MEANINGFUL USE SELF ASSESSMENT

Objective	Measure	Data Capture Considerations	Functional Considerations	Obs Term Considerations	Workflow Considerations
	CORE SET				
Description All Core Set items must be achieved	**Goal**	**How is the objective documented?**	**Which specific functionality/encounter form is utilized?**	**Which Obs Terms are to be populated?**	**Are the Staff and Physician(s) performing this now? Why not?**
Computer provider order entry (CPOE) for medication orders	More than 30% of patients with at least one medication in their medication list have at least one medication ordered through CPOE.	Order Entry	EMR Order Entry Tab		
Implement Drug-Drug and Drug-Allergy interaction checks	Functionality is enabled for these checks for the entire reporting period.	Medication Entry	E-Prescribe in Medication Tab		
Maintain an up-to-date problem list of current and active diagnoses	More than 80% of patients have at least one entry recorded as structured data	Problem Entry	EMR Problem Tab		
Generate and transmit permissible prescriptions electronically	More than 40% are transmitted electronically using certified EMR technology.	E-Prescribe	E-Prescribe in Medication Tab		
Maintain active medication lists	More than 80% of patients have at least one entry recorded as structured data	Medication List	EMR Medication Tab		

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Maintain active medication allergy list	More than 80% of patients have at least one entry recorded as structured data	Medication List	EMR Allergy and Medications Tab		
Record Patient Demographics (Sex, race, ethnicity, date of birth, preferred language)	More than 50% of patients' demographic data recorded as structured data	Encounter Form	Which Ones?		
Record Vital signs and chart changes (height, weight, blood pressure, body mass index, plot and display growth charts for children (2-20 years old)	More than 50% of patients 2 years of age or older have height, weight and blood pressure recorded as structured data	Encounter Form			
Record smoking status for patients 13 years old or older	More than 50% of all patients 13 years or older have smoking status recorded as structured data.	Encounter Form			

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Report clinical quality measures to CMS or states	For 2011, provide aggregate numerator and denominator attestation; for 2012, electronically submit measures	Encounter Form DB Query Report			
Implement one clinical decision support rule and ability to track compliance with the rule	Once clinical decision support rule implemented	Encounter Form			
On request, provide patients with an electronic copy of their health information (including diagnostic test results, problem list, medication list, medication allergies)	More than 50% of requesting patients receive electronic copy within 3 business days.	Personal Health Record Thumb Drive or other removable media Portal Access			
For individual physicians, provide patients with clinical summaries for each office visit	Clinical summaries provided to patients for more than 50% of all office visits within 3 business days	Print out Personal Health Record Thumb Drive or other removable media Portal Access			

MEANINGFUL USE SELF ASSESSMENT

Objective	Measure	Data Capture Considerations	Functional Considerations	Obs Term Considerations	Workflow Considerations
Implement capability to electronically exchange key clinical information among providers and patient authorized entities	Perform at least one test of EMR's capacity to electronically exchange information	Health Information Exchange			
Implement systems to protect privacy and security of patient data in the EMR	Conduct or review a security risk analysis, implement security updates as necessary, and correct identified security deficiencies	Performed by independent consultant			

MEANINGFUL USE SELF ASSESSMENT

	MENU SET				
Description 5 of 10 Menu set items must be complied	**Measure**	**Data Capture Considerations**	**Functional Considerations**	**Obs Term Considerations**	**Workflow Considerations**
Implement drug formulary checks	Drug formulary checks system is implemented and has access to at least one internal or external drug formulary for the entire reporting period	E-Prescribe			
Incorporate clinical laboratory test results into EMR as structured data	More than 40% of clinical laboratory test results whose results are in positive/negative or numerical format are incorporated into EMR as structured data	Lab Order Entry and electronic results			
Generate lists of patients by specific conditions to use for quality improvement, reduction of disparities, research, or outreach	Generate at least one listing of patients with a specific condition	EMR report by dx			

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MEANINGFUL USE SELF ASSESSMENT

Objective	Measure	Data Capture Considerations	Functional Considerations	Obs Term Considerations	Workflow Considerations
Provide patients with timely electronic access to their health information (including lab results, problem list, medication lists, medication allergies)	More than 10% of patients are provided electronic access to information within 4 days of its being updated in the EMR.	Portal Access Personal Health Record			
Use certified EMR technology to identify patient-specific education resources and provide those to the patient as appropriate	More than 10% of patients are provided patient-specific education resources	Handouts from EMR			
Perform medication reconciliation between care settings	Medication reconciliation is performed for more than 50% of transitions of care	Health Information Exchange			
Provide summary of care record for patients referred or transitioned to another provider or setting	Summary of care record is provided for more than 50% of patient Transitions or referrals	Report			

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MEANINGFUL USE SELF ASSESSMENT

Objective	Measure	Data Capture Considerations	Functional Considerations	Obs Term Considerations	Workflow Considerations
Submit electronic syndromic surveillance data to public health agencies	Perform at least one test of data submission and follow-up submission (where public health agencies can accept electronic data)	Registry submission capability			

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