| Objective #& | Objective Description | Measures | Exclusions |
|---|---|---|--|
| Name | | | |
| 1-Protect Electronic Health Information | Protect electronic protected health information (ePHI) created or maintained by the CEHRT through the implementation of appropriate technical, administrative, and physical safeguards. | Conduct or review a security risk analysis (SRA) in accordance with the requirements under the Health Insurance Portability and Accountability Act (HIPAA) Rules, including addressing the security (including encryption) of ePHI created or maintained by CEHRT, implement security updates as necessary, and correct identified security deficiencies as part of the provider's risk management process. | None. |
| 2-Electronic Prescribing (eRx) | Providers must generate and transmit permissible prescriptions electronically. | EP Measure: More than 60% of all permissible prescriptions written by the EP are queried for a drug formulary and transmitted electronically using CEHRT. EH/CAH Measure: More than 25% of a hospital's discharge medication orders for permissible prescriptions (for new and changed prescriptions) are queried for a drug formulary and transmitted electronically using CEHRT. | Any EP who: (1) writes fewer than 100 permissible prescriptions during the EHR reporting period; or (2) does not have a pharmacy within their organization and there are no pharmacies that accept electronic prescriptions within 10 miles of the EP's practice location at the start of his or her EHR reporting period. Any eligible hospital or CAH that does not have an internal pharmacy that can accept electronic prescriptions and there are no pharmacies that accept electronic prescriptions within 10 miles at the start of their EHR reporting period. |
| 3-Clinical | Implement clinical | Measure 1: The provider must implement five CDS interventions | Measure 2 Exclusion: Any EP who |
| Decision | decision support | related to four or more CQMs at a relevant point in patient care | writes fewer than 100 medication |



| Support | (CDS) interventions focused on improving performance on high-priority health conditions. | for the entire EHR reporting period. Absent four CQMs related to an EP, eligible hospital, or CAH's scope of practice or patient population, the clinical decision support interventions must be related to high-priority health conditions. Measure 2: The provider has enabled and implemented the functionality for drug-drug and drug-allergy interaction checks for the entire EHR reporting period. | orders during the EHR reporting period. |
|---|---|---|---|
| 4- Computerized Provider Order Entry (CPOE) | Use computerized provider order entry (CPOE) for medication, laboratory, and diagnostic imaging orders. | Measure 1: More than 60% of medication orders created by the EP or authorized providers of the EH's or CAH's inpatient or emergency department (ED) during the EHR reporting period are recorded by CPOE. Measure 2: More than 60% laboratory orders created by the EP or authorized providers of the EH's or CAH's inpatient or ED during the EHR reporting period are recorded by CPOE. Measure 3: More than 60% of diagnostic imaging orders created by the EP or authorized providers of the EH's or CAH's inpatient or ED during the EHR reporting period are recorded by CPOE. (an increase from Stage 2's 30% threshold) | Measure 1 Exclusion: Any EP who writes fewer than 100 medication orders during the EHR reporting period. Measure 2 Exclusion: Any EP who writes fewer than 100 laboratory orders during the EHR reporting period. Measure 3 Exclusion: Any EP who writes fewer than 100 diagnostic imaging orders during the EHR reporting period. |
| 5-Patient Electronic Access to Health Information | The EP, eligible hospital or CAH provides patients (or patient-authorized representative) with timely electronic access to their health information and patient-specific education. | Measure 1: For more than 80% of all unique patients seen by the EP or discharged from the EH or CAH inpatient or ED (an increase from Stage 2's 50% threshold): Option 1: The patient or authorized representative is provided timely access to view online, download, and transmit their health information; and Option 2: The provider ensures the patient's health information is available for the patient or authorized representative to access using any application of their choice that is configured to meet the technical specifications of the API in the provider's CEHRT. | A provider may exclude the measures if one of the following apply: -An EP may be excluded from the measure if they have no office visits during the EHR reporting period. -Any EP that conducts 50 percent or more of his or her patient encounters in a county that does not have 50 percent or more of its housing units with 4Mbps |



| | | Measure 2: The EP, EH or CAH must use clinically relevant information from CEHRT to identify patient-specific educational resources and provide electronic access to those materials to more than 35% of unique patients seen by the EP or discharged from the EH or CAH inpatient or ED during the EHR reporting period. (an increase from Stage 2's 10% threshold) | broadband availability according to the latest information available from the FCC on the first day of the EHR reporting period may exclude the measure. -Any eligible hospital or CAH will be excluded from the measure if it is located in a county that does not have 50 percent or more of their housing units with 4Mbps broadband availability according to the latest information available from the FCC at the start of the EHR reporting period. |
|--|---|--|---|
| 6- Coordination of Care through Patient Engagement | Use CEHRT to engage with patients or their authorized representatives about the patient's care. | Measure 1: During the EHR reporting period, more 10% of all unique patients (or their authorized representatives) seen by the EP or discharged from the eligible hospital or CAH inpatient or emergency department actively engage with the electronic health record made accessible by the provider. An EP, EH or CAH may meet the measure by either: Option 1: view, download or transmit to a third party their health information; or Option 2: access their health information through the use of an ONC-certified API that can be used by third-party applications chosen by the patient and configured to the API in the provider's CEHRT; or Option 3: A combination of 1 and 2. Measure 2: For more than 25% of all unique patients seen by the EP or discharged from the eligible hospital or CAH inpatient or emergency during the EHR reporting period, a secure message was sent using the electronic messaging function of CEHRT to the | A provider may exclude the measures if one of the following apply: -An EP may exclude from the measure if they have no office visits during the EHR reporting period. -Any EP that conducts 50 percent or more of his or her patient encounters in a county that does not have 50 percent or more of its housing units with 4Mbps broadband availability according to the latest information available from the FCC on the first day of the EHR reporting period may exclude the measure. -Any eligible hospital or CAH will be excluded from the measure if |



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| | | message sent by the patient or the authorized representative. | not have 50 percent or more of |
| | | | their housing units with 4Mbps |
| | | Measure 3: Patient generated health data or data from a non- | broadband availability according |
| | | clinical setting is incorporated into the certified EHR technology | to the latest information available |
| | | for more than 5% of all unique patients seen by the EP or | from the FCC at the start of the |
| | | discharged by the EH or CAH during the EHR reporting period. | EHR reporting period. |
| 7-Health | The EP, eligible | Measure 1: For more than 50% of transitions of care and | Measure 1 Exclusions: A provider |
| Information | hospital, or CAH | referrals, the EP, EH or CAH that transitions or refers their patient | may exclude from the measure if |
| Exchange | provides a summary | to another setting of care or provider of care: | any of the following apply: |
| | of care record when | (1) creates a summary of care record using CEHRT; and | o Any EP who transfers a patient |
| | transitioning or | (2) electronically exchanges the summary of care record. | to another setting or refers a |
| | referring their patient | | patient to another provider less |
| | to another setting of | Measure 2: For more than 40% of transitions or referrals received | than 100 times during the EHR |
| | care, receives or | and patient encounters in which the provider has never before | reporting period. |
| | retrieves a summary | encountered the patient, the EP, EH or CAH receives or retrieves | o Any EP that conducts 50 |
| | of care record upon | and incorporates into the patient record an electronic summary | percent or more of his or her |
| | the receipt of a | of care document. | patient encounters in a county |
| | transition or referral | | that does not have 50 percent or |
| | or upon the first | Measure 3: For more than 80% of transitions or referrals received | more of its housing units with |
| | patient encounter | and patient encounters in which the provider has never before | 4Mbps broadband availability |
| | with a new patient, | encountered the patient, the EP, EH, or CAH performs a clinical | according to the latest |
| | and incorporates | information reconciliation. The provider would perform | information available from the |
| | summary of care | reconciliations for the following three clinical information sets: | FCC on the first day of the EHR |
| | information from | Medication. Review of the patient's medication, including the | reporting period may exclude the |
| | other providers into | name, dosage, frequency, and route of each medication. | measures. |
| | their EHR using the | Medication allergy. Review of the patient's known allergic | o Any eligible hospital or CAH will |
| | functions of CEHRT. | medications. | be excluded from the measure if |
| | | Current Problem list. Review of the patient's current and active | it is located in a county that does |
| | | diagnoses. | not have 50 percent or more of |
| | | | their housing units with 4Mbps |
| | | | broadband availability according |
| | | | to the latest information available |
| | | | from the FCC at the start of the |
| | | | EHR reporting period. |
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| | Measure 2 Exclusions: A provider |
|--|-------------------------------------|
| | may exclude from the measure if |
| | any of the following apply: |
| | o Any EP, eligible hospital or CAH |
| | for whom the total of transitions |
| | |
| | or referrals received and patient |
| | encounters in which the provider |
| | has never before encountered |
| | the patient, is fewer than 100 |
| | during the EHR reporting period is |
| | excluded from this measure. |
| | o Any EP that conducts 50 |
| | percent or more of his or her |
| | patient encounters in a county |
| | that does not have 50 percent or |
| | more of its housing units with |
| | 4Mbps broadband availability |
| | according to the latest |
| | information available from the |
| | FCC on the first day of the EHR |
| | reporting period may exclude the |
| | measures. |
| | o Any eligible hospital or CAH will |
| | be excluded from the measure if |
| | it is located in a county that does |
| | not have 50 percent or more of |
| | their housing units with 4Mbps |
| | broadband availability according |
| | to the latest information available |
| | from the FCC at the start of the |
| | EHR reporting period. |
| | Measure 3 Exclusion: Any EP, |
| | eligible hospital or CAH for whom |
| | AMEDICAN |



| | | | the total of transitions or referrals received and patient encounters in which the provider has never before encountered the patient, is fewer than 100 during the EHR reporting period is excluded from this measure. |
|---------------------------------|--|---|---|
| 8-Public Health Reporting | The EP, eligible hospital or CAH is in active engagement with a public health agency to submit electronic public health data from CEHRT. | Measure 1 – Immunization Registry Reporting: The EP, EH, or CAH is in active engagement with a public health agency to submit immunization data and receive immunization forecasts and histories from the public health immunization registry/immunization information system (IIS). Measure 2 – Syndromic Surveillance Reporting: The EP, EH, or CAH is in active engagement with a public health agency to submit syndromic surveillance data from a non-urgent care ambulatory setting for EPs, or an emergency or urgent care department for EH's and CAHs. Measure 3 - Case Reporting: The EP, EH, or CAH is in active engagement with a public health agency to submit case reporting of reportable conditions. Measure 4 - Public Health Registry Reporting: The EP, EH, or CAH is in active engagement with a public health agency to submit data to public health registries. Measure 5 – Clinical Data Registry (CDR) Reporting: The EP, EH, or CAH is in active engagement to submit data to a CDR. Measure 6 – Electronic Reportable Laboratory Result Reporting: The EH or CAH is in active engagement with a public health agency to submit electronic reportable laboratory results. This measure is available to EH's and CAHs only. | All 6 Measures: Any EP, EH, or CAH meeting one or more of the following criteria may be excluded from the respective measure: (1) operates in a jurisdiction for which no PHA/CDR is capable of accepting electronic registry transactions in the specific standards required to meet the CEHRT definition at the start of the EHR reporting period; or (2) operates in a jurisdiction where no PHA/CDR has declared readiness to receive the respective data as of 6 months prior to the start of the EHR reporting period. Additional Exclusions Per Measure: See table below. |



Public Health and Clinical Data Registry Reporting Objective for EPs, EHs, & CAHs in Stage 3 (P.433)

| Measure | Maximum times measure can count towards objective for EP | Maximum times measure can count towards objective for eligible hospital or CAH |
|--|--|--|
| 1-Immunization Registry Reporting | 1 | 1 |
| 2-Syndromic Surveillance Reporting | 1 | 1 |
| 3-Case Reporting | 1 | 1 |
| 4-Public Health Registry Reporting* | 3 | 4 |
| 5-Clinical Data Registry Reporting** | 3 | 4 |
| 6–Electronic Reportable Laboratory Results | N/A | 1 |

^{*}EPs, eligible hospitals, and CAHs may choose to report to more than one public health registry to meet the number of measures required to meet the objective. A specialized registry to which the EP, eligible hospital or CAH reported using Active Engagement Option 3: Production in a prior year under the EHR Incentive Programs in 2015 through 2017 public health reporting objective may also count toward the measure in 2017, 2018 and subsequent years.

Objective 8 8-Public Health Reporting - Additional Exclusions Per Measure

| Measure | Exclusion |
|---------|---|
| 1 | The EP, EH, or CAH does not administer any immunizations to any of the populations for which data is collected by their |
| | jurisdiction's immunization registry or immunization information system during the EHR reporting period. |
| 2 | EPs: the EP is not in a category of providers from which ambulatory syndromic surveillance data is collected by their |
| | jurisdiction's syndromic surveillance system; |
| | Eligible Hospitals/CAHs: the EH or CAH does not have an emergency or urgent care department. |
| 3 | The EP, eligible hospital, or CAH does not treat or diagnose any reportable diseases for which data is collected by their |
| | jurisdiction's reportable disease system during the EHR reporting period |
| 4 | The EP, EH, or CAH does not diagnose or directly treat any disease or condition associated with a public health registry in |
| | their jurisdiction during the EHR reporting period |
| 5 | The EP, EH, or CAH does not diagnose or directly treat any disease or condition associated with a clinical data registry in their |
| | jurisdiction during the EHR reporting period. |
| 6 | The EH or CAH does not perform or order laboratory tests that are reportable in their jurisdiction during the EHR reporting |
| | period. |



^{**}EPs, eligible hospitals, and CAHs may choose to report to more than one clinical data registry to meet the number of measures required to meet the objective.