



Meaningful Use Stage 2

Creating the Foundation for Population Health

Forward

**Designing your Meaningful
Use Blueprint**

EHR Certification:
Breaking Ground

Patient Access:
Getting the Right Tools

CPOE:
Laying the Foundation

Direct Messaging:
Connecting the Right People

Technology Replacement:
Enabling Your Team

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You've downloaded this eBook just in time.

Are you ready to begin building toward Meaningful Use (MU) Stage 2? Each MU requirement is a building block that leads organizations toward improved outcomes and reduced costs. Combined with the right technology and processes, these pieces create the structure for organizations to better position themselves in a healthcare marketplace that is moving toward population health management.

Thriving in the current environment requires leadership and direction based on experience and perspective. With thousands of successful implementations and attestations, Allscripts has earned its position as an industry leader.

We offer this ebook as a construction plan—developed through years of experience—to help organizations with their MU challenges.

In this book, you'll find:

- Key elements that will help organizations achieve their Stage 2 requirements
- Tips to remain focused on the long-term goals of improving population health
- Recommendations for organizations to succeed in the new healthcare environment

Ready to get started?

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CHAPTER 1

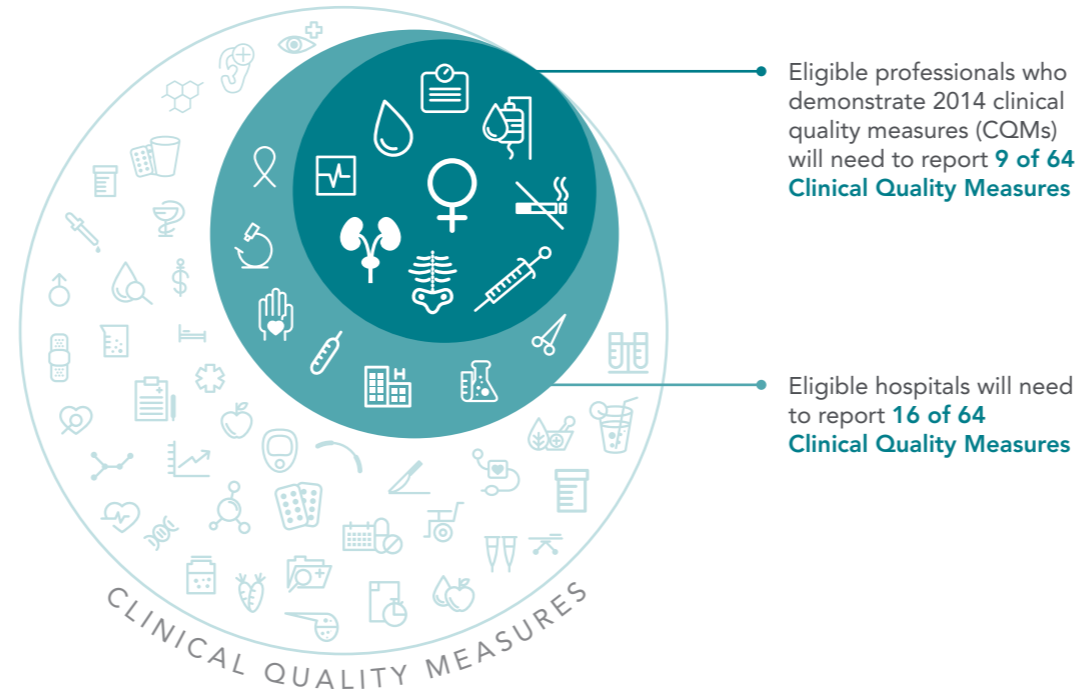
Designing your Meaningful Use Blueprint

Designing Your Meaningful Use Blueprint

Stage 2 of Meaningful Use is already underway. Eligible professionals (EPs) could have begun on January 1, 2014. Preparing for MU means adapting workflows to meet Stage 2 criteria and verifying that these changes won't interfere with care delivery. Organizations should begin their Stage 2 efforts by assessing existing workflows to identify areas where changes are needed to meet expanded requirements. Having your own vendor handle the assessment makes it easier to identify gaps. Surprise! You may already meet some of the criteria. That's great news. Next, organizations will need to select Clinical Quality Measures (CQMs). You may already be addressing some of these too.

DO-IT-YOURSELF TIPS

- Engage EHR vendor to conduct workflow and technology gap assessments
- Select CQMs, determine if any are already being met



Eligible professionals who demonstrate 2014 clinical quality measures (CQMs) will need to report **9 of 64 Clinical Quality Measures**

Eligible hospitals will need to report **16 of 64 Clinical Quality Measures**

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The Allscripts Difference

Comprehensive MU workflow and technology gap assessments are offered by Allscripts to help clients with their MU preparations.

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CHAPTER 2

EHR Certification

Breaking Ground

EHR Certification: Breaking Ground

Stage 2 mandates that all organizations must use an EHR that meets 2014 Edition EHR Certification Criteria to be eligible for financial incentives. The challenge is that relatively few EHR solution developers have earned 2014 certification for their products.

Don't delay! If your vendor or developers aren't ready, they're taking up your valuable attestation window!

It's time to consider a replacement option.

DO-IT-YOURSELF TIPS

- Upgrade to, or implement, 2014 Edition Certified EHR
- If current EHR is not 2014 Edition Certified, engage vendor to see when a 2014 Edition Certified EHR will become available
- Determine if a solution replacement is warranted when vendor's certification plans are unclear



The Allscripts Difference

Allscripts TouchWorks EHR 11.4.1 and Allscripts Professional EHR 13.0 are 2014-certified solutions.

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Patient Access

Getting the Right Tools

Patient Access: Getting the Right Tools



Organizations must document that they provided access for **50% of patients** seen during the reporting period

5% or more of all unique patients must have viewed, downloaded, or transmitted their information to a third party

A significant Stage 2 challenge relates to providing patients with online access to their health information, and their ability to send providers secure messages. Within Stage 2 are objectives requiring organizations to provide patients with online access to their health information.

Be selective with your patient engagement strategy. Make sure your solution integrates seamlessly to share information and securely send it to and receive it from patients in a timely manner. This is critical for organizations to transition toward the industry's population health strategies.

Use a Certified Patient Portal

Engaging patients to enroll and use this technology is a significant hurdle that directly impacts whether organizations can comply with Stage 2 requirements, since actually

accessing their information and sending messages is required for meeting Stage 2. The marketing of patient portal services is vital. You'll need the right tools and support to do this and Allscripts can help.

DO-IT-YOURSELF TIPS

- Use a certified patient portal:
 - Determine if electronic summaries fulfill all required data elements
 - Ensure tight EHR and portal integration
 - Leverage EHR vendor's experience in portal marketing

The Allscripts Difference

The Allscripts FollowMyHealth® patient portal is 2014 Edition Certified and fully integrates with Allscripts EHR solutions and features mobile capability. Additionally, Allscripts provides comprehensive marketing programs to encourage patient portal enrollment and usage.

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CPOE

Laying the Foundation

CPOE: Laying the Foundation

Computerized Physician Order Entry (CPOE) is the most discussed component of Meaningful Use Stage 2.

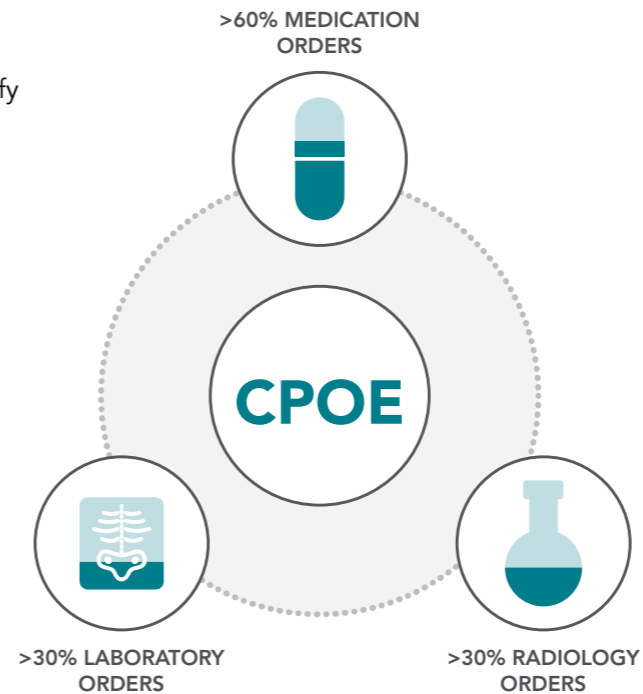
More than 60 percent of medication, 30 percent of laboratory and 30 percent of radiology orders created during the EHR reporting period are to be recorded by an authorized provider using CPOE.

It's important for organizations to work with a vendor that has demonstrated widespread CPOE adoption among its clients.

Confused about who qualifies as an "authorized provider"? The Stage 2 rule specifically states that the order must be "directly entered by any licensed healthcare professional who can enter orders into the medical record per state, local and professional guidelines."

DO-IT-YOURSELF TIPS

- Work with a vendor that has proven CPOE success
- Measure existing CPOE adoption rates, identify areas needing improvement
- Review CMS, state and local guidelines to understand authorized provider order-entry requirements



The Allscripts Difference

Allscripts CPOE solutions have ranked No. 1 in physician adoption and satisfaction.

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Direct Messaging

Connecting the Right People

Direct Messaging: Connecting the Right People

A central component of Stage 2 is the ability to exchange health information via secure, encrypted communications using Direct Messaging standards.

Direct Messaging, as defined by the ONC, is a system of standards and services that enable simple, directed, routed, scalable transport of secure and meaningful exchange between known participants over the internet in support of meaningful use.

The security of the information exchanges is managed by a health information service provider (HISP). This entity performs a number of services, including:

- Backbone transport
- Universal addressing
- Security and trust
- Messaging gateway encrypts, routes messages
- Message storage
- Edge protocols

Key Components

Addresses: As part of the 2014 EHR Certification criteria, EHRs must use Direct addresses of providers and patients which are compliant with ONC standards for secure addresses.

2014 Certification: Referrals and patient communications that are sent through an HIE may not fulfill the requirements of MU unless the HIE technology is 2014 certified.

Compatibility: Many provider organizations and HIEs are not yet ready to accept or send messages according to the Direct protocol. Therefore, early adopters may find it difficult to exchange information with other entities throughout their region.

DO-IT-YOURSELF TIPS

- Understand the Direct protocol and HISP concepts
- Prepare to collect and enter Direct addresses into EHR, or subscribe to database
- Ensure that messages are routed through 2014 certified technology to comply with MU regulations
- Look for a vendor that serves as a HISP to simplify the process



The Allscripts Difference

Allscripts EHR and HIE solutions provide Direct Messaging capabilities, and Allscripts is a HISP to help clients more rapidly achieve connectivity and secure data exchanges.

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Technology Replacement: Enabling Your Team

Are you evaluating EHR upgrades or replacements? Fully examine available solutions to make sure that required functionality will not unnecessarily disrupt workflows.

With the October 1, 2015 ICD-10 implementation deadline approaching, practices must determine how EHRs will integrate with their practice management (PM) solutions—since both will be undergoing upgrades or replacements.

Don't create a fortress! A handful of vendors within the marketplace take a single-vendor approach to their solutions, and offer limited interoperability with the solutions offered by other vendors. This approach can be problematic for organizations that are looking to benefit from information exchanges with other organizations within their community, region or state.

Don't forget about the EHR's architecture. An increasing number of solutions are cloud-based or have cloud-based components. When properly designed, these cloud-based solutions or components can prove productive, but poorly designed cloud-based solutions have the potential to create additional challenges. Hosted solutions are another option where technical experts manage the technology aspects of the EHR, allowing users to benefit from the EHR's functionality.

DO-IT-YOURSELF TIPS

- Evaluate integration between EHR and PM solutions
- Ensure CDS and eMAR functionality fits needs to prevent workflow disruptions
- Ensure that upgrades or replacements will connect with HIEs
- Understand the pros and cons of different EHR architectures (e.g., cloud, hosted and traditional software offerings)

The Allscripts Difference

Allscripts provides integrated CDS and eMAR capabilities with its EHR solutions.

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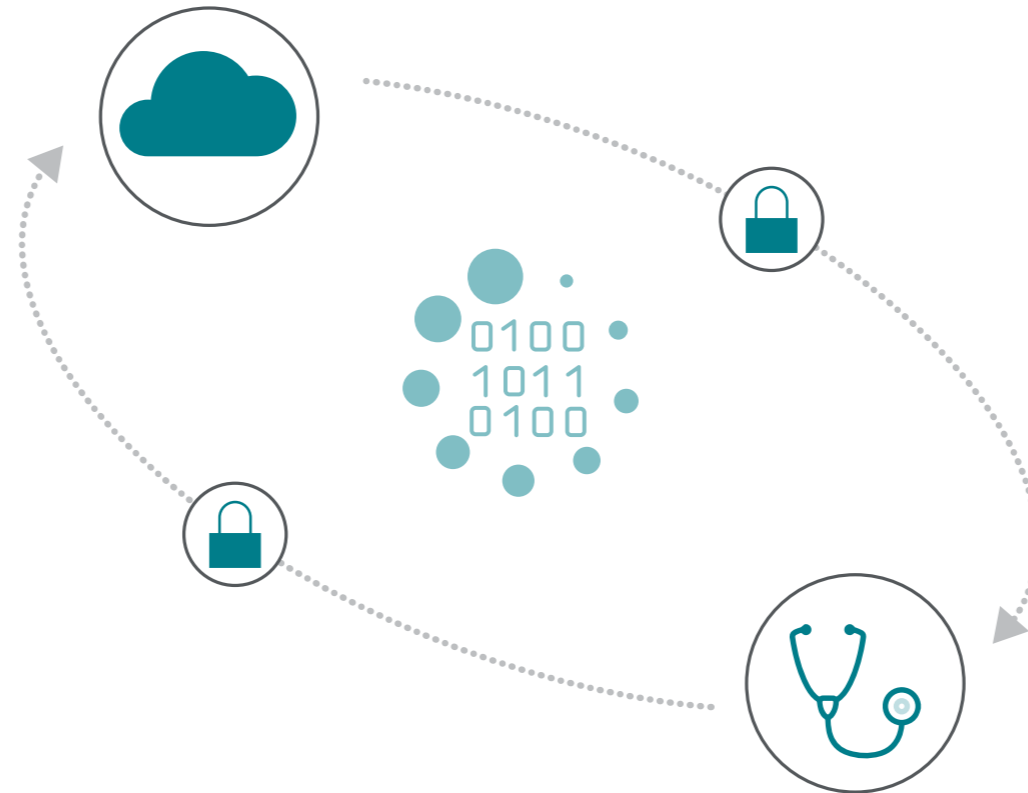
MU Reporting in the Cloud: Keeping Track

Reporting functionality is the lifeblood of MU program participation, considering all of the effort that goes into workflow modifications, information collection and management.

Consider vendors providing cloud-based reporting options. This option allows providers to easily and securely access the information they need and reduces downtime, increases system performance and improves information access.

DO-IT-YOURSELF TIPS

- Structure reporting tools not only for MU use, but also for future population health efforts
- Examine security measures to determine risk
- Evaluate data-submission capabilities to ensure MU compliance



The Allscripts Difference

Powerful cloud-based reporting solutions are provided by Allscripts to streamline the reporting and attestation processes, and behind-the-scenes updates to the reporting solution take place automatically to reduce downtime and solution maintenance.

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Vendor Considerations: Hiring for Success

Is your vendor guiding you through MU preparations? Do they have proven experience with successful MU attestations?

Vendor experience is a top factor to consider when looking to upgrade or replace an EHR. Vendors should be able to point their prospects to a substantial number of existing clients that have successfully implemented their EHRs and demonstrated MU Stage 1.

Vendors should possess the in-house expertise to guide clients through MU preparations, demonstration and attestation. Partnering with a vendor that possesses a high level of MU experience allows organizations to realize benefits sooner with less configuration and optimization.

DO-IT-YOURSELF TIPS

- Look for vendors with proven experience that includes:
 - A substantial number of existing clients
 - Successful implementations, demonstrations and attestations
- Consider MU solution packages that eliminate the need for clients to piece together multiple solutions
- Evaluate how vendor support and education offerings fit your organization's needs



The Allscripts Difference

Thousands of clients have successfully implemented Allscripts EHRs. Comprehensive MU solution packages with complete patient engagement programs are offered by Allscripts.

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Implementation: Getting the Work Done

The vendors that have experienced the most success with their MU clients are the ones who have a complete methodology to approach their implementations.

This methodology includes ways to minimize risk, maximize investments, reduce variability and increase client satisfaction. The methodology should include the following three components:

- Prescriptive workflows
- Preconfigured databases
- Clear timelines

DO-IT-YOURSELF TIPS

- Take a role-based approach to implementation
- Seek vendors with preconfigured databases to reduce implementation time
- Demand that timelines be articulated clearly up front



The Allscripts Difference

Allscripts implementation methodology incorporates all of these key elements, and includes 90 days of application maintenance services with each implementation.

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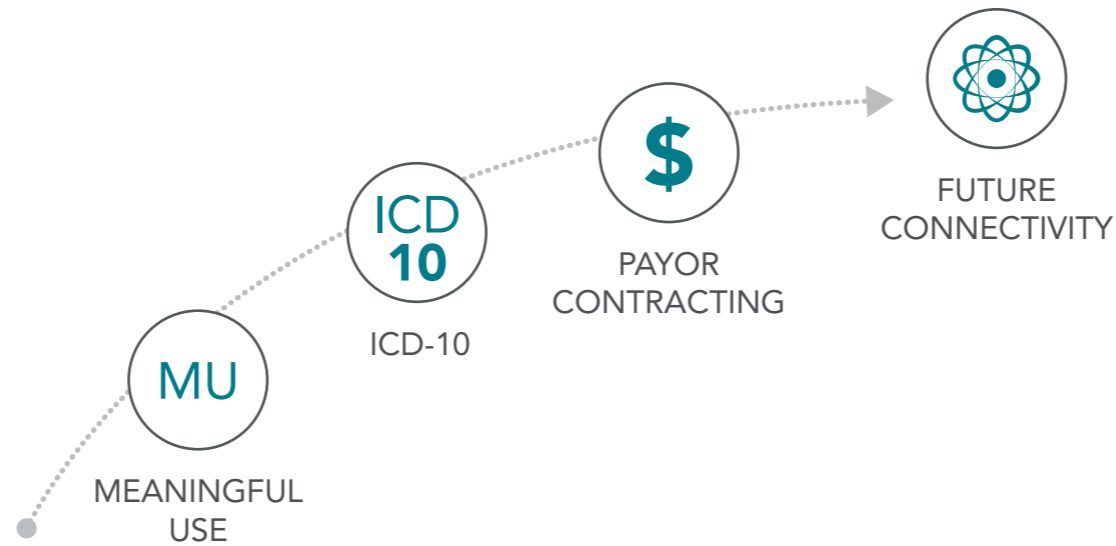
The healthcare industry is dynamic: changes take place on a daily basis.

MU is just one component among many that healthcare organizations are addressing. The following are some considerations that organizations may need to address with their MU strategies:

- ICD-10
- Payor contracting
- Future connectivity

DO-IT-YOURSELF TIPS

- Develop strategies to work on other initiatives in parallel with MU preparations
- Ensure that ICD-10 efforts remain focused to avoid revenue cycle disruptions
- Prepare for payor contract renegotiations based on MU criteria and ICD-10 coding
- Structure MU-related efforts to accommodate the industry's transition to HIEs and ACOs



The Allscripts Difference

Allscripts EHR and Revenue Cycle solutions are ICD-10 compliant.

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The Reveal

You've done it! It's completed! Now What?

The true value of achieving MU is not the earning of financial incentives. It's about taking the steps to transform the industry and to improve the care that patients receive.

MU Stage 1 and 2 Objectives

STAGE 1	STAGE 2
<p><u>Eligible Professionals</u></p> <ul style="list-style-type: none"> • 15 Core Objectives • 5 of 10 Menu Objectives • 20 Total Objectives 	<p><u>Eligible Professionals</u></p> <ul style="list-style-type: none"> • 17 Core Objectives • 3 of 6 Menu Objectives • 20 Total Objectives
<p><u>Eligible Hospitals & CAHs</u></p> <ul style="list-style-type: none"> • 15 Core Objectives • 5 of 10 Menu Objectives • 20 Total Objectives 	<p><u>Eligible Hospitals & CAHs</u></p> <ul style="list-style-type: none"> • 16 Core Objectives • 3 of 6 Menu Objectives • 19 Total Objectives

Clinical Quality Measures (CQMs) Prior to 2014 and Beyond 2015

BEFORE 2014	2014 & BEYOND
<p><u>Eligible Professionals</u></p> <ul style="list-style-type: none"> • 6 of 44 • 3 Core alt. Core • 3 Additional 	<p><u>Eligible Professionals</u></p> <ul style="list-style-type: none"> • 9 out of 64 CQMs • At least 1 in 3 NQS domains
<p><u>Eligible Hospitals & CAHs</u></p> <ul style="list-style-type: none"> • 15 out of 15 	<p><u>Eligible Hospitals & CAHs</u></p> <ul style="list-style-type: none"> • 16 out of 29 CQMs • At Least 1 in 3 NQS domains

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Transitioning to Population Health: The Bigger Picture

Now why did we do all of that work? Because the broader objectives of the program are that healthcare quality must improve and cost reductions are necessary for the industry to become sustainable.

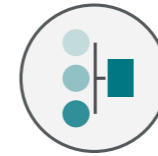
MU addresses components of these issues, but it is up to individual healthcare organizations to transform their MU efforts into initiatives that address the industry's broader goals.

Over the past decade, the focal point of healthcare delivery has shifted dramatically from a provider- to a patient-centric system. This migration is accelerating and widening, to include care settings such as a patient's home and workplace.

Health care no longer happens at a defined or isolated point in time. It's continuous and centered around the patient, not a specific venue for care.

DO-IT-YOURSELF TIPS

- KLAS Research identified four components critical for effective population health management—functionality healthcare organizations must consider when selecting their solutions partner:
 - **Data Aggregation:** Combining patient data from disparate sources
 - **Risk Stratification:** Segmenting populations to prioritize interventions
 - **Care Coordination:** Directing care providers' efforts
 - **Patient Outreach:** Engaging patients in their care



DATA AGGREGATION



RISK STRATIFICATION



CARE COORDINATION



PATIENT OUTREACH

The Allscripts Difference

Allscripts provides the leadership, based on experience and perspective, to help organizations through this important transformation. Our suite of population health management solutions equips providers and healthcare organizations to successfully monitor and manage patients along the entire care continuum.

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