

2014 Meaningful Use Final Rule

How to Proceed in the Medicare and Medicaid Pathways

By Greenway Health

The Centers for Medicare & Medicaid Services (CMS) has issued the [final rule](#) detailing 2014 meaningful use (MU) reporting and attesting options for eligible professionals (EPs). The final rule mirrors the proposal issued in May.

Under the rule, EPs who have not yet attested in 2014 because they were “unable to fully implement” 2014 certified edition electronic health record technology (CEHRT) may select from several options as detailed in **Table 1**. EPs unable to fully implement 2014 Edition CEHRT will make a simple declaration of that inability when they attest.

EPs need not cite detailed reasons for their inability to implement 2014 Edition CEHRT. Please note, however, that in case of an audit procedure, CMS will consider only certain reasons acceptable. We have detailed these below, along with an outline of the new attestation procedure for EPs using the 2014 options.

The attestation deadline for all EPs is Feb. 28, 2015.

Table 1

If you were scheduled to demonstrate:	You would be able to attest for Meaningful Use:		
	Using 2011 Edition CEHRT to do:	Using 2011 & 2014 Edition CEHRT to do:	Using 2014 Edition CEHRT to do:
Stage 1 in 2014	2013 Stage 1 objectives and measures*	2013 Stage 1 objectives and measures* -OR- 2014 Stage 1 objectives and measures*	2014 Stage 1 objectives and measures
Stage 2 in 2014	2013 Stage 1 objectives and measures*	2013 Stage 1 objectives and measures* -OR- 2014 Stage 1 objectives and measures* -OR- 2014 Stage 2 objectives and measures*	2014 Stage 1 objectives and measures* -OR- Stage 2 objectives and measures

*Only providers that could not fully implement 2014 Edition CEHRT for the EHR reporting period in 2014 due to delays in 2014 Edition CEHRT availability.

Notable in the final rule:

- EPs can report data compiled from any quarter of the 2014 calendar year and still use the certification and stages options.
- EPs who have not compiled data can satisfy 2014 reporting during the October through December reporting timeframe.
 - This applies to EPs in either pathway (Medicare or Medicaid).

- This amounts to the 90-day or fixed-quarter language matching the Medicare or Medicaid pathways.
- EPs may report Stage 1 or Stage 2 objectives, measures and menu items depending on their timelines.
 - This effectively allows for another year of Stage 1, even if this is the EP’s fourth year attesting for meaningful use.
 - **Table 2** shows the progression of staged reporting and payment years by start date.
- Stage 3 is officially moved from a 2016 to a 2017 start date for EPs who began meaningful use Stage 1 from 2011 through 2013.
- **Table 1** shows the available CEHRT Edition options matched to Stage 1 or Stage 2 reporting, and 2013 or 2014 Stage 1 objectives and measures.
 - Like the proposal, the final rule allows EPs to choose 2011 or 2014 CEHRT, or the 2011/2014 combination.
 - Greenway Health EHRs (Intergy) are certified for all of the three approaches allowed.
 - The **combination approach** enables EPs to continue upgrading to 2014 CEHRT while also compiling MU data on existing 2011 CEHRT. They can then complete data collection with upgraded software instead of starting over.
 - As the final rule states: *We do not specify whether a provider must use 2011 Edition CEHRT or 2014 Edition CEHRT for a certain amount of time during the EHR reporting period, whether a certain amount of modules in one CEHRT edition or another is required, or whether a certain number of provider settings must have one CERHT edition over another.*

Table 2: Stages of Meaningful Use											
First Payment Year	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
2011	1	1	1	1 or 2*	2	2	3	3	TBD	TBD	TBD
2012		1	1	1 or 2*	2	2	3	3	TBD	TBD	TBD
2013			1	1*	2	2	3	3	TBD	TBD	TBD
2014				1*	1	2	2	3	3	TBD	TBD
2015					1	1	2	2	3	3	TBD
2016						1	1	2	2	3	3
2017							1	1	2	2	3

*3-month quarter EHR reporting period for Medicare and continuous 90-day EHR reporting period (or 3 months at State option) for Medicaid EPs. All providers in their first year in 2014 use any continuous 90-day EHR reporting period

Declaring, attesting and audit cautions

For EPs declaring an inability to upgrade and selecting from certification and stage options, the rule cautions that financial issues or an inability to meet required objectives, measures and thresholds would **not** be deemed acceptable options during an audit.

Broadly acceptable reasons include any relating to the timing of receiving upgraded software, implementation and testing time, internal training or establishing new internal workflows. Again, EPs are not required to detail these when attesting.

EPs who practice in multiple locations on multiple systems may also use the “inability to upgrade” options, unless more than 50% of their encounters are documented on 2014 Edition CEHRT.

EPs can also declare an inability to upgrade relating to the Stage 2 electronic submission of summary of care objective (more than 10% of referrals) if the providers to whom EPs send the summaries are not equipped to receive them on 2014 Edition CERHT. In these cases, referring EPs can select the inability option and avoid penalties for failing to meet this measure.

Under the new attestation procedure, EPs will:

- Select their certified product and edition from the ONC website listing.
- Generate a corresponding CMS EHR Certification ID for subsequent attesting.
 - The selections will match the Certification ID number to the edition chosen, and prompt matching with the reporting of Stage 1, 2013 objectives, Stage 1, 2014 objectives or Stage 2 objectives. They will also match CQMs.
- EPs choosing one of the “inability to upgrade” options or electing to report on an allowable stage different from previous timelines would then declare the inability to fully implement 2014 Edition CEHRT when prompted.
 - CMS recommends keeping documentation supporting the declaration for six years.

Selecting and reporting CQMs

The final rule details options for reporting CQMs during meaningful use attestation or in alignment with other incentive programs such as PQRS. The rule also discusses the compatibility of CQMs with different stages and versions of reporting (Stage 1, 2013, Stage 1, 2014 or Stage 2, 2014 matching).

Medicare

- CQMs requirements for each CEHRT Edition:
 - Using 2011 Edition CEHRT to report Stage 1: report 6 of 44 CQMs
 - Using 2014 Edition CEHRT to report Stage 1: report 9 of 64 CQMs
 - Using a combination of 2011 and 2014 to report 2013 Stage 1: report 6 of 44 CQMs (for the portion of the reporting period in which 2011 Edition was in place)
 - Using a combination of 2011 and 2014 Editions to report 2014 Stage 1 or Stage 2: report 9 of 64 CQMs

Medicaid

- Consult individual state plans for rules about selecting and reporting CQMs in the Medicaid pathway.

Keep in mind

- EPs who report an additional year of Stage 1 in 2014 must attest to Stage 2 in 2015 for the entire calendar year, and must do so on 2014 CEHRT.
- EPs who attested to meaningful use in 2013 are not subject to the 2015 payment adjustment.
- Attesting in 2014 avoids the 2016 payment adjustment.
- First-time providers new to the practice of medicine who attest in 2014 are not subject to the 2015 or 2016 payment adjustments.
- If an EP cannot attest in 2014, the deadline to submit a hardship exemption to avoid the 2016 payment adjustment is April 1, 2015.
- Medicaid EPs beginning the meaningful use program in 2014 can only receive the initial Adopt, Implement or Upgrade (AIU) incentive through 2014 CEHRT Edition only. AIU does not count as the first year of attestation.

Greenway recommends

Greenway Health recommends that EPs upgrade or continue upgrading to 2014 Edition CEHRT, which will enable you to prepare for 2015 reporting while benefiting from the flexibility in the final rule.

Appendix 1: MU 2014 Revised Requirements for Intergy Customers

	Using 2011 Edition CEHRT	Intergy Version	Using 2011 & 2014 Edition CEHRT	Intergy Version	Using 2014 Edition CEHRT	Intergy Version
Stage 1 in 2014	2013 Stage 1 Objectives and measures	Intergy v8.10	2013 Stage 1 objectives and measures -Or- 2014 Stage 1 objectives and measures	Intergy v8.10 -Or- Intergy v9.00 or higher	2014 Stage 1 Objectives and measures	Intergy v9.00 or higher
Stage 2 in 2014	2013 Stage 1 Objectives and measures	Intergy v8.10	2013 Stage 1 objectives and measures -Or- 2014 Stage 1 objectives and measures -Or- Stage 2 objectives and measures	Intergy v8.10 -Or- Intergy v9.00 or higher -Or- Intergy v9.00 or higher	2014 Stage 1 objectives and measures -Or- Stage 2 objectives and measures	Intergy v9.00 or higher -Or- Intergy v9.00 or higher