



Mid-Atlantic Association of Community Health Centers
2011 Meaningful Use Clinical Objectives

Topic	Meaningful Use (2011)	Extent of Meaningful Use Measure	UDS (2010/proposed measures for 2011)	Extent of UDS Measure	PQRS (2011)	Extent of PQRS Measure	NCQA PCMH Standards# (2011)	Extent of PCMH Measure
1. Patient Demographics	Record Patient Demographics* Sex, Race, Ethnicity, Date of Birth, & Preferred Language	More than 50% of patients' demographic data recorded as structured data	Record Patient Profile Gender, Race, Ethnicity, Age & Patients Served in a Language Other than English	Report the number of all patients receiving at least one face-to-face visit for services (Recorded age is based on June 30 of reporting period)	N/A	N/A	Identify and Manage Patient Populations Gender, Race, Ethnicity, Date of Birth, & Preferred Language	Use of an electronic system that records patient information as structured (searchable) data for >50% of all patients
2. Height, Weight, & BMI	Record Vital Signs and Chart Changes* Height, Weight, Blood Pressure, Body-Mass Index, Growth Charts for Children	More than 50% of patients 2 years of age or older have height, weight, and blood pressure recorded as structured data	Quality of Care Indicators Weight Assessment and Counseling for Children and Adolescents / Adult Weight Screening and Follow Up	Report the percentage of all patients age 2 to 17 with documented BMI, counseling for nutrition, and counseling for physical activity; Report the percentage of all patients age 18 or older who had BMI charted within the last 6 months AND if they were overweight or underweight, had a follow-up plan.	Weight Assessment and Counseling for Children and Adolescents / Body Mass Index (BMI) Screening and Follow-Up	Percentage of all patients 2 to 18 years of age whose weight is classified based on BMI; Percentage of all patients aged 18 years and older with a documented BMI in the past 6 months (if most recent BMI is outside normal parameters, a follow-up plan is documented)	Clinical Data Height, Weight, Blood Pressure, Body-Mass Index, Growth Charts for Children	Use an electronic system to record height, weight, blood pressure, and BMI for >50% of patients 2 years and older; electric system plots and displays growth charts for children 0 to 20 years of age and BMI percentiles for children 2 to 20 years of age



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3. Current and Active Diagnoses	Maintain Up-to-date Problem List of Current and Active Diagnoses*	More than 80% of patients have at least 1 entry recorded as structured data	(Refer to Topic 16.)	(Refer to Topic 16.)	N/A	N/A	Clinical Data An up-to-date problem list with current and active diagnoses	Use an electronic system to record as structured (searchable) data for >80% of patients
4. Active Medications	Maintain Active Medication List*	More than 80% of patients have at least 1 entry recorded as structured data	N/A	N/A	Documentation of Current Medications in the Medical Record	Percentage of patients aged 18 years and older with a list of current medications documented by the provider, including drug name, dosage, frequency, and route.	Clinical Data List of prescription medications with the date of updates	Use an electronic system to record as structured (searchable) data for >80% of patients
5. Medication Allergies	Maintain Active Medication Allergy List*	More than 80% of patients have at least 1 entry recorded as structured data	N/A	N/A	N/A	N/A	Clinical Data Allergies, including medication allergies and adverse reactions	Use an electronic system to record as structured (searchable) data for >80% of patients
6. Tobacco Use	Record Smoking Status for Patients 13 Years of Age or Older*	More than 50% of patients 13 years of age or older have smoking status recorded	Tobacco Use And Cessation Advice	Report the percentage of patients age 18 years and older who were queried about	Tobacco Use: Screening and Cessation Intervention	Percentage of patients aged 18 years and older who were screened for tobacco use	Clinical Data Status of tobacco use for patients 13 years and older	Use an electronic system to record as structured (searchable)



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		as structured data		tobacco use one or more times within 24 months AND who received advice to quit smoking or tobacco use if identified as a tobacco user.		one or more times within 24 months AND who received cessation counseling intervention if identified as a tobacco user		data for >50% of patients 13 years or older
7. Office Visit Summaries	Provide Patients with Clinical Summaries for Each Office Visit*	Clinical summaries provided to patients for >50% of all office visits within 3 business days	N/A	N/A	N/A	N/A	Electronic Access Gives the patient/family a clinical summary at each relevant visit	Clinical summaries are provided to patients for more than >50% of office visits within 3 business days
8. Electronic Copies of Health Information	On Request, Provide Patients with an Electronic Copy of Their Health Information*	On request, provide patients with an electronic copy of their health information (including diagnostic test results, problem list, medication lists, medication allergies)	N/A	N/A	N/A	N/A	Electronic Access On request, provide patients with an electronic copy of their health information	>50% of patients who request an electronic copy of their health information (including problem list, diagnoses, diagnostic test results, medication lists, allergies) receive it within 3 business days



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9. Electronic Prescribing	Generate and Transmit Permissible Prescriptions Electronically*	More than 50% of requesting patients receive electronic copy within 3 business days	N/A	N/A	Electronic Prescribing (eRx) Incentive Program**	Eligible professionals may choose to report on their adoption and use of a qualified eRx system by submitting information on one eRx measure	Use Electronic Prescribing Generates and transmits eligible prescriptions to pharmacies	At least 40 percent of eligible prescriptions are generated and transmitted electronically
10. Electronic Medication Orders	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	N/A	N/A	N/A	N/A	Use Electronic Prescribing Electronic medication orders are entered into the medical record	Enter electronic medication orders into the medical record for >30% of patients with at least one medication in their medication list
11. Drug Interaction Checks	Implement drug–drug and drug–allergy interaction checks*	Functionality is enabled for these checks for the entire reporting period	N/A	N/A	N/A	N/A	Performs patient-specific checks for drug–drug and drug–allergy interactions	The practice’s electronic prescribing system alerts the clinician to potentially harmful interactions between drugs or to patient allergy to a drug



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12. Electronic Information Exchange	Implement capability to electronically exchange key clinical information among providers and patient-authorized entities*	Perform at least one test of EHR's capacity to electronically exchange information	N/A	N/A	N/A	N/A	Referral Tracking and Follow-Up Demonstrate the capability for electronic exchange of key clinical Information between clinicians	Capability to exchange information with other providers, patient-authorized entities, or a personal health record vendor identified by the patient
13. Clinical Decision Support Rule	Implement one clinical decision support rule and ability to track compliance with the rule*	One clinical decision support rule implemented	N/A	N/A	N/A	N/A	Implement Evidence-Based Guidelines Demonstrates continuous relationships with patients through care management processes based on evidence-based guidelines	Practice implements guidelines through point of care reminders for patients and embeds the guidelines into the practice's day-to-day operations
14. EHR Privacy Protection	Implement systems to protect privacy and security of patient data in the EHR*	Conduct or review a security risk analysis, implement security updates as necessary, and correct	N/A	N/A	N/A	N/A	N/A	N/A



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		identified security deficiencies						
15. Clinical Measures (See Clinical Quality Measure Matrix Attachment)	Report clinical quality measures to CMS or states* (must report on 6 of 44 clinical quality measures)	For 2011, provide aggregate numerator and denominator through attestation; for 2012, electronically submit measures	Report on the Specified Clinical Measures	Health centers have the option of reporting on their entire patient population as a universe, or a random sample will be used to report	Report Information on Individual Quality Measures or Measures Groups to CMS or to a Qualified Physician Quality Reporting Registry		Report Data Externally Reports ambulatory clinical quality measures to various federal and local jurisdictions	Reporting by attestation is required in 2011; electronic reporting is required in 2012
16. Formulary Checks	Implement drug formulary checks^A	Drug formulary check system is implemented and has access to at least one internal or external drug formulary for the entire reporting period	N/A	N/A	N/A	N/A	Use Electronic Prescribing An electronic system alerts prescribers to formulary status	The system connects with or downloads the formulary for the patient's health plan to identify covered drugs and the copayment tier, if applicable.
17. Incorporating Test Results into the Electronic Health Record	Incorporate clinical laboratory test results into EHRs as structured data^A	More than 40% of clinical laboratory test results whose results are in positive/negative or numerical	N/A	N/A	N/A	N/A	Test Tracking and Follow-Up Electronically incorporates all clinical lab test results and imaging test	At least 40% of all clinical lab test results are incorporated into structured fields in medical records; also



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		format are incorporated into EHRs as structured data					results into the medical record	incorporates imaging test results into the EMR
18. Lists of Patients by Condition	Generate Lists of Patients by Specific Conditions to Use for Quality Improvement, Reduction of Disparities, Research, or Outreach ^Δ	Generate at least one listing of patients with a specific condition	Selected Diagnoses [♦]	Report the number of visits and number of patients where the primary diagnosis was one of the indicated selected diagnosis [♦]	N/A	N/A	Use Data for Population Management produce lists of patients needing preventive care and chronic care services, patients not seen recently, and patients on specific medications	Generate at least one report listing patients with a specific condition to use for quality improvement, reduction of disparities, and outreach
19. Use of an EHR to Identify Patient Education Resources	Use EHR technology to identify patient-specific education resources and provide those to the patient as appropriate ^Δ	More than 10% of patients are provided patient-specific education resources	N/A	N/A	N/A	N/A	Support Self-Care Process Use EHR to identify patient-specific educational resources and provide these resources to patients, if appropriate	At least 10% of patients are provided education resources
20. Medication Reconciliation	Perform medication reconciliation between care settings ^Δ	Medication reconciliation is performed for more than 50% of transitions	N/A	N/A	Medication Reconciliation: Reconciliation After Discharge from an	Percentage of patients aged 65 years and older discharged from	Medication Management Reviews and reconciles medications	Medication reconciliation is performed for >50% of care transitions (a



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		of care			Inpatient Facility	any inpatient facility and seen within 60 days following discharge by the physician providing on-going care who had a reconciliation of the discharge medications with the current medication list in the medical record documented	with patients or their families	higher score can be achieved if this is performed for >80% of transactions.)
21. Summary of Care	Provide summary of care record for patients referred or transitioned to another provider or setting^A	Summary of care record is provided for more than 50% of patient transitions or referrals	N/A	N/A	N/A	N/A	Referral Tracking and Follow-Up Provide an electronic summary-of-care record to other providers	Summary of care record is provided for >50% of patient referrals
22. Immunization Registries	Submit electronic immunization data to immunization registries or immunization information	Perform at least one test of data submission and follow-up submission (where registries can accept	N/A	N/A	N/A	N/A	Report Data Externally Submit electronic data to immunization registries or immunization	Perform at least one test of the EHR's capacity to submit data to immunization registries or immunization



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	systems ^Δ	electronic submissions)					information systems	information systems and follow up submission
23. Syndromic Surveillance	Submit electronic syndromic surveillance data to public health agencies ^Δ	Perform at least one test of data submission and follow-up submission (where public health agencies can accept electronic data)	N/A	N/A	N/A	N/A	Report Data Externally Submit syndromic surveillance data to public health agencies	Perform at least one test of the EHR's capacity to provide electronic syndromic surveillance data to public health agencies and follow-up submission
24. Patient Reminders	Send reminders to patients (per patient preference) for preventive and follow-up care ^Δ	More than 20% or patients 65 years of age or older or 5 years of age or younger are sent appropriate reminders	N/A	N/A	Radiology: Reminder System for Mammograms	Percentage of patients aged 40 years and older undergoing a screening mammogram whose information is entered into a reminder system with a target due date for the next mammogram	Use Data for Population Management Use reports to remind patients of needed services	>20% percent of all patients 65 years or older or 5 years or younger are sent an appropriate reminder for preventive or follow-up care
25. Electronic Access for	Provide patients with	More than 10% of patients are	N/A	N/A	N/A	N/A	Electronic Access	At least 10% of patients have



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Patients	timely electronic access to their health information (including laboratory results, problem list, medication lists, medication allergies) ^Δ	provided electronic access to information within 4 days of its being updated in the EHR					Patients are provided timely electronic access to their health information (including lab results, problem lists, medication lists, allergies)	electronic access to their current health information within 4 business days of when the information is available to the practice

[#] Refer to NCQA PCMH 2011 Manual for additional information pertaining to the Standard.

*Core Set: These objectives are to be achieved by all eligible professionals in order to qualify for incentive payments.

♦Selected Diagnoses includes Hepatitis B, Tuberculosis, Asthma, Dehydration, Alcohol Related Disorders, etc. Refer to [UDS Manual 2010](#) for a complete list of Selected Diagnoses.

^Δ Menu Set: Eligible professionals may select any five choices from the menu set.

^{††} Providers may opt to participate in the eRx Incentive Program, as it is separate from and is in addition to the quality reporting incentive program.