

This document outlines the functionality and suggested strategies available for MAGIC customers to demonstrate Meaningful Use.

2011 Objectives

Goal is to electronically capture in coded format and to report health information and to use that information to track key clinical conditions

Care Goals:

- Provide access to comprehensive patient health data for patient's health care team
- Use evidence-based order sets and CPOE
- Apply clinical decision support at the point-of-care
- Generate lists of patients who need care and use them to reach out to patients (e.g., reminders, care instructions)
- Report to patient registries for quality improvement, public reporting, etc.

Hospitals	MEDITECH or Partner Applications Needed	Strategies/Comments	Data Repository Field
10% of all orders (any type) directly entered by authorizing provider (e.g. MD, DO, RN, PA, NP) through CPOE (2)	Physician Care Manager, Emergency Department Management	For more information on strategies for successful CPOE roll-out go to MEDITECH's Advanced Clinical Resources page . Use "Order Source" dictionary on the Physician Care Manager product page .	OeOrders2
Implement drug-drug, drug-allergy, drug-formulary checks	Physician Care Manager, Emergency Department Management, Pharmacy with formulary service vendor (FSV)	For more information on preparing your Pharmacy for CPOE, go to the Pharmacy Optimization information on MEDITECH's Advanced Clinical Resources page .	Attestation
Maintain an up-to-date problem list of current and active diagnosis based on ICD-9 or SNOMED	Clinical Review - MAGIC 5.6 is available to all customers	The Patient Summary in Clinical Review allows for clinicians to record patient problems on a centralized problem list. ICD-9 codes can be captured in MEDITECH's Abstracting module and be mapped to the problem list.	AbsDrgDiagnoses AdmVisits

Maintain active medication list	Clinical Review, Ambulatory Order Management, Physician Care Manager, Emergency Department Management, Medical Records, Pharmacy with FSV	For an active inpatient medication list, Pharmacy is core. However, Clinical Review allows health care organizations to record patient historical medications via the patient summary. MEDITECH has re-engineered the medication reconciliation features to enhance workflow and patient safety. The updated version will be available in MAGIC 5.6 SR4.	PhaRxMain3 PhaRxMain4
Maintain active medication allergy list	Medical Records, Pharmacy with FSV	Centralized Allergy Management is available in MAGIC 5.6 SR2. For more information on implementing centralized allergies, go to our Advanced Clinical Resources page . Allergy Management is available from Nursing, Physician Care Manager, Emergency Department Management, Pharmacy, Order Entry, and Clinical Review.	AdmAllergies DPhaAllergy
Record demographics: preferred language, insurance type, gender, race (3), ethnicity	Admissions, Medical Records	Customer-defined queries can be used to capture additional demographics including preferred language and ethnicity. Race, insurance, and gender are standard fields.	AdmVisits (insurance type and race) MriPatientClinicalQueries (advanced directives) DMisCanadaLanguage (Language is not standard in ADM but is provided in a centralized MIS standard dictionary.) Ethnicity would need to be CDS.
Record advance directives	Admissions, Medical Records	Shared queries can be used to map advanced directive information to clinical applications.	DMisQueries
Record vital signs: height, weight, blood pressure, calculate, and display BMI	Nursing	For more information on optimizing your Nursing documentation, go to MEDITECH's Advanced Clinical Resources page . MIS clinical parameters to identify the queries that collect the information.	PhaPatNursingData DMisPatientHeightTable DMisPatientWeightTable DNurIntervention BMI will be a calculation from the other captured fields.
Record smoking status	Nursing, Physician Care Manager	Smoking status can be captured in both Nursing documentation and Physician Documentation.	DMisQueries
Incorporate lab-test results into EHR as structured data	Patient Care Inquiry, Laboratory Information System	Sending results to physician practice EMRs. Interfaces will be needed.	
Generate lists of patients by specific conditions	Abstracting, Data Repository	MEDITECH's Abstracting module allows organizations to generate patient lists by diagnosis. With Data Repository, customers can collect data in a centralized location, analyze, and review outcomes.	AdmVisits AbsDrgData AbsDrgDiagnoses AbsOrderDiagnoses AbsVisitDiagnoses DAdmConditions
Report hospital quality measures to CMS	Data Repository	Medisolv integrates directly with MEDITECH's Data Repository solution and provides enterprise-wide reporting, business intelligence, and quality reporting solutions. Institute for Health Metrics (IHM) products automate data extraction process for quality, outcomes reporting, and benchmarking.	FTP Transmission of clinical data or third party vendor
Implement one clinical decision support rule related to a high priority hospital condition	Physician Care Manager, Emergency Department Management, Nursing, Pharmacy	MEDITECH provides comprehensive clinical decision support throughout our clinical applications. For more information on implementing clinical decision support, go to our Provider Order Management Product Resources page . There are many methods of supporting a rule within the clinical applications. Please see "Bates Rules" also on Advanced Clinical Resources pages for examples.	Will vary depending on the rule implemented.

Check insurance eligibility electronically from public and private payers, where possible	Admissions, Community-Wide Scheduling with ANSI 270/271 electronic data interface	For more information about the 270/271 on-line eligibility verification, go to meditech.com .	Attestation Functionality available within Billing
Care Goal: Provide patients and families with timely access to data, knowledge, and tools to make informed decisions and to manage their health			
Provide patients with an electronic copy of their health information (including lab results, problem lists, allergies, discharge summary, procedures) upon request (4)	Scanning and Archiving, Internet Access for Patients	Through the e-chart features of Scanning and Archiving, organizations have the ability to download a patient's chart to an electronic portable device such as a CD. In addition, MEDITECH's Internet Access for Patients solution optimizes communication with patients by providing patients portal access to their appointments, demographics, clinical results, insurance, secure messaging, on-line bill pay, medication monographs, and links to patient education materials.	Attestation Functionality available within Scanning and Archiving
Provide access to patient-specific education resources		Specialty content vendors such as EBSCO, Micromedex, Patient Edu offer patient education content.	Attestation
Care Goal: Exchange meaningful clinical information among professional health care team			
Capability to exchange key clinical information (e.g., discharge summary, procedures, problem lists, medication list, allergies, test results) among providers of care and patient authorized entities electronically (5)	Health Information Exchange interfaces	For more information on Health Information Exchange interfaces, go to the Interoperability & EHR Initiatives Portal .	Attestation
Perform medication reconciliation at relevant encounters and each transition of care (6)	Clinical Review, Ambulatory Order Management, Nursing, Medical Records, Pharmacy with FSV	Clinical review allows health care organizations to record patient historical medications via the patient summary. MEDITECH has re-engineered the medication reconciliation features to enhance workflow and patient safety. The updated version will be available in MAGIC 5.6 SR4.	Attestation NurInterventions
Care Goal: Communicate with public health agencies			
Capability to submit electronic data to immunization registries and actual submissions where required and accepted (7)	Health Information Exchange interfaces	For more information on Health Information Exchange interfaces, go to the Interoperability & EHR Initiatives Portal .	Attestation/interface
Capability to provide electronic submissions of reportable lab results to public health agencies and actual submission where it can be received	Laboratory, Health Information Exchange interfaces	For more information on Health Information Exchange interfaces, go to the Interoperability & EHR Initiatives Portal .	Multiple tables from LAB to identify the data/interface.
Capability to provide electronic syndromic surveillance data to public health agencies and actual transmission according to applicable law and practice	Health Information Exchange interfaces	For more information on Health Information Exchange interfaces, go to the Interoperability & EHR Initiatives Portal .	Attestation/interface

Care Goals:

- Ensure privacy and security protections for confidential information through operating policies, procedures, and technologies and compliance with applicable law
- Provide transparency of data sharing to patient

Compliance with HIPAA Privacy and Security Rule (8) (9)		Please view MEDITECH's Regulatory pages .	
Compliance with fair data sharing practices set forth in the Nationwide Privacy and Security Framework		Need more clarification.	

2011 Measures to be reported

Report quality measures to CMS including: % of smokers offered smoking cessation counseling [EP, IP]	Data Repository needed with Nursing and/or Physician Care Manager, Physician Documentation	Data can be collected via Nursing Assessment and/or Physician Documentation and be available for reporting through Data Repository. For more information on reporting metrics, please see the HIT Standards Committee-Quality and Operations Workgroup-Selected Measures . Line 8 identifies that no current measures exist for reporting. (Order source dictionary set up.)	OeOrders2
% eligible surgical patients who receive VTE prophylaxis [IP]	Data Repository needed with Nursing and/or Physician Care Manager, Physician Documentation	Data can be collected via an Order Set or in Nursing and/or Physician Documentation and be available for reporting through Data Repository. For more information on reporting metrics, please see the HIT Standards Committee-Quality and Operations Workgroup-Selected Measures . Line 8 identifies that no current measures exist for reporting. (Order source dictionary set up.)	OeOrders2
% of orders (for medications, lab tests, procedures, radiology, and referrals) entered directly by physicians through CPOE	Data Repository	For more information on reporting metrics, please see attachment from the HIT Standards Committee-Quality and Operations Workgroup-Selected Measures . Line 8 identifies that no current measures exist for reporting. (Order source dictionary set up.)	OeOrders2
Use of high-risk medications (Re: Beers criteria) in the elderly	Pharmacy, Physician Care Manager, Data Repository	For more information on reporting metrics, please see the HIT Standards Committee-Quality and Operations Workgroup-Selected Measures . Line 10 provides additional details on the measures. Also view the Beers criteria.	
% lab results incorporated into EHR in coded format [EP, IP]	Laboratory, Patient Care Inquiry (this is more ambulatory-focused)	SNOMED codes can be mapped at the lab test level within the MEDITECH Laboratory system dictionaries. For more information on reporting metrics, please see the HIT Standards Committee-Quality and Operations Workgroup-Selected Measures .	LabSpecimenTests BbkSpecimenTests MicSpecimenPromptResults (would require additional information to indicate coded format)
Stratify reports by gender, insurance type, primary language, race, ethnicity [EP, IP]	Data Repository	For more information on reporting metrics, please see attachment from the HIT Standards Committee-Quality and Operations Workgroup-Selected Measures . Line 19 provides additional details on the measures.	AdmVisits (insurance type and race) MriPatientClinicalQueries (advanced directives) DMisCanadaLanguage (Language is not standard in ADM but is provided in a centralized MIS standard dictionary)

% of all medications, entered into EHR as generic, when generic options exist in the relevant drug class [EP, IP]		Needing clarification from HIT Policy Committee. Are meds to be dispensed as generic or an override to select non-generic medications?	
% of orders for high-cost imaging services with specific structured indications recorded [EP, IP]	Order Entry, Physician Care Manager, Emergency Department Management, Data Repository	Exam indicators can be captured in a structured format at the time of ordering.	
% claims submitted electronically to all payers [EP, IP]	Revenue Cycle		Happens as a result of the Billing process. Would require a further discussion regarding how to calculate a %.
% patient encounters with insurance eligibility confirmed [EP, IP]	270/271 interface, Data Repository		AdmInsuranceOtherType
% of all patients with access to personal health information electronically [EP, IP]	If using Internet Access for Patients, set up is in Admissions and MRI	No current measures exist at this time. Could also use other source of patient portals, i.e. PHRs. No discrete guidance as of yet.	DMisQueries
% of all patients with access to patient-specific educational resources [EP, IP]	Could be captured via Assessment query from Nursing	No current measures exist at this time.	DMisQueries
Report 30-day readmission rate [IP]	Data Repository, Abstracting	For more information on reporting metrics, please see the HIT Standards Committee-Quality and Operations Workgroup-Selected Measures . Line 24 provides additional details on the measures.	AdmVisits AdmittingData AdmDischarge AdmNursingCensus AbstractData AbsDrgData
% of encounters where med reconciliation was performed [EP, IP]		For more information on reporting metrics, please see the HIT Standards Committee-Quality and Operations Workgroup-Selected Measures . Line 23 provides additional details on the measures.	
Implemented ability to exchange health information with external clinical entity (specifically labs, care summary, and medication lists) [EP, IP]	Interoperability interfaces	Attestation-Survey. Please see line 25 of the HIT Standards Committee-Quality and Operations Workgroup-Selected Measures .	
% of transitions in care for which summary care record is shared (e.g., electronic, paper, e-Fax) [EP, OP]	Interoperability interfaces	No current measures exist at this time.	
% reportable lab results submitted electronically [IP]		No current measures exist at this time.	

- (2) CPOE requires computer-based entry by providers of orders (medication, laboratory, procedure, diagnostic imaging, immunization, referral) but electronic interfaces to receiving entities are not required in 2011
- (3) Race and ethnicity codes should follow federal guidelines (see Census Bureau)
- (4) Electronic access to and copies of may be provided by a number of secure electronic methods (e.g., PHR, patient portal, CD, USB drive)
- (5) Health information exchange capability and demonstrated exchange to be specified by Health Information Exchange Work Group of HIT Policy Committee
- (6) Transition of care defined as moving from one health care setting or provider to another
- (8) The HIT Policy Committee recommends that CMS withhold meaningful use payment for any entity until any confirmed HIPAA privacy or security violation has been resolved
- (9) The HIT Policy Committee recommends that state Medicaid administrators withhold meaningful use payment for any entity until any confirmed state privacy or security violation has been resolved

Goal is to electronically capture in coded format and to report health information and to use that information to track key clinical conditions

Care Goals:

- Provide access to comprehensive patient health data for patient's health care team
- Use evidence-based order sets and CPOE
- Apply clinical decision support at the point-of-care
- Generate lists of patients who need care and use them to reach out to patients (e.g., reminders, care instructions, etc.)
- Report to patient registries for quality improvement, public reporting, etc.

Hospitals	MEDITECH or Partner Applications Needed	Strategies/Comments	Data Repository Field
Use CPOE for all order types	Physician Care Manager, Emergency Department Management	For more information on strategies for successful CPOE roll-out, go to MEDITECH's Advanced Clinical Resources page .	OeOrders2
Use evidence-based order sets	Physician Care Manager	Zynx, UpToDate, Wolters Kluwer	
Record clinical documentation in EHR	Physician Care Manager, Emergency Department Management, Nursing	For more information about implementing Nursing and Physician Documentation, go to MEDITECH's Advanced Clinical Resources page .	
Generate and transmit permissible discharge prescriptions electronically	Physician Care Manager with DrFirst		
Manage chronic conditions using patient lists and decision support	Physician Care Manager, Patient Care Inquiry, Data Repository		DMisQueries
Provide clinical decision support at the point-of-care (e.g., reminders, alerts)	Physician Care Manager, Pharmacy, Nursing, Order Entry	For more information on implementing decision support features, go to our Provider Order Management Product Resources page .	
Specialists report to relevant external disease (e.g., cardiology, thoracic surgery, cancer) or device registries approved by CMS	Health Information Exchange interfaces		

Conduct closed loop medication management, including eMAR and computer-assisted administration	Physician Care Manager, Nursing with Bedside Verification, Pharmacy		
Care Goal: Provide patients and families with timely access to data, knowledge, and tools to make informed decisions and to manage their health			
Patient-specific educational resources in common primary languages	EBSCO, Micromedex		
Record patient preferences (e.g., preferred communication media, advance directive, health care proxies, treatment options)	Admissions, Medical Records, Nursing, Physician Care Manager	Customer-defined queries, critical care indicators	
Documentation of family medical history, in compliance with GINA	Physician Care Manager		
Care Goal: Exchange meaningful clinical information among professional health care team			
Retrieve and act on electronic prescription fill data	Physician Care Manager with DrFirst		
Produce and share an electronic summary care record for every transition in care (place of service, consults, discharge)	Health Information Exchange interfaces		
Perform medication reconciliation at each transition of care from one health care setting to another	Clinical Review, Ambulatory Order Management, Medical Records, Pharmacy with FSV	MEDITECH has re-engineered the medication reconciliation features to enhance workflow and patient safety. The updated version will be available in MAGIC 5.6 SR 4.	
Care Goal: Communicate with public health agencies			
Receive immunization histories and recommendations from immunization registries (7)	Health Information Exchange interfaces		
Receive health alerts from public health agencies			
Provide sufficiently anonymized electronic syndrome surveillance data to public health agencies with capacity to link to personal identifiers	Health Information Exchange interfaces		
Care Goals:			
<ul style="list-style-type: none"> • Ensure privacy and security protections for confidential information through operating policies, procedures, and technologies and compliance with applicable law • Provide transparency of data sharing to patient. 			

2013 Measures to be reported

Additional quality reports using HIT-enabled NQF-endorsed quality measures [EP, IP]	Data Repository		DMisQueries
% of all orders entered by physicians through CPOE [EP, IP]	Data Repository		OeOrders2
Potentially preventable Emergency Department visits and hospitalizations [IP]	Data Repository		
Inappropriate use of imaging (e.g., MRI for acute low back pain) [EP, IP]	Data Repository		
Other efficiency measures (TBD) [EP, IP]	Data Repository		
% of patients with full access to PHR populated in real time with EHR data (OP, IP)	Data Repository		
Additional patient access and experience reports using NQF-endorsed HIT-enabled quality measures [EP, IP]	Data Repository		DMisQueries2
% of educational content in common primary languages [EP, IP]			
% of all patients with preferences recorded [IP]	Data Repository		
% of transitions where summary care record is shared [EP, IP]	Data Repository		
Access to comprehensive patient data from all available sources			
10% reduction in 30-day readmissions rates for 2013 compared to 2012	Data Repository		AdmVisits AdmittingData AdmDischarge AdmNursingCensus AbstractData AbsDrgData
Improvement in NQF-endorsed measures of care coordination	Data Repository		

2015 Objectives

Goal is to achieve and improve performance and support care processes and on key health system outcomes

Care Goals:

- Provide access to comprehensive patient health data for patient's health care team
- Use evidence-based order sets and CPOE
- Apply Clinical Decision Support at the point-of-care
- Generate lists of patients who need care and use them to reach out to patients (e.g., reminders, care instructions, etc.)
- Report to patient registries for quality improvement, public reporting, etc.

Hospitals	MEDITECH or Partner Applications Needed	Strategies/Comments
Achieve minimal levels of performance on quality, safety, and efficiency measures	To be determined	
Implement clinical decision support for national high priority conditions	Physician Care Manager	Zynx, UpToDate, Wolters Kluwer
Medical device interoperability	Monitor interfaces	
Multimedia support (e.g., x-rays)	PACS interface	
Care Goal: Provide patients and families with timely access to data, knowledge, and tools to make informed decisions and to manage their health		
Patients have access to self-management tools	To be determined	
Electronic reporting on experience of care	To be determined	
Care Goal: Exchange meaningful clinical information among professional health care team		
Access comprehensive patient data from all available sources	To be determined	
Care Goal: Communicate with public health agencies		
Use of epidemiologic data	To be determined	
Automated real-time surveillance (adverse events, near misses, disease outbreaks, bioterrorism)		
Clinical dashboards	Physician Care Manager, Patient Care, Emergency Department Management	
Dynamic and Ad hoc quality reports	Data Repository	

Care Goals:

- Ensure privacy and security protections for confidential information through operating policies, procedures, and technologies and compliance with applicable law
- Provide transparency of data sharing to patient.

Provide patients, on request, with an accounting of treatment, payment, and health care operations disclosures	Medical Records	
Protect sensitive health information to minimize reluctance of patient to seek care because of privacy concerns		

2015 Measures to be reported

Clinical outcomes measures (TBD) [OP, IP]	To be determined	
Efficiency measures (TBD) [OP, IP]	To be determined	
Safety measures (TBD) [IP, OP]	To be determined	
NPP quality measures related to patient and family engagement [OP, IP]	To be determined	
Aggregate clinical summaries from multiple sources available to authorized users [OP, IP]	Health Information Exchange interfaces	
NQF-endorsed Care Coordination Measures (TBD)	To be determined	
HIT-enabled population measures [OP, IP]	Data Repository	
HIT-enabled surveillance measures [OP, IP]	Data Repository	
Provide patients, on request, with a timely accounting of disclosures for treatment, payment, and health care operations, in compliance with applicable law	Medical Records	
Incorporate and utilize technology to segment sensitive data	Data Repository	