

## Meaningful Use Stage 1 Criteria ♦ Final Rule

Physicians successfully achieve meaningful use upon demonstrating their ability to complete 20 of the 25 criteria provided by the Office of the National Coordinator. All physicians must meet 15 "core" criteria and then choose five other criteria to meet from a menu set of 10.

15 Core Criteria			
<b>Core Criteria ♦ All criteria must be met to achieve meaningful use</b>	<b>Improve Quality, Safety, and Efficiency, and Reduce Health Disparities</b>		
	1	CPOE	Use computerized physician order entry (CPOE) for more than 30 percent of unique patients with at least one medication in their medication list.
	2	Drug alerts	Implement drug-drug and drug-allergy interaction checks.
	3	E-prescribing	Generate and transmit permissible prescriptions electronically for more than 40 percent of all permissible prescriptions.
	4	Demographics	Record demographics for more than 50 percent of all unique patients seen: (1) preferred language, (2) insurance type, (3) gender, (4) race, (5) ethnicity, and (6) date of birth.
	5	Problem list	Maintain an up-to-date problem list of current and active diagnoses for more than 80 percent of all unique patients seen.
	6	Medication list	Maintain an active medication list for more than 80 percent of all unique patients seen.
	7	Medication allergy list	Maintain an active medication allergy list for more than 80 percent of all unique patients seen.
	8	Vital signs	Record vital signs: (1) height, (2) weight, and (3) blood pressure; and chart changes: (1) calculate and display BMI, and (2) plot and display growth chart for more than 50 percent of all unique patients seen that are age 2 and over.
	9	Smoking status	Record smoking status for more than 50 percent of all unique patients seen that are 13 years old and older.
	10	Decision support	Implement one clinical decision support rule relevant to specialty or high clinical priority along with the ability to track compliance with that rule.
	11	Quality measures	Report ambulatory quality measures to CMS or states. For 2011, provide aggregate numerator, denominator, and exclusions through attestation. For 2012, electronically submit measures.
	<b>Engage Patients and Families</b>		
	12	Copy of health information	Provide more than 50 percent of all patients who request it an electronic copy of their health information within three business days. Record should include (1) diagnostic test results, (2) problem list, (3) medication list, and (4) medication allergies.
	13	Clinical summaries	Provide patients clinical summaries within three business days for more than 50 percent of all office visits.
<b>Improve Care Coordination</b>			
14	Data exchange	Perform at least one test indicating EHR's capability to electronically exchange key clinical information (such as problem list, medication list, medication allergies, diagnostic test results) among providers of care and patient-authorized entities.	
<b>Privacy and Security</b>			
15	Privacy and security	Protect electronic health information created or maintained by the EHR. Conduct or review a security risk analysis and implement security updates as necessary. Correct identified security deficiencies as part of risk management process.	

Menu Set ♦ Physicians must choose five of the 10 menu criteria

**10 Menu Criteria (choose 5)**

**Improve Quality, Safety, and Efficiency, and Reduce Health Disparities**

16	Drug-formulary checks	Enable functionality for drug-formulary checks and have access to at least one internal or external drug formulary for the EHR reporting period.
17	Lab results	Incorporate clinical lab-test results into EHR as structured data for more than 40 percent of all clinical lab tests ordered whose results are either in a positive/negative or numerical format.
18	Reporting by condition	Be able to generate at least one report listing patients with a specific condition.

**Engage Patients and Families**

19	Patient reminders	During the EHR reporting period, send reminders to patients, per patient preference, for preventive/follow-up care for more than 20 percent of all unique patients 65 years old and older or 5 years old and younger.
20	Timely access to patient's health information	Give patients timely electronic access to their health information, including (1) lab results, (2) problem list, (3) medication lists, and (4) medication allergies, within four business days of information being available, for more than 10 percent of all unique patients seen. This is subject to the physician's discretion to withhold certain information.
21	Patient education	Use the EHR to identify and provide patient-specific education resources to the patient if appropriate for more than 10 percent of all unique patients seen.

**Improve Care Coordination**

22	Medication reconciliation	Perform medication reconciliation for more than 50 percent of patient transitions into the care of the physician.
23	Summary of care	Provide summary of care record for more than 50 percent of transitions of care and referrals when transitioning a patient to another setting of care or physician.

**Improve Population and Public Health**

24	Immunization registries	Perform at least one test of EHR's capability to submit electronic data to immunization registries, and perform a follow-up submission if the test is successful.
25	Syndromic surveillance data for public health	Perform at least one test of EHR's capability to provide electronic syndromic surveillance data to public health agencies, and perform a follow-up submission if the test is successful.