

Modified Stage 2 Meaningful Use Program Year 2016

What you Need to Know for Program Year 2016

- MAPIR will be open and accepting attestations on June 1, 2016.
- All Eligible Professionals (EPs) must attest using EHR technology certified to the 2014 edition. Providers have the option to attest using the 2015 edition, or a combination of the 2014 and 2015 editions.
- The EHR reporting period for all providers is based on the calendar year.
- Participants completing **Meaningful Use for the first-time** in 2016, the EHR reporting period is a minimum of a continuous 90-day period between January 1 and December 31, 2016.
- In 2016, the EHR reporting period for all **returning participants is a full calendar year** (January 1 to December 31, 2016).
- All EPs are required to attest to a single set of objectives & measures.
- There are 10 Objectives, including one consolidated public health reporting Objective.
- The public health reporting Objective does have alternate exclusions available to some EPs depending upon which stage they were previously scheduled to attest. Many of the alternate exclusions available in 2015 are not applicable in 2016.
- The last date to attest for program year 2016 is: **March 31, 2017 at 11:59 pm.**

Supporting Documentation for Program Year 2016

For Modified Stage 2 Meaningful Use 2016, Objectives 1 and 10 have Connecticut specific requirements for supporting documentation.

Objective 1 (Protect Patient Health Information):

EPs can satisfy this objective by submitting a Security Risk Assessment checklist (SRA) to the DSS Medicaid MAPIR Attestation System. You will find [SRA checklist here](#).

Objectives 2-9:

EPs can satisfy this objective by submitting a CEHRT Report. The CEHRT Report is required to contain the EP NPI and/or First and Last Name, EHR Reporting period, Measure identifiers, Measure numerators and denominators and yes/no indicators, and Exclusion indicators. For



Important Message

Clinical Decision Support, Patient Electronic Access (Measure 2), and Secure Messaging Measures if there is no indicator the measure has been met in the CEHRT Report it is still acceptable. However, in the event of post-payment audit the EP will need to provide documentation that the measure has been met.

Objective 10 (Public Health Reporting):

EPs can satisfy one of the objectives by having submitted test immunization data in the DPH MUST portal by December 31, 2015 and generated a MUST portal Certificate during their EHR reporting period. This certificate must be uploaded to the DSS Medicaid MAPIR Attestation. One MUST Portal Certificate can be utilized per practice group if the Certificate is completed during each individual EPs EHR Reporting Period. EPs who did not administer immunizations during the relevant reporting period may claim exclusion for this measure.

Please be advised, DPH does not currently operate a syndromic surveillance system. EPs can take an exclusion to this measure, please refer to [DSS Guidance for EPs here](#).

Additionally, DPH does not currently operate a specialized case registry system. However, CMS regulation states that Specialized Case Registry are not limited to those endorsed by the public health agency. Please review [CMS FAQ #13657](#) and [CMS FAQ # 13653 for additional guidance](#).

For specific Connecticut based guidance regarding Objective 10, please refer to the [Program Year 2016 Meaningful Use Public Health Measure Update here](#).

Modified MU 2016 Resources:

- [EHR for Eligible Professionals: What You Need to Know for 2016 Tipsheet](#)
- [2016 Meaningful Use Measure Specification Sheets](#)
- [EHR Incentive Programs in 2016: Alternate Exclusions](#)
- [DPH MUST Portal](#)

For More Information

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