axis Diagnosis - 01/02/2010 00:00am	AXIS IV (Psychosocial and Environmental Problems)			Housing problems; Axis IV: 65	12/05/2009		
Axis Diagnosis - 01/02/2010 00:00am	AXIS V (Global Assessment of Functioning)				12/09/2010		

Diagnoses list for an individual patient

Core Objective 4:

Generate and transmit permissible prescriptions electronically (eRx)

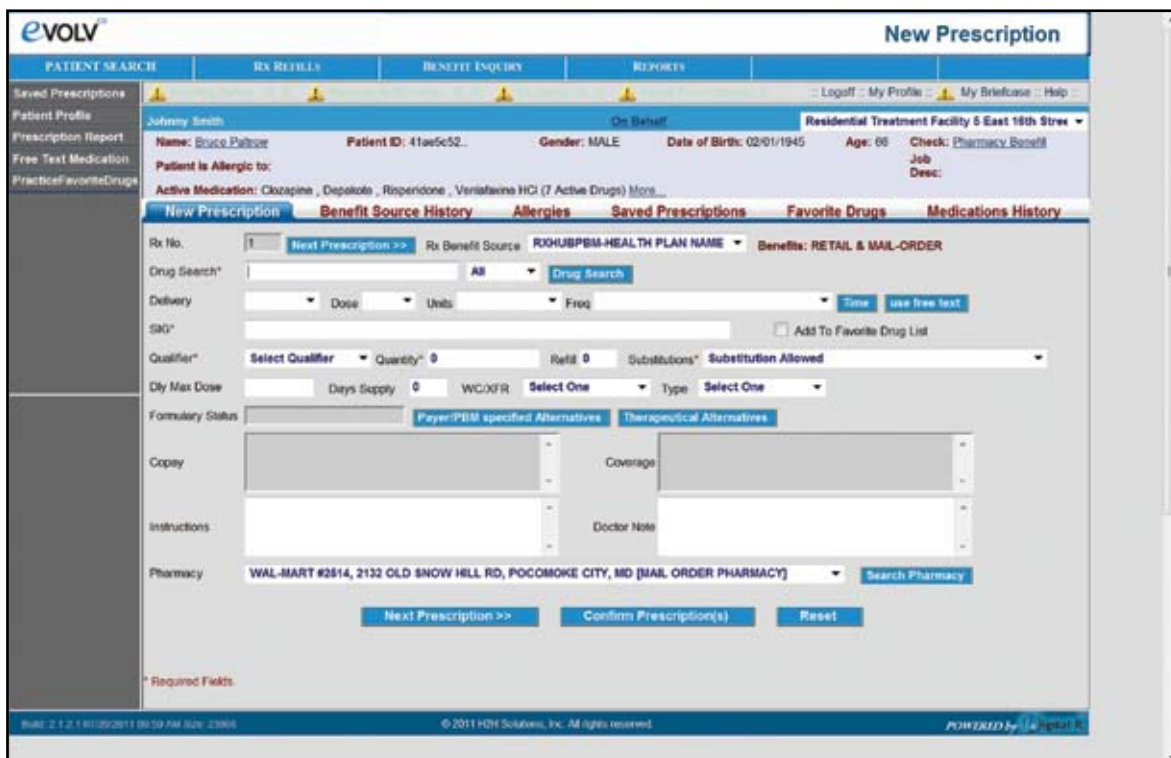
Measure

More than 40% of all permissible prescriptions written by the EP are transmitted electronically.



Objective facilitated by Evolv-CS:

Evolv-CS performs prescriptions electronically through Digital Rx, the system's e-Prescribe partner.



The Digital Rx new prescription screen

Core Objective 5:
Maintain active medication list

Measure

More than 80% of all unique patients seen by the EP have at least one entry (or an indication that the patient is not currently prescribed any medication) recorded as structured data.



Objective facilitated by Evolv-CS:

Evolv-CS interfaces with Digital Rx e-prescribing site. The client's active medication info automatically populates their record in the Evolv-CS system.

Drug Description	MG	Date	Rx/OTC	Type	Status	Physician	Active
BD Insulin Syringe Ultrafine Miscellaneous 29G X 1/2" 0.3 ML	Inject 1 twice a day	06-16-2011	OTC	NEWRX	R * E	Johnny Smith	Y
Coumadin Oral Tablet 1 MG	Take 1/4 tablet(s) as directed	06-16-2011	Rx	NEWRX	R * E	Johnny Smith	Y
ALPRAZolam Oral Tablet 0.25 MG	1 TABLET 3 TIMES DAILY	06-16-2011	Rx	NEWRX	P * S	Johnny Smith	Y
Venlafaxine HCl Oral Tablet 75 MG	1 TABLET TWICE DAILY WITH FOOD	06-16-2011	Rx	NEWRX	R * E	Johnny Smith	Y
Risperidone Oral Tablet 3 MG	take 1 tablet daily	05-11-2011	Rx	NEWRX	P * E	Johnny Smith	Y
Depakote Oral Tablet Delayed Release 500 MG	1 TABLET TWICE DAILY	05-08-2011	Rx	NEWRX	P * E	Johnny Smith	Y
Citalopram Oral Tablet 100 MG	Take 3 tablet(s) once a day	05-06-2011	Rx	NEWRX	P * E	Johnny Smith	Y

Evolv-CS client's active medication list

Core Objective 6:

Maintain active medication allergy list

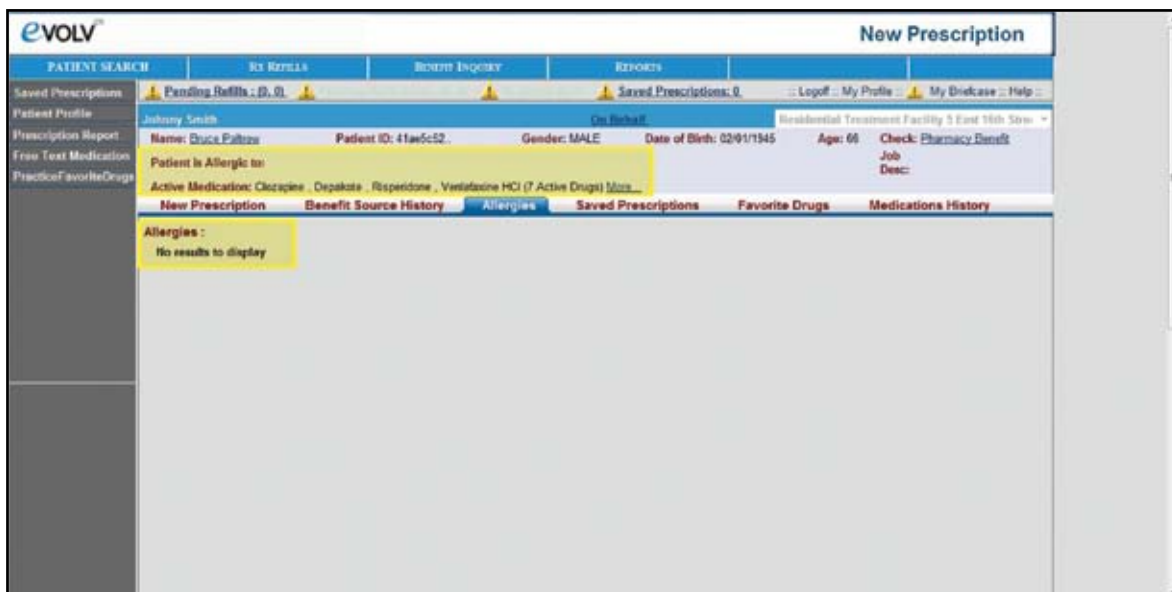
Measure

More than 80% of all unique patients seen by the EP have at least one entry (or an indication that the patient has no known medication allergies) recorded as structured data.



Objective facilitated by Evolv-CS:

In Evolv-CS, under the Digital Rx allergies tab, Evolv-CS reports that the patient has no allergies for the active medications listed.



Evolv-CS active medication allergy list

Core Objective 7:

Record demographics

- A. Preferred language
- B. Gender
- C. Race
- D. Ethnicity
- E. Date of birth

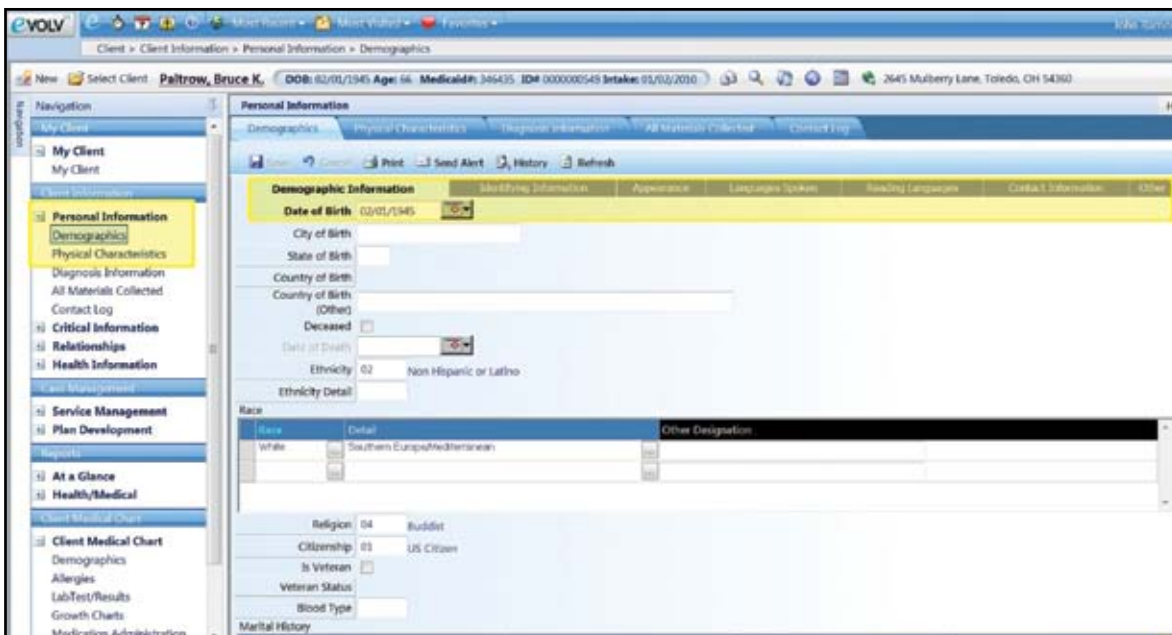
Measure

More than 50% of all unique patients seen by the EP have demographics as recorded structured data.



Objective facilitated by Evolv-CS:

The demographic data is captured in the Demographics tab of the patient's record.



Evolv-CS Demographic Information screen

Core Objective 8:

Record and chart changes in vital signs

- A. Height
- B. Weight
- C. Blood pressure
- D. Calculate and display body mass index (BMI)
- E. Plot and display growth charts for children 2–20 years, including BMI

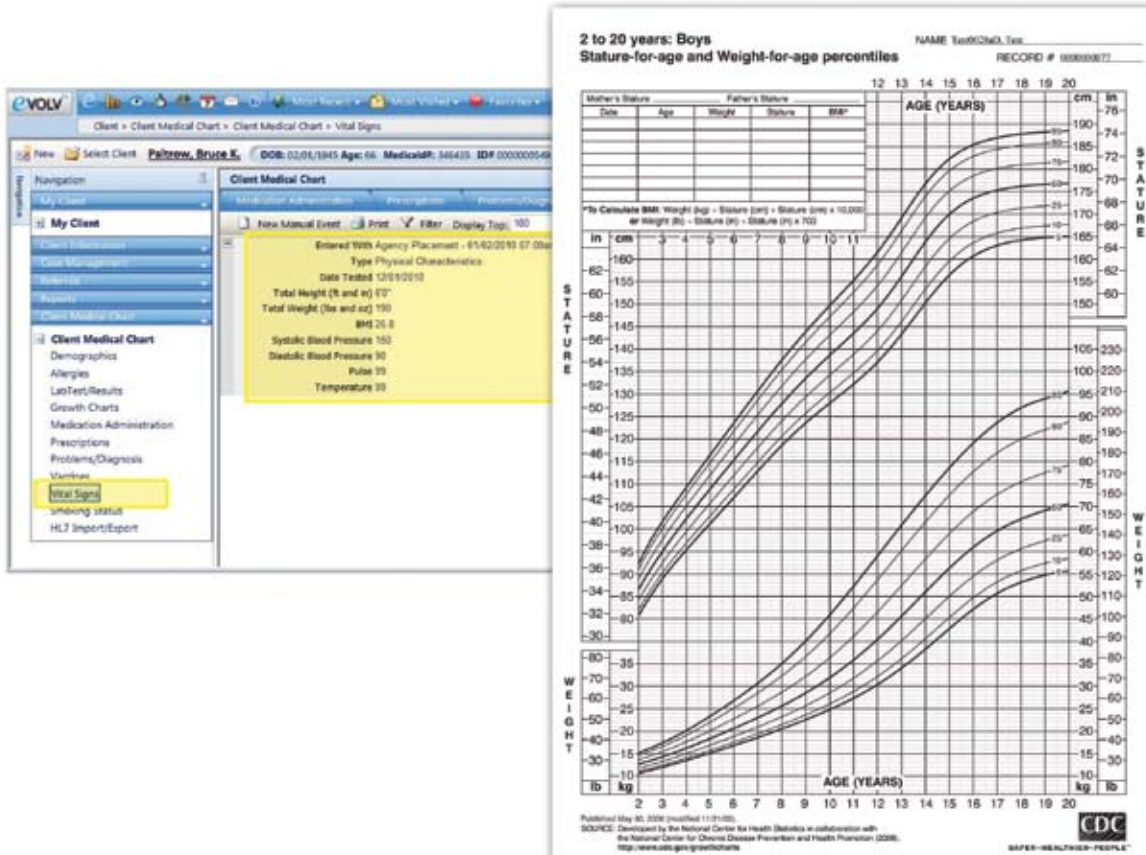
Measure

For more than 50% of all unique patients age 2 and over seen by the EP height, weight, and blood pressure are recorded as structured data.



Objective facilitated by Evolv-CS:

This data can be directly entered into the Vital Signs form within the Client Medical Chart.



Evolv-CS Vital Signs screen and Growth Chart

Core Objective 9:

Record smoking status for patients 13 years old or older

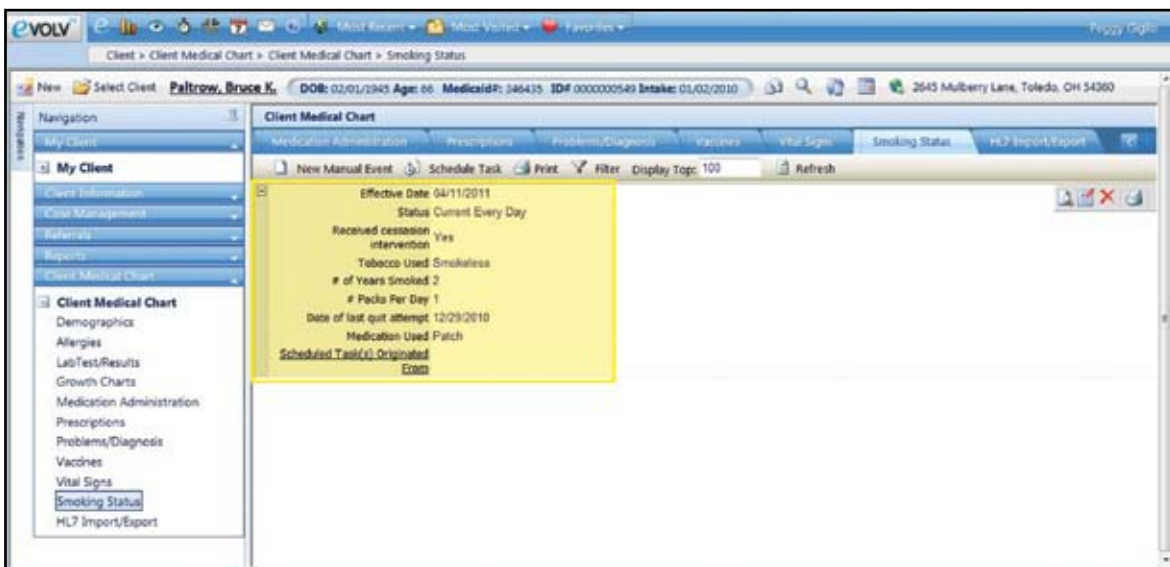
Measure

More than 50% of all unique patients 13 years or older seen by the EP have smoking status recorded as structured data.



Objective facilitated by Evolv-CS:

Smoking status is recorded under the client’s Health Information form. Status captures information such as volume and frequency, as well as effort made to quit.



Smoking Status is recorded under the client’s Health Information form.

Core Objective 10:
Clinical quality measures

Report ambulatory clinical quality measures to CMS or, in the case of Medicaid EPs, the States.

Measure

For 2011, provide aggregate numerator, denominator, and exclusions through attestation; For 2012, electronically submit clinical quality measures.



Objective facilitated by Evolv-CS:

Evolv-CS CQM report

Currently, Defran has produced a report to show quality measures on the 3 core, the 3 alternate core and 3 additional clinical quality measures, which are listed in the report below.

Date: 7/8/2011
Time: 11:45 AM

A Generic Agency
Clinical Quality Measures
01/02/2005 - 07/01/2011

Selection Criteria: All

Core/Alt-core Clinical Quality Measures

Title	Numerator	Denominator	Performance %
Adult Weight Screening and Follow-Up			
Adult Weight Screening and Follow-Up Population 1	2	9	22.22
Adult Weight Screening and Follow-Up Population 2	3	37	8.11
Hypertension: Blood Pressure Measurement	0	1	0
Preventive Care and Screening Measure Pair:			
a. Tobacco Use Assessment	4	5	80
b. Tobacco Cessation Intervention	1	3	33.33
Preventive Care and Screening: Influenza Immunization for Patients >= 65 Years Old	1	2	50
Weight Assessment and Counseling for Children and Adolescents			
Weight Assessment and Counseling for Children and Adolescents P1N1	3	4	75
Weight Assessment and Counseling for Children and Adolescents P1N2	3	4	75
Weight Assessment and Counseling for Children and Adolescents P1N3	3	4	75
Weight Assessment and Counseling for Children and Adolescents P2N1	3	4	75
Weight Assessment and Counseling for Children and Adolescents P2N2	3	4	75
Weight Assessment and Counseling for Children and Adolescents P2N3	3	4	75
Weight Assessment and Counseling for Children and Adolescents P3N1	0	0	100
Weight Assessment and Counseling for Children and Adolescents P3N2	0	0	100
Weight Assessment and Counseling for Children and Adolescents P3N3	0	0	100
Childhood Immunization Status:			
1. DTaP	0	0	100
2. IPV	0	0	100
3. IMR	0	0	100
4. HB	0	0	100
5. Hep B	0	0	100
6. VZV	0	0	100
7. PCV	0	0	100
8. Hep A	0	0	100
9. RV	0	0	100
10. Influenza Vaccine	0	0	100

Evolv-CS CQM report

Core Objective 11:
Clinical decision support rule

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

Measure

Implement one clinical decision support rule.

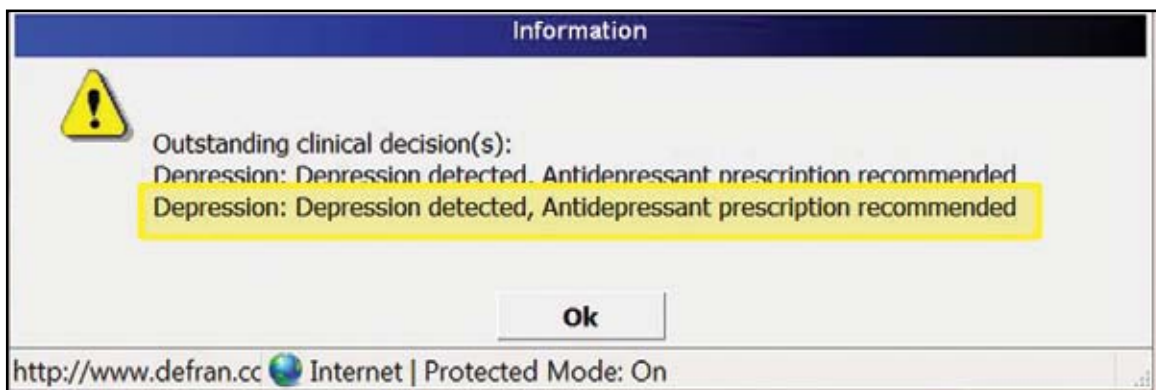
A clinical decision support rule is a feature that informs and assists clinicians to make decisions about how to best treat a patient.



Objective facilitated by Evolv-CS:

A clinical decision support rule(s) can be configured based on the particular rule criteria specified by the provider.

The example below illustrates this objective when diagnosing a patient with depression. Upon entering the diagnosis, a window pops up on screen to inform the clinician of the specified decision support rule when encountering a patient with a diagnosis of depression – prescribe antidepressant medication.



Evolv-CS Decision Support Rule for diagnosing a patient with depression

Core Objective 12:

Provide patients with an electronic copy of their health information

Including diagnostics test results, problem list, medication lists, medication allergies.

Measure

More than 50% of all unique patients of the EP who request an electronic copy of their health information are provided it within 3 business days.



Objective facilitated by Evolv-CS:

A patient's health information can be provided through the Evolv-CS Client Portal.



The Evolv-CS Client Portal

Core Objective 13:
Clinical summaries

Provide clinical summaries for patients for each office visit.

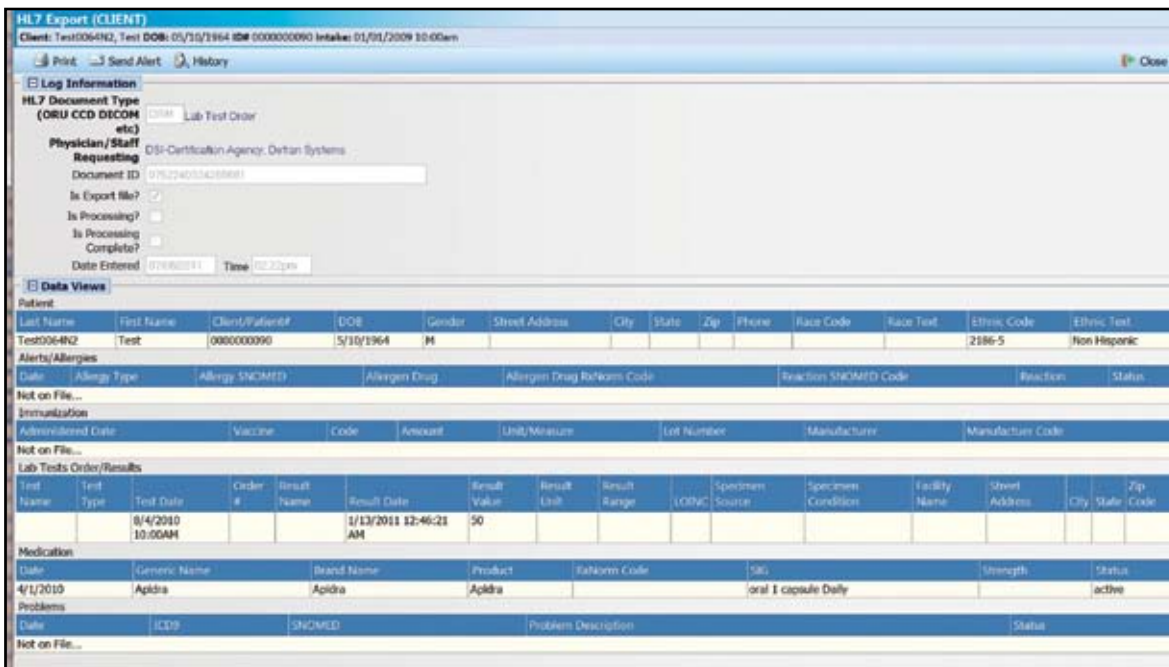
Measure

Clinical summaries provided to patients for more than 50% of all office visits within 3 business days.



Objective facilitated by Evolv-CS:

Clinical summaries can be generated and provided to patients via the CCD, or data can be made available through the Client Portal.



The Continuity of Care Document provides the patient with a clinical summary for each office visit.

Core Objective 14:
Exchange key clinical information

Capability to exchange key clinical information (for example, problem list, medication list, allergies, and diagnostic test results), among providers of care and patient authorized entities electronically.

Measure

Performed at least one test of the certified EHR technology's capacity to electronically exchange key clinical information.



Objective facilitated by Evolv-CS:

The CCD (continuity of care) document, which includes the aforementioned patient's health information, can be exported to other providers. Likewise, CCDs of new patients can be imported into Evolv-CS. The CCD can also be copied to a flash drive and exchanged among providers.

The screenshot shows the 'HL7 Export (CLIENT)' window in the Evolv-CS system. It displays a form for exporting patient data and a table of clinical information. The patient information includes: Last Name: Test, First Name: Test, Client/Patient#: 000000090, DOB: 5/10/1964, Gender: M, Race Code: 2880-5, Ethnic Code: Non Hispanic. The clinical information table includes sections for Alerts/Allergies, Immunization, Lab Tests Order/Results, Medication, and Problems.

HL7 Export (CLIENT)																	
Client: Test006492, Test DOB: 05/10/1964 ID# 000000090 Intake: 01/01/2009 10:00am																	
Print Send Alert History Close																	
Log Information																	
HL7 Document Type (ORU CCD DICOM etc) ORU: Lab Test Order																	
Physician/Staff Requesting DSI-Certification Agency, Deltran Systems																	
Document ID 0792340324090001																	
Is Export file? <input type="checkbox"/>																	
Is Processing? <input type="checkbox"/>																	
Is Processing Complete? <input type="checkbox"/>																	
Date Entered 4/13/2011 Time 02:22pm																	
Data Views																	
Patient																	
Last Name	First Name	Client/Patient#	DOB	Gender	Street Address	City	State	Zip	Phone	Race Code	Race Text	Ethnic Code	Ethnic Text				
Test006492	Test	000000090	5/10/1964	M								2880-5	Non Hispanic				
Alerts/Allergies																	
Date	Allergy Type	Allergy SNOMED	Allergen Drug	Allergen Drug RxNorm Code	Reaction SNOMED Code	Reaction	Status										
Not on File...																	
Immunization																	
Administration Date	Vaccine	Code	Amount	Unit/Measure	Lot Number	Manufacturer	Manufacturer Code										
Not on File...																	
Lab Tests Order/Results																	
Test Name	Test Type	Test Date	Order #	Result Name	Result Date	Result Value	Result Unit	Result Range	LOINC	Specimen Source	Specimen Condition	Facility Name	Street Address	City	State	Zip Code	
		8/4/2010 10:00AM			1/13/2011 12:46:21 AM	30											
Medication																	
Date	Generic Name	Brand Name	Product	RxNorm Code	SIG	Strength	Status										
4/1/2010	Apixia	Apixia	Apixia		oral 1 capsule Daily		active										
Problems																	
Date	ICD	SNOMED	Problem Description	Status													
Not on File...																	

The Evolv-CS Continuity of Care Document (CCD) can exchange key clinical data.

Core Objective 15: **Protect electronic health information**

Protect electronic health information created or maintained by the certified EHR technology through the implementation of appropriate technical capabilities.

Measure

Conduct or review a security risk analysis per 45 CFR 164.308(a)(1) and implement updates as necessary and correct identified security deficiencies as part of the EP's risk management process.



Objective facilitated by Evolv-CS:

Evolv-CS facilitates compliance with HIPPA security requirements and uses data encryption and secure login password.

Measure is achieved by:

Agencies must perform risk management activities following the Code of Federal Regulations (CFR) issued rule 45 CFR 164.308(a)(1) specifying the criteria for conducting a HIPPA compliant security risk analysis. They must attest that they are following these rules to implement security updates and correct identified security deficiencies.

The HHS Office of Civil Rights (OCR) provides guidance for conducting a security risk analysis and best practices implementing security measures.

Menu Set Objective 1:
Implement drug formulary checks

Measure

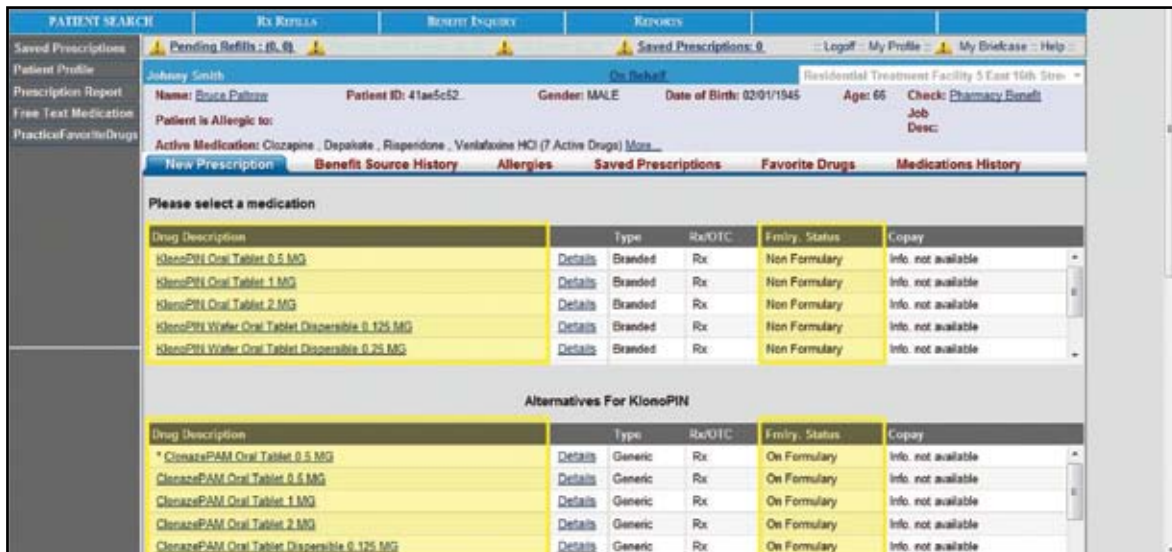
The EP has enabled this functionality and has access to at least one internal or external drug formulary for the entire EHR reporting period.

Note: Health insurance companies maintain a formulary, which is a master list of pharmaceutical drugs, and the amount of money reimbursable for each drug based on the price negotiated with the seller, and the type of insurance program the insured patient has paid for.



Objective facilitated by Evolv-CS:

Evolv-CS handles drug formulary checks with Digital Rx. At the time of prescription entry, the system can obtain eligibility, benefits and formulary information. It can also automatically report whether a medication is approved by the insurance company and if a generic is available.



The Evolv-CS New Prescription screen – when entering a new prescription, a list will inform the doctor whether the drug is formulary or not and if a generic is available.

Menu Set Objective 2:
 Incorporate clinical lab-test results into EHR as structured data.

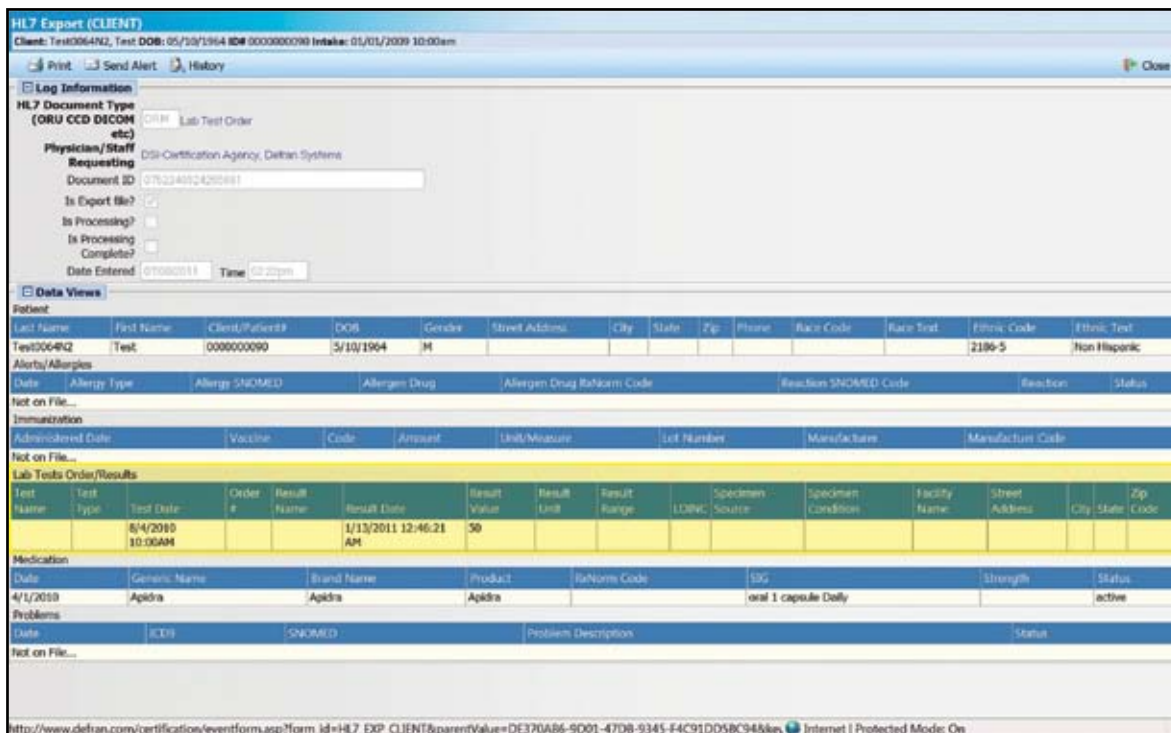
Measure

More than 40% of all clinical lab test results ordered by the EP for patients admitted during the EHR reporting period whose results are either in a positive/negative or numerical format are incorporated in certified EHR technology as structured data.



Objective facilitated by Evolv-CS:

Lab test results can be entered by the clinician or imported into the CCD in Evolv-CS, which stores them as structured data fields.



Lab Test results in the Evolv-CS Continuity of Care Document (CCD)

Menu Set Objective 3:

Generate patient lists by specific conditions to use for quality improvement, reduction of disparities, research or outreach.

Measure

Generate at least one report listing patients of the EP.



Objective facilitated by Evolv-CS:

Evolv-CS generates a Patient List report that can be sorted by various criteria. In this case, the report below shows the patient list sorted by the criteria of problem.

Date: 7/15/2011
Time: 5:05 PM

**A Generic Agency
Patient Lists**
Order by: Problem/Client Name
07/01/2008 - 07/01/2011

Selection Criteria: All

Problem: Asthma

Client	Problem Category	Priority	Date Identified	Narrative
Brown, Marnae (0000000034)	Medical/Physical	N/A	12/21/2010	Additional information is available
Bichy, Lionel (0000000003)	Medical/Physical	N/A		Additional information is available

Problem: Depression

Client	Problem Category	Priority	Date Identified	Narrative
adams, samuel (0000000009)	Behavioral	N/A		Not eating or sleeping
Bourne, Jason (0000000021)	Behavioral	N/A	12/10/2010	Not eating or sleeping
Case, Test (0000000005)	Behavioral	N/A	12/01/2010	Not eating or sleeping
Danzonfield, Rodney (0000000018)	Behavioral	N/A		Not eating or sleeping
Fisher, Carol (0000000020)	Behavioral	N/A		Not eating or sleeping
Test_Case5 (0000000081)	Behavioral	N/A	01/01/2011	Not eating or sleeping

Problem: Essential Hypertension

Client	Problem Category	Priority	Date Identified	Narrative
Ames, Alan (0000000022)	Medical/Physical	N/A	12/01/2010	
Ebbert, Sarah (0000000035)	Medical/Physical	N/A	01/05/2011	
Gaffert, Wilkie (0000000052)	Medical/Physical	N/A	12/08/2010	
Lane, Lois (0000000025)	Medical/Physical	N/A	12/22/2010	
Musler, Don (0000000025)	Medical/Physical	N/A	11/10/2010	
Shaw, Elizabeth (0000000029)	Medical/Physical	N/A	12/30/2010	
Street, Cate (0000000024)	Medical/Physical	N/A	12/02/2010	
Tremont, Belle (0000000023)	Medical/Physical	N/A	11/05/2009	
Zacaria, Juan (0000000027)	Medical/Physical	N/A	12/22/2010	

Problem: Generic Problem

Client	Problem Category	Priority	Date Identified	Narrative
Halleen, David (0000000056)	Behavioral	N/A		Enter Descriptive Information:

Problem: Hyperlipidemia

Internet | Protected Mode: On | 150%

Patient List filtered by Problem

Menu Set Objective 4:
Send patient reminders per patient preference for preventive/follow-up care.

Measure
More than 20% of all unique patients 65 years or older or 5 years or younger were sent an appropriate reminder during the EHR reporting period.



Objective facilitated by Evolv-CS:

The Patient Reminder List Report provides the EP with information on how to remind the patient about preventative/follow-up care based on the patient’s preference. In the example below, the report informs the EP of the patient’s medications and dosage and also of their preferred method of contact.

**A Generic Agency
Patient Reminder List Report
Order by: Client Name/Medication
As of 7/15/2011**

Selection Criteria: All

Client: Cross, David (0000000013)	Contact Preferences:	DOB: 9/10/1972	Gender: Female
Day Phone: (609)656-3055	By Phone Evening Phone:	By SMS Mobile Phone:	By Email Email:
Medications			
Medication	Take/sig	Date Prescribed	Staff Responsible
Coumadin	Take 1 tablet(s) once a day	1/3/2011 9:32:33 PM	Sheedy, Lynne
Coumadin	Take 1 tablet(s) once a day	1/2/2011 8:46:55 PM	Sheedy, Lynne
Penicillin V Potassium	Take 1 tablet(s) three times a day	1/4/2011 1:34:39 PM	Sheedy, Lynne
Penicillin V Potassium	Take 1 tablet(s) three times a day	1/2/2011 8:46:53 PM	Sheedy, Lynne
Client: Ebbert, Sarah (0000000035)	Contact Preferences:	DOB: 10/8/1962	Gender: Male
Day Phone: (814)645-6489	By Phone <input checked="" type="checkbox"/> Evening Phone:	By SMS Mobile Phone:	By Email Email: lmsheedy@gmail.com
Medications			
Medication	Take/sig	Date Prescribed	Staff Responsible
Klor Con	oral 1 tablet Daily	7/5/2006	Sheedy, Lynne
Lasix	oral 1 tablet Daily	7/5/2006	Sheedy, Lynne
Lipitor	oral 1 tablet Daily	7/5/2006	Sheedy, Lynne
Client: Eckerd, Sally (0000000036)	Contact Preferences:	DOB: 8/8/1962	Gender: Female
Day Phone:	By Phone Evening Phone:	By SMS Mobile Phone:	By Email Email:
Medications			
Medication	Take/sig	Date Prescribed	Staff Responsible
Klor Con	oral 1 tablet Daily	7/5/2006	Sheedy, Lynne
Lasix	oral 1 tablet Daily	7/5/2006	Sheedy, Lynne
Lipitor	oral 1 tablet Daily	7/5/2006	Sheedy, Lynne
Client: Ellerby, Susan (0000000037)	Contact Preferences:	DOB: 12/8/1963	Gender: Female
	By Phone <input checked="" type="checkbox"/> Evening Phone:	By SMS Mobile Phone:	By Email Email:

The Patient Reminder List Report for medication

Menu Set Objective 5:

Provide patients with timely electronic access to their health information (including lab results, problem list, medication lists and allergies) within 4 business days of the information being available to the EP.

Measure

More than 10% of all unique patients seen by the EP are provided timely electronic access to their health information subject to the EP’s discretion to withhold certain information (available to the patient within 4 business days of being updated in the certified EHR technology).



Objective facilitated by Evolv-CS:

A patient’s health information can be provided through the Evolv-CS Client Portal, which can be configured to display all pertinent information.



Patients can access their health information through the Client Health Information Portal.

Menu Set Objective 6:

Use certified EHR technology to identify patient-specific education resources and provide those resources to the patient if appropriate.

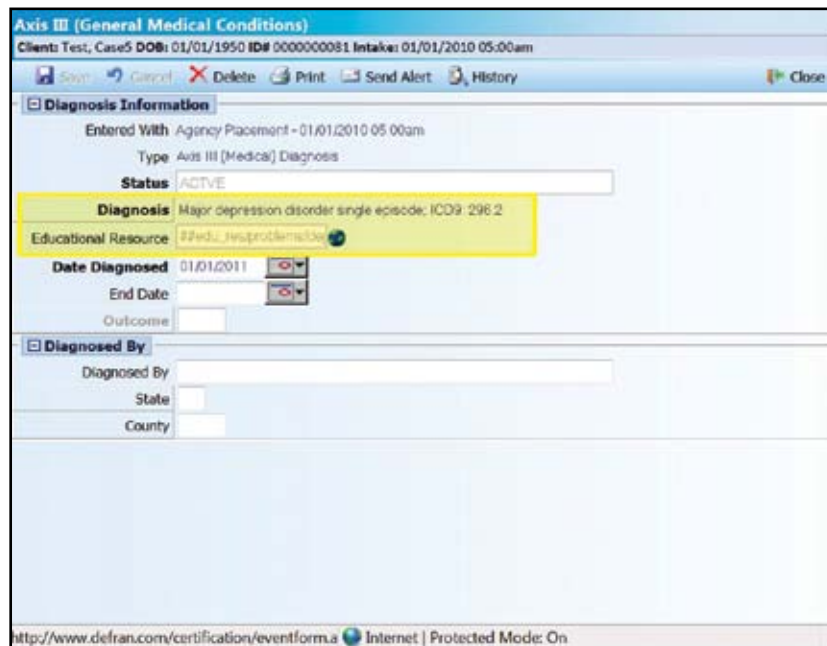
Measure

More than 10% of all unique patients seen by the EP are provided patient-specific education resources.



Objective facilitated by Evolv-CS:

Evolv-CS can be setup to provide relevant web based educational resources (links to health related websites) which the EP can provide to the patient. In the screenshot below, the Educational Resource is a link to a website based on the diagnosis of major depression. The EP can click on the icon and be taken to a website that provides educational information pertaining to the diagnosis.



Evolv-CS patient-specific educational resources

Menu Set Objective 7:

The EP who receives a patient from another setting of care or provider of care, or believes an encounter is relevant, should perform 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.



Objective facilitated by Evolv-CS:

Requirement is for the system to have the ability to have both medication reports opened on your screen simultaneously to perform the reconciliation.

One way to do this is to compare the incoming patient’s transfer record with their Evolv-CS ePrescribing record.

A data field can be used to verify that reconciliation has been performed.



Medication reconciliation can be performed by comparing the patient’s Evolv-CS ePrescribing record with their incoming transfer record.

Menu Set Objective 8:

The EP who transitions their patient to another setting of care or provider of care, or refers their patient to another provider of care should provide summary care record for each transition of care or referral.

Measure

The EP who transitions or refers their patient to another setting of care or provider of care provides a summary of care record for more than 50% of transitions of care and referrals.



Objective facilitated by Evolv-CS:

The patient's CCD, Health Biography or Face Sheet would be this summary record.

Priority	ICD9 Code	DSM IV Code	Diagnosis	Date Diagnosed				
Diagnosis History								
Axis I (Clinical Disorders):								
Not on File...								
Axis II (Personality Disorders):								
Not on File...								
Axis III (General Medical Conditions):								
007.0			BALANTIDIASIS	1/1/2011				
296.2			Major depression disorder single episode	1/1/2008				
296.2			Major depression disorder single episode	1/1/2011				
Axis IV (Psychosocial Environmental Problems):								
Not on File...								
Axis V (Global Assessment of Functioning Scale):								
Not on File...								
Immunization History								
Not on File...								
Lab Tests Results								
Test	Test Date	Result Date	Result	Result Value	Result - Typed	Result Value - Typed	Provider	Provider Address
Blood Count	1/1/2011	8/1/2011						
Medication History								
Not on File...								
Treatment/Hospitalization History								
Not on File...								
Health Activities and Services								
Not on File...								

Health Biography Report.

MEANINGFUL USE MENU SET OBJECTIVES AND MEASURES

Eligible providers may choose **at least one of two** public health objectives and measures (Menu Set #9 and #10) to meet the Meaningful Use requirements in Stage 1. These objectives include submitting electronic immunization information to immunization registries or immunization information systems, and/or submitting electronic syndromic surveillance data to public health agencies.

Menu Set Objective 9:
 Capability to submit electronic data to immunization registries or immunization information systems and actual submission according to applicable law and practice.

Measure

Performed at least one test of the certified EHR technology's capacity to submit electronic data to immunization registries and follow-up submission if the test is successful.

(Unless none of the immunization registries to which the EP, eligible hospital or CAH submits such information have the capacity to receive such information electronically.)



Objective facilitated by Evolv-CS:

This is handled through the HL7 Export/CCD type.

The screenshot displays the 'HL7 Export/CCD' configuration window. The 'HL7 Document Type' is set to 'Vaccine Unvaccinated Update'. The 'Data Views' section shows a table of patient data:

Last Name	First Name	Char/Patient#	DOB	Gender	Street Address	City	State	Zip	Phone	Race Code	Race Text	Ethnic Code	Ethnic Text
Test	CareS	000000001	1/1/1970	M								2100-5	Non Hispanic

HL7 Export/CCD

Menu Set Objective 10:
 Capability to submit electronic syndromic surveillance data to public health agencies and actual submission according to applicable law and practice.

Measure

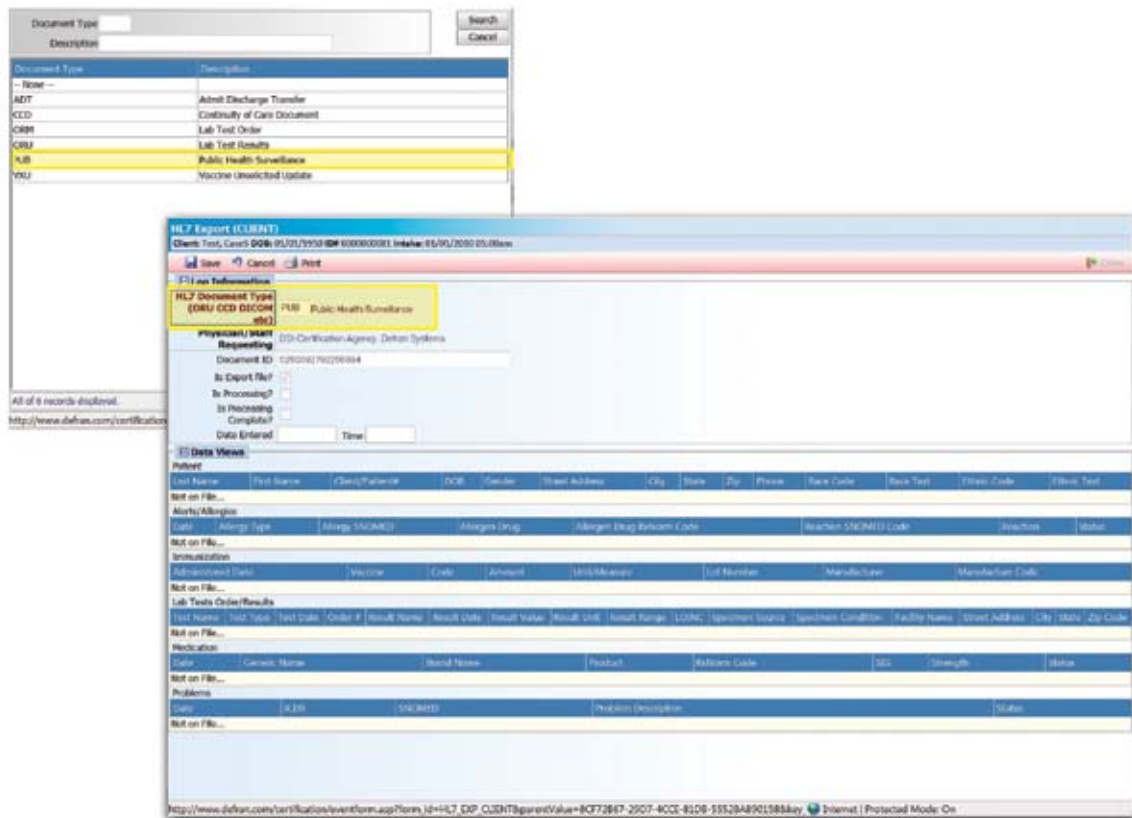
Performed at least one test of certified EHR technology’s capacity to provide electronic syndromic surveillance data to public health agencies and follow-up submission if the test is successful.

(Unless none of the public health agencies to which the EP submits such information have the capacity to receive such information electronically.)



Objective facilitated by Evolv-CS:

This is handled through the HL7 Export/CCD type.



HL7 Export/CCD

Defran Systems is providing this material as an informational reference for users of the Evolv-CS EHR. Great effort has been made to provide information that is as accurate as possible. However, while this guide can help guide the eligible professionals who provide care down the path toward receiving ARRA incentive payments, EPs must stay current with the program requirements which are subject to change by CMS. Eligibility for receiving Meaningful Use incentive funds is dependent upon factors other than the use of a certified EHR. It is the responsibility of EPs to determine whether they perform the activities that will qualify them to be eligible for payments.



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