**practice fusion**

# 2014 Meaningful Use attestation checklist

Use this checklist to prepare for your Meaningful Use attestation. The deadline for Medicare providers to attest for 2014 incentives is **March 20, 2015.** Medicaid providers should check with their state Medicaid agency for deadline information, but should attest by March 20, 2015 because that is the last date the 2014 Meaningful Use Dashboard will update.

**It's your responsibility to maintain paper or electronic documentation that fully supports the data submitted during attestation for at least six years to ensure you're prepared for a potential audit.**

You must report the following items during attestation:

| Stage 1 | Stage 2 |
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| • 13 core measures<br>• 5 of 9 menu measures (including 1 public health measure)<br>• 9 clinical quality measures (CQMs) that relate to 3 National Quality Strategy (NQS) domains | • 17 core measures<br>• 3 of 6 menu measures<br>• 9 clinical quality measures (CQMs) that relate to 3 National Quality Strategy (NQS) domains |

When you're ready to attest:

- Collect documentation you will use to submit your Meaningful Use data
- **Medicare:** Attest on the CMS Registration and Attestation system
- **Medicaid:** Attest to your state Medicaid program website/portal

| CMS RESOURCES | PRACTICE FUSION RESOURCES |
|---|---|
| EHR Incentive Program Hotline:<br>1-888-734-6433<br>Stage 1 Attestation Guide<br>Stage 2 Attestation Guide<br>Stage 1 Attestation Worksheet<br>Stage 2 Attestation Worksheet<br>Stage 1 Attestation Calculator<br>Stage 2 Attestation Calculator<br>Stage 1 Audit Supporting Documentation Guide<br>Stage 2 Audit Supporting Documentation Guide | Meaningful Use Center<br>Practice Fusion Attestation Webinar<br>Attestation Tutorial Video<br>CQM Calculation Guide |

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| **1**    **CMS REGISTRATION** | ☐ |

You must register with CMS before you complete attestation for either the Medicare or Medicaid program. You will need the following information:

- National Provider Identifier (NPI)
- Practice Fusion's CMS EHR Certification ID: available on the Meaningful Use Center
- National Plan and Provider Enumeration System (NPPES) User ID and Password
- Billing Tax Identification Number (TIN)

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| **2**    **REPORTING PERIOD DATES** | ☐ |

Confirm your reporting period start and end dates in the *Meaningful Use Dashboard*.

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| **3**    **PATIENT RECORDS IN PRACTICE FUSION** | ☐ |

Confirm you have charted more than 80% of your patient records in certified EHR technology (CEHRT). This is a requirement to meet Meaningful Use.

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| **4**    **MULTIPLE LOCATIONS** | ☐ |

If you work in multiple locations with CEHRT, the attestation needs to combine numerators and denominators from all CEHRT. Learn more about combining values from different CEHRT.

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| **5**    **DENOMINATOR TYPES** | ☐ |

You will need to address different denominator types for Meaningful Use. Some measures may be limited to patients whose records are maintained using CEHRT, while other measures must include all unique patients regardless of whether the patient's records are maintained using CEHRT.

- You will need to manually calculate patients who aren't entered in Practice Fusion for measures based on all unique patients.
- The Meaningful Use Dashboard values only include patients entered in Practice Fusion.
- Review the CMS Attestation User Guide to see which individual measures may be limited to patients maintained using CEHRT

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| **6**    **SIGN NOTES** | ☐ |

If you're using Practice Fusion's Meaningful Use Dashboard, make sure you've signed notes for all your patients seen during the reporting period in order to see data from those visits reflected in your Meaningful Use Dashboard.

Prior to signing each note, you must select a relevant encounter type in the Finalization section in order to receive Meaningful Use Dashboard credit.

| Meaningful Use attestation preparation item | Complete? |
|---|---|
| **7 CORE MEASURES**<br><br>Confirm you have either achieved or qualify for an exclusion to ALL core measures. Review the core measure requirements in the <u>Meaningful Use Center</u>. | ☐ |
| **8 MENU MEASURES**<br><br>Confirm you have either achieved or qualify for an exclusion to the required number of menu measures:<br><br>• You should choose menu measures that relate to your practice.<br>• In Stage 1, one menu measure must be from the public health list.<br>• Review the menu measure requirements in the <u>Meaningful Use Center</u>. | ☐ |
| **9 STAGE 1 PUBLIC HEALTH MEASURES**<br><br>You must choose at least one menu measure from the public health list (even if you're claiming an exclusion) in Stage 1:<br><br>• <u>Immunization Registry Data Submission</u><br>• <u>Syndromic Surveillance Data Submission</u><br><br>If you have completed either public health measure:<br><br>• Collect documentation that proves you have completed the information exchange (e.g., email or written confirmation of the exchange from the receiving party), even if the exchange was unsuccessful.<br><br>If you're claiming an exclusion to either public health measure:<br><br>• Prepare documentation to prove that you are excluded from both measures, even though you will only claim an exclusion for one during attestation. | ☐ |
| **10 EXCLUSION DOCUMENTATION**<br><br>Claiming an exclusion for a specific measure qualifies as submission of that measure. Note which measures for which you will claim an exclusion, if applicable. <u>Review the applicable exclusions.</u><br><br>**Prepare any documentation needed to prove that you qualify for that exclusion and save it in your records for at least six years.** | ☐ |
| **11 SECURITY RISK ANALYSIS**<br><br>Save a signed and dated copy of your completed <u>Security Risk Analysis</u>, including any documentation that supports the activities that you completed as a result of the analysis, **for at least six years**. | ☐ |

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| Meaningful Use attestation preparation item | Complete? |
|---|---|
| **12**   **SCREENSHOTS FOR YES/NO MEASURES**<br><br>Save screenshots of functionality enabled for the entire reporting period to serve as supporting documentation for the following measures in case of an audit:<br><br>    • Drug Interaction Checks (Stage 1)<br><br>    • Drug Formulary Checks (Stage 1)<br><br>    • Clinical Decision Support (Stage 1 & 2)<br><br>You must keep this documentation for at least six years. | ☐ |
| **13**   **PATIENT LIST REPORT**<br><br>Print or save screenshots of the patient list report you ran during your reporting period to serve as supporting documentation in case of an audit. Make sure to remove or blur PHI and keep this documentation for at least six years. | ☐ |
| **14**   **MEANINGFUL USE DASHBOARD COPY**<br><br>Take a screenshot or print out the Practice Fusion Meaningful Use Dashboard on the day you attest. You must keep this documentation for at least six years. | ☐ |
| **15**   **CORE AND MENU CALCULATIONS**<br><br>There may be instances where you choose to report values for core and menu measures that differ from the values in the Meaningful Use Dashboard. Make sure you keep documentation for these measures, including how you accounted for the values you're reporting, for at least six years. | ☐ |
| **16**   **CQM REPORT COPY**<br><br>Take a screenshot or print out your *PQRS Clinical Quality Measures Report* on the day you attest. You must keep this documentation for at least six years. | ☐ |

| Meaningful Use attestation preparation item | Complete? |
|---|---|
| **17**    **CLINICAL QUALITY MEASURES (CQMS)** | ☐ |

You must report nine CQMs related to three or more National Quality Strategy (NQS) domains.

- Data submitted for CQMs must be reported directly from information generated by Practice Fusion's *PQRS Clinical Quality Measures Report*.
- Reporting a value of zero (0) for a CQM will not prevent you from meeting the CQM requirement for Meaningful Use.

Reporting option #1: Electronic reporting

- Electronic reporting is for the full calendar year of 2014 and will allow you to receive credit for both PQRS and Meaningful Use. Learn more about electronic reporting.
- If you choose this option, you must use the *PQRS Clinical Quality Measures* dashboard to generate a file to submit to CMS. Learn more about this process.

Reporting option #2: Attestation

- If reporting CQMs via attestation, make sure to submit CQM data that matches your reporting period for Meaningful Use.
- This method of reporting only gives you credit for the EHR Incentive program, but allows you to complete your attestation at the same time you report data for core and menu measures.
- You may choose to report CQMs via attestation for Meaningful Use while also choosing to report CQM data electronically for PQRS.