

Stage 1 Meaningful Use and Clinical Quality Measures: Eligible Professionals (EPs)

Meaningful Use and Clinical Quality Measures

In 2011, Texas Medicaid implemented the Electronic Health Record (EHR) Incentive Program to encourage the adoption and meaningful use of certified EHR technology among eligible professionals and eligible hospitals. As part of this program, federal guidelines require participating providers to meet meaningful use (MU) criteria and report clinical quality measures (CQMs). The Stage 1 measures for eligible professionals that will be effective in 2012 are included below.

Meaningful Use Measures for Eligible Professionals (EPs)

CORE Set of MU Measures – Eligible Professionals (all must be met)			
#	Name	Measure	Exclusion
1	Computerized Provider Order Entry (CPOE) for Medication Orders	More than 30 percent of all unique patients with at least one medication in their medication list seen by the eligible professional (EP) have at least one medication order entered using CPOE.	Any EP who writes fewer than 100 prescriptions during the EHR reporting period.
2	Drug Interaction Checks	The EP has enabled drug-drug and drug-allergy interaction check functionality for the entire EHR reporting period.	None
3	Maintain Problem List	More than 80 percent 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.	None
4	e-Prescribing (eRx)	More than 40 percent of all permissible prescriptions written by the EP are transmitted electronically using certified EHR technology.	Any EP who writes fewer than 100 prescriptions during the EHR reporting period
5	Active Medication List	More than 80 percent 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.	None
6	Medication Allergy List	More than 80 percent 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.	None

Stage 1 Meaningful Use and Clinical Quality Measures: Eligible Professionals (EPs)

CORE Set of MU Measures – Eligible Professionals (all must be met)			
#	Name	Measure	Exclusion
7	Record Demographics	<p>More than 50 percent of all unique patients seen by the EP have demographics recorded as structured data:</p> <ul style="list-style-type: none"> • Preferred language • Gender • Race • Ethnicity • Date of birth 	None
8	Record Vital Signs	For more than 50 percent of all unique patients age 2 and over seen by the EP, height, weight, and blood pressure are recorded as structured data.	Any EP who either see no patients two years or older, or who believes that all three vital signs of height, weight, and blood pressure of their patients have no relevance to their scope of practice.
9	Record Smoking Status	More than 50 percent of all unique patients 13 years-old or older seen by the EP have smoking status recorded as structured data.	Any EP who sees no patients 13 years or older.
10	Clinical Quality Measures (CQMs)	Successfully report to the Centers for Medicare and Medicaid Services (CMS) ambulatory clinical quality measures selected by CMS in the manner specified by CMS.	None
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.	None
12	Electronic Copy of Health Information	<p>More than 50 percent of all patients who request an electronic copy of their health information are provided it within 3 business days.</p> <p>* Health information includes diagnostic test results, problem list, medication lists, and medication allergies</p>	Any EP that has no requests from patients or their agents for an electronic copy of patient health information during the EHR reporting period.
13	Clinical Summaries	Clinical summaries provided to patients for more than 50 percent of all office visits within 3 business days.	Any EP who has no office visits during the EHR reporting period.
14	Electronic Exchange of Clinical Information	Performed at least one test of certified EHR technology's capacity to electronically exchange key clinical information.	None

Stage 1 Meaningful Use and Clinical Quality Measures:
Eligible Professionals (EPs)

CORE Set of MU Measures – Eligible Professionals (all must be met)			
#	Name	Measure	Exclusion
15	Protect Electronic Health Information	Conduct or review a security risk analysis in accordance with the requirements under 45 CFR 164.308(a)(1) and implement security updates as necessary and correct identified security deficiencies as part of its risk management process.	None

Stage 1 Meaningful Use and Clinical Quality Measures: Eligible Professionals (EPs)

MENU Set of MU Measures – Eligible Professionals (must choose 5 of the 10)			
#	Name	Measure	Exclusion
1	Immunization Registries Data Submission (Public Health Measure)	Performed at least one test of 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 submits such information has the capacity to receive the information electronically).	An EP who administers no immunizations during the EHR reporting period or where no immunization registry has the capacity to receive the information electronically.
2	Syndromic Surveillance Data Submission (Public Health 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 an EP submits such information has the capacity to receive the information electronically).	An EP who does not collect any reportable syndromic information on their patients during the EHR reporting period or does not submit such information to any public health agency that has the capacity to receive the information electronically.
3	Drug Formulary Checks	The EP has enabled this functionality and has access to at least one internal or external formulary for the entire EHR reporting period.	Any EP who writes fewer than 100 prescriptions during the EHR reporting period.
4	Clinical Lab Test Results	More than 40 percent of all clinical lab test results ordered by the EP 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.	An EP who orders no lab tests whose results are either in a positive/negative or numeric format during the EHR reporting period.
5	Patient Lists	Generate at least one report listing patients of the EP with a specific condition.	None
6	Patient Reminders	More than 20 percent of all patients 65 years or older or 5 years-old or younger were sent an appropriate reminder during the EHR reporting period. * Reminders could be for preventive or follow up care, and are based on patient preference.	An EP who has no patients 65 years-old or older or 5 years-old or younger with records maintained using certified EHR technology.
7	Patient Electronic Access	At least 10 percent of all unique patients seen by the EP are provided timely (available to the patient within four business days of being updated in the certified EHR technology) electronic access to their health information subject to the EP's discretion to withhold certain information. * Health information can include lab results, problem list, medication lists, and allergies	Any EP that neither orders nor creates lab tests or information that would be contained in the problem list, medication list, medication allergy list (or other information as listed at 45 CFR 170.304(g)) during the EHR reporting period.

Stage 1 Meaningful Use and Clinical Quality Measures:
Eligible Professionals (EPs)

MENU Set of MU Measures – Eligible Professionals (must choose 5 of the 10)			
#	Name	Measure	Exclusion
8	Patient-specific Education Resources	More than 10 percent of all unique patients seen by the EP are provided patient-specific education resources. * Use certified EHR technology to identify patient-specific education resources.	None
9	Medication Reconciliation	The EP performs medication reconciliation for more than 50 percent of transitions of care in which the patient is transitioned into the care of the EP.	An EP who was not the recipient of any transitions of care during the EHR reporting period.
10	Transition of Care Summary	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 percent of transitions of care and referrals.	An EP who neither transfers a patient to another setting nor refers a patient to another provider during the EHR reporting period.

Stage 1 Meaningful Use and Clinical Quality Measures:
Eligible Professionals (EPs)

Clinical Quality Measures (CQMs) for Eligible Professionals (EPs)

Core Set – EPs			
(3 must be reported; may substitute one or more of these with measures from the Alternate Core Set)			
Title	Description	Exclusions **	NQF #
1. Hypertension: Blood Pressure Measurement	Percentage of patient visits for patients aged 18 years and older with a diagnosis of hypertension who have been seen for at least 2 office visits, with blood pressure (BP) recorded.	No	NQF 0013
2. Preventive Care and Screening Measure Pair: a) Tobacco Use Assessment, and b) Tobacco Cessation Intervention	a) Percentage of patients aged 18 years or older who have been seen for at least 2 office visits, who were queried about tobacco use one or more times within 24 months. b) Percentage of patients aged 18 years and older identified as tobacco users within the past 24 months and have been seen for at least 2 office visits, who received cessation intervention.	No	NQF 0028
3. Adult Weight Screening and Follow-Up	Percentage of patients aged 18 years and older with a calculated BMI in the past six months or during the current visit documented in the medical record AND if the most recent body mass index (BMI) is outside parameters, a follow-up plan is documented.	Yes	NQF 0421
Alternate Core Set – EPs			
(If the denominator for one or more of the core measures above is zero, EPs are required to report results for up to three alternate core measures. All values reported in the denominator of the measure should be the values produced by the certified EHR technology.)			
Title	Description	Exclusions **	NQF #
4. Weight Assessment and Counseling for Children and Adolescents	The percentage of patients 2-17 years of age who had an outpatient visit with a PCP or OB/GYN and who had evidence of BMI percentile documentation, counseling for nutrition and counseling for physical activity during the measurement year.	No	NQF 0024

** If a measure has exclusions, see

http://www.cms.gov/apps/ama/license.asp?file=/QualityMeasures/Downloads/EP_MeasureSpecifications.zip and open the appropriate file based on the NQF measure number.

Stage 1 Meaningful Use and Clinical Quality Measures: Eligible Professionals (EPs)

5. Preventive Care and Screening: Influenza Immunization for Patients \geq 50 Years Old	Percentage of patients aged 50 years and older who received an influenza immunization during the flu season (September through February).	Yes	NQF 0041
6. Childhood Immunization Status	The percentage of children two years of age who had four diphtheria, tetanus and acellular pertussis (DTaP); three polio (IPV); one measles, mumps and rubella (MMR); two H influenza type B (HiB); three hepatitis B (Hep B), one chicken pox (VZV); four pneumococcal conjugate (PCV); two hepatitis A (Hep A); two or three rotavirus (RV); and two influenza (flu) vaccines by their second birthday. The measure calculates a rate for each vaccine and two separate combination rates.	No	NQF 0038

Additional Set of CQMs – EPs (Must report on 3 of the following 38 measures)			
Title	Description	Exclusions **	NQF #
1. Diabetes: Hemoglobin A1c Poor Control	The percentage of patients 18–75 years of age with diabetes (type 1 or type 2) who had HbA1c >9.0 percent.	Yes	NQF 0059
2. Diabetes: Low Density Lipoprotein (LDL) Management and Control	The percentage of patients 18–75 years of age with diabetes (type 1 or type 2) who had LDL-C <100mg/dL	Yes	NQF 0064
3. Diabetes: Blood Pressure Management	The percentage of patients 18–75 years of age with diabetes (type 1 or type 2) who had BP <140/90 mmHg.	Yes	NQF 0061

** If a measure has exclusions, see

http://www.cms.gov/apps/ama/license.asp?file=/QualityMeasures/Downloads/EP_MeasureSpecifications.zip and open the appropriate file based on the NQF measure number.

Stage 1 Meaningful Use and Clinical Quality Measures:
Eligible Professionals (EPs)

Additional Set of CQMs – EPs (Must report on 3 of the following 38 measures)			
Title	Description	Exclusions **	NQF #
4. Heart Failure (HF): Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy for Left Ventricular Systolic Dysfunction (LVSD)	Percentage of patients aged 18 years and older with a diagnosis of heart failure and LVSD (LVEF < 40 percent) who were prescribed ACE inhibitor or ARB therapy.	Yes	NQF 0081
5. Coronary Artery Disease (CAD): Oral Antiplatelet Therapy Prescribed for Patients with CAD	Percentage of patients aged 18 years and older with a diagnosis of CAD who were prescribed oral antiplatelet therapy.	Yes	NQF 0067
6. Coronary Artery Disease (CAD): Beta-Blocker Therapy for CAD Patients with Prior Myocardial Infarction (MI)	Percentage of patients aged 18 years and older with a diagnosis of CAD and prior MI who were prescribed beta-blocker therapy.	Yes	NQF 0070
7. Heart Failure (HF): Beta-Blocker Therapy for Left Ventricular Systolic Dysfunction (LVSD)	Percentage of patients aged 18 years and older with a diagnosis of heart failure who also have LVSD (LVEF < 40 percent) and who were prescribed beta-blocker therapy.	Yes	NQF 0083
8. Primary Open Angle Glaucoma (POAG): Optic Nerve Evaluation	Percentage of patients aged 18 years and older with a diagnosis of POAG who have been seen for at least 2 office visits, who have an optic nerve head evaluation during one or more office visits within 12 months.	Yes	NQF 0086

** If a measure has exclusions, see http://www.cms.gov/apps/ama/license.asp?file=/QualityMeasures/Downloads/EP_MeasureSpecifications.zip and open the appropriate file based on the NQF measure number.

Stage 1 Meaningful Use and Clinical Quality Measures: Eligible Professionals (EPs)

Additional Set of CQMs – EPs (Must report on 3 of the following 38 measures)			
Title	Description	Exclusions **	NQF #
9. Diabetic Retinopathy: Documentation of Presence or Absence of Macular Edema and Level of Severity of Retinopathy	Percentage of patients aged 18 years and older with a diagnosis of diabetic retinopathy who had a dilated macular or fundus exam performed which included documentation of the level of severity of retinopathy and the presence or absence of macular edema during one or more office visits within 12 months.	Yes	NQF 0088
10. Diabetic Retinopathy: Communication with the Physician Managing Ongoing Diabetes Care	Percentage of patients aged 18 years and older with a diagnosis of diabetic retinopathy who had a dilated macular or fundus exam performed with documented communication to the physician who manages the on-going care of the patient with diabetes mellitus regarding the findings of the macular or fundus exam at least once within 12 months.	Yes	NQF 0089
11. Asthma Pharmacologic Therapy	Percentage of patients aged 5 through 40 years with a diagnosis of mild, moderate, or severe persistent asthma who were prescribed either the preferred long-term control medication (inhaled corticosteroid) or an acceptable alternative treatment.	Yes	NQF 0047
12. Asthma Assessment	Percentage of patients aged 5 through 40 years with a diagnosis of asthma and who have been seen for at least 2 office visits, who were evaluated during at least one office visit within 12 months for the frequency (numeric) of daytime and nocturnal asthma symptoms.	No	NQF 0001
13. Appropriate Testing for Children with Pharyngitis	The percentage of children 2-18 years of age who were diagnosed with Pharyngitis, dispensed an antibiotic and received a group A streptococcus (strep) test for the episode.	No	NQF 0002
14. Oncology Breast Cancer: Hormonal Therapy for Stage IC-III C Estrogen Receptor/Progesterone Receptor (ER/PR) Positive Breast Cancer	Percentage of female patients aged 18 years and older with Stage IC through III C, ER or PR positive breast cancer who were prescribed tamoxifen or aromatase inhibitor (AI) during the 12-month reporting period.	Yes	NQF 0387

** If a measure has exclusions, see

http://www.cms.gov/apps/ama/license.asp?file=/QualityMeasures/Downloads/EP_MeasureSpecifications.zip and open the appropriate file based on the NQF measure number.

Stage 1 Meaningful Use and Clinical Quality Measures: Eligible Professionals (EPs)

Additional Set of CQMs – EPs (Must report on 3 of the following 38 measures)			
Title	Description	Exclusions **	NQF #
15. Oncology Colon Cancer: Chemotherapy for Stage III Colon Cancer Patients	Percentage of patients aged 18 years and older with Stage IIIA through IIIC colon cancer who are referred for adjuvant chemotherapy, prescribed adjuvant chemotherapy, or have previously received adjuvant chemotherapy within the 12-month reporting period.	Yes	NQF 0385
16. Prostate Cancer: Avoidance of Overuse of Bone Scan for Staging Low Risk Prostate Cancer Patients	Percentage of patients, regardless of age, with a diagnosis of prostate cancer at low risk of recurrence receiving interstitial prostate brachytherapy, OR external beam radiotherapy to the prostate, OR radical prostatectomy, OR cryotherapy who did not have a bone scan performed at any time since diagnosis of prostate cancer.	Yes	NQF 0389
17. Pneumonia Vaccination Status for Older Adults	The percentage of patients 65 years of age and older who have ever received a pneumococcal vaccine.	No	NQF 0043
18. Breast Cancer Screening	The percentage of women 40–69 years of age who had a mammogram to screen for breast cancer.	No	NQF 0031
19. Colorectal Cancer Screening	The percentage of adults 50–75 years of age who had appropriate screening for colorectal cancer.	Yes	NQF 0034
20. Smoking & Tobacco Use Cessation, Medical Assistance: a) Advising Smokers & Tobacco Users to Quit, b) Discussing Smoking & Tobacco Use Cessation Medications, c) Discussing Smoking and Tobacco Use Cessation Strategies	The percentage of patients 18 years of age and older who were current smokers or tobacco users, who were seen by a practitioner during the measurement year and who received advice to quit smoking or tobacco use or whose practitioner recommended or discussed smoking or tobacco use cessation medications, methods or strategies.	No	NQF 0027
21. Diabetes: Eye Exam	The percentage of patients 18–75 years of age with diabetes (type 1 or type 2) who had a retinal or dilated eye exam or a negative retinal exam (no evidence of retinopathy) by an eye care professional.	Yes	NQF 0055

** If a measure has exclusions, see

http://www.cms.gov/apps/ama/license.asp?file=/QualityMeasures/Downloads/EP_MeasureSpecifications.zip and open the appropriate file based on the NQF measure number.

Stage 1 Meaningful Use and Clinical Quality Measures: Eligible Professionals (EPs)

Additional Set of CQMs – EPs (Must report on 3 of the following 38 measures)			
Title	Description	Exclusions **	NQF #
22. Diabetes: Urine Screening	The percentage of patients 18–75 years of age with diabetes (type 1 or type 2) who had a nephropathy screening test or evidence of nephropathy.	Yes	NQF 0062
23. Diabetes: Foot Exam	The percentage of patients aged 18-75 years with diabetes (type 1 or type 2) who had a foot exam (visual inspection, sensory exam with monofilament, or pulse exam).	Yes	NQF 0056
24. Coronary Artery Disease (CAD): Drug Therapy for Lowering LDL-Cholesterol	Percentage of patients aged 18 years and older with a diagnosis of CAD who were prescribed a lipid-lowering therapy (based on current American College of Cardiology (ACC)/ American Heart Association (AHA) guidelines).	Yes	NQF 0074
25. Heart Failure (HF): Warfarin Therapy Patients with Atrial Fibrillation	Percentage of all patients aged 18 and older with a diagnosis of heart failure and paroxysmal or chronic atrial fibrillation who were prescribed warfarin therapy.	Yes	NQF 0084
26. Ischemic Vascular Disease (IVD): Blood Pressure Management	The percentage of patients 18 years of age and older who were discharged alive for acute myocardial infarction (AMI), coronary artery bypass graft (CABG) or percutaneous transluminal coronary angioplasty (PTCA) from January 1– November 1 of the year prior to the measurement year, or who had a diagnosis of ischemic vascular disease (IVD) during the measurement year and the year prior to the measurement year and whose most recent blood pressure is in control (<140/90 mmHg).	No	NQF 0073
27. Ischemic Vascular Disease (IVD): Use of Aspirin or another Antithrombotic	The percentage of patients 18 years of age and older who were discharged alive for acute myocardial infarction (AMI), coronary artery bypass graft (CABG) or percutaneous transluminal coronary angioplasty (PTCA) from January 1–November 1 of the year prior to the measurement year, or who had a diagnosis of ischemic vascular disease (IVD) during the measurement year and the year prior to the measurement year and who had documentation of use of aspirin or another antithrombotic during the measurement year.	No	NQF 0068

** If a measure has exclusions, see

http://www.cms.gov/apps/ama/license.asp?file=/QualityMeasures/Downloads/EP_MeasureSpecifications.zip and open the appropriate file based on the NQF measure number.

Stage 1 Meaningful Use and Clinical Quality Measures: Eligible Professionals (EPs)

Additional Set of CQMs – EPs (Must report on 3 of the following 38 measures)			
Title	Description	Exclusions **	NQF #
28. Prenatal Care: Screening for Human Immunodeficiency Virus (HIV)	Percentage of patients, regardless of age, who gave birth during a 12-month period who were screened for HIV infection during the first or second prenatal visit.	Yes	NQF 0012
29. Prenatal Care: Anti-D Immune Globulin	Percentage of D (Rh) negative, unsensitized patients, regardless of age, who gave birth during a 12-month period who received anti-D immune globulin at 26-30 weeks gestation.	Yes	NQF 0014
30. Controlling High Blood Pressure	The percentage of patients 18-85 years of age who had a diagnosis of hypertension and whose BP was adequately controlled during the measurement year.	No	NQF 0018
31. Cervical Cancer Screening	The percentage of women 21-64 years of age who received one or more Pap tests to screen for cervical cancer.	No	NQF 0032
32. Chlamydia Screening for Women	The percentage of women 15-24 years of age who were identified as sexually active and who had at least one test for chlamydia during the measurement year.	Yes	NQF 0033
33. Use of Appropriate Medications for Asthma	The percentage of patients 5-50 years of age during the measurement year who were identified as having persistent asthma and were appropriately prescribed medication during the measurement year. Report three age stratifications (5-11 years, 12-50 years, and total).	Yes	NQF 0036
34. Low Back Pain: Use of Imaging Studies	The percentage of patients with a primary diagnosis of low back pain who did not have an imaging study (plain X-ray, MRI, CT scan) within 28 days of diagnosis.	No	NQF 0052

** If a measure has exclusions, see

http://www.cms.gov/apps/ama/license.asp?file=/QualityMeasures/Downloads/EP_MeasureSpecifications.zip and open the appropriate file based on the NQF measure number.

Stage 1 Meaningful Use and Clinical Quality Measures: Eligible Professionals (EPs)

Additional Set of CQMs – EPs (Must report on 3 of the following 38 measures)			
Title	Description	Exclusions **	NQF #
35. Ischemic Vascular Disease (IVD): Complete Lipid Panel and LDL Control	The percentage of patients 18 years of age and older who were discharged alive for acute myocardial infarction (AMI), coronary artery bypass graft (CABG) or percutaneous transluminal coronary angioplasty (PTCA) from January 1– November 1 of the year prior to the measurement year, or who had a diagnosis of ischemic vascular disease (IVD) during the measurement year and the year prior to the measurement year and who had a complete lipid profile performed during the measurement year and whose LDL-C was <100 mg/dL.	No	NQF 0075
36. Diabetes: Hemoglobin A1c Control (<8.0%)	The percentage of patients 18–75 years of age with diabetes (type 1 or type 2) who had HbA1c <8.0 percent.	Yes	NQF 0575
37. Initiation and Engagement of Alcohol and Other Drug Dependence Treatment	The percentage of adolescent and adult patients with a new episode of alcohol and other drug (AOD) dependence who initiate treatment through an inpatient AOD admission, outpatient visit, intensive outpatient encounter or partial hospitalization within 14 days of the diagnosis and who initiated treatment and who had two or more additional services with an AOD diagnosis within 30 days of the initiation visit.	No	NQF 0004
38. Anti-depressant medication management: a) Effective Acute Phase Treatment, b) Effective Continuation Phase Treatment	The percentage of patients 18 years of age and older who were diagnosed with a new episode of major depression, treated with antidepressant medication, and who remained on an antidepressant medication treatment.	No	NQF 0105

** If a measure has exclusions, see

http://www.cms.gov/apps/ama/license.asp?file=/QualityMeasures/Downloads/EP_MeasureSpecifications.zip and open the appropriate file based on the NQF measure number.