

ACHIEVING MEANINGFUL USE WITH CENTRICITY[®] EMR

ARE YOU "READY TO REPORT"?

GE HEALTHCARE EMR CONSULTING
CHUG FALL CONFERENCE
OCTOBER 2010



ACHIEVING MEANINGFUL USE WITH CENTRICITY® EMR

The EMR Consulting Team offers a

“Meaningful Use Assessment”

to assist our customers in their plan to meet
meaningful use criteria.

This assessment will help you to determine if
you are **“Ready to Report”**.

ACHIEVING MEANINGFUL USE WITH CENTRICITY® EMR

The assessment will provide the customer with an understanding of where they are today in relation to meaningful use and what additional steps need to be taken to fully meet the current criteria, for example:

- Enhance workflows to incorporate use of **clinical decision support rules** and **eRx**.
- Implement new applications, such as **Patient Portal**.
- Add new interoperability and interface functions, such as **Health information exchange (HIE)** and **Continuity of Care Document (CCD)**.




ACHIEVING MEANINGFUL USE WITH CENTRICITY® EMR

Key deliverables/milestones include:

- Evaluation of the current state of the customer’s EMR implementation in relation to meaningful use.
- Delivery of a “scorecard” that the customer will use as a starting point for planning required changes and updates.
- Assistance in creation of an action plan that:
 - Allows the site to make full use of the EMR capabilities.
 - Ensures that providers have timely access to the quality & cost information they need to improve care.
 - Incorporates appropriate point-of-care data collection required to meet meaningful use criteria.
 - Leverages the full range of reporting options to collect and transmit data as needed.

ACHIEVING MEANINGFUL USE WITH CENTRICITY® EMR

Sample items from the “Scorecard”, outlining where the practice is in relation to the meaningful use criteria. Items will have an “action plan” for

Criteria	Measure	Current state	Ready to Report?
CORE: Maintain active medication allergy list.	More than 80 percent of all unique patients seen by the EP have at least one entry (or an indication of “none” if the patient has no medication allergies) recorded as structured data.	90% of patients with Allergy information as structured data	
CORE: Record smoking status for patients 13 years old or older.	More than 50% percent of all unique patients 13 years old or older seen by the Eligible Provider.	Adults = 80% Adolescents = 10%	
MENU: Provide patients with timely electronic access to their health information (including lab results, problem list, medication lists, allergies) within 4 business days of the information being available to the EP.	At least 10 percent of all unique patients seen by the EP are provided timely electronic access to their health information.	Not currently implemented	



Examples:

Objectives and Measures for Meaningful Use with Centricity EMR

A white silhouette of a person in a lab coat looking through binoculars is positioned in the lower-left quadrant. The background is a vibrant blue with abstract white and light blue lines, including a grid, curved paths with arrows, and clusters of circles, suggesting a data-driven or technological environment.

Core Set

- (1)(i) **Objective.** Use computerized provider order entry (CPOE).
 (ii) **Measure.** CPOE is used for more than 30 percent of all medication orders for unique patients with at least one medication in their medication list seen by the EP.

New Medication

Name: Joe Gardner
Birth: 07/01/1998
Age: 12 Years & 1 Month Old Male
Height: 56 in (142.2 cm*)
Weight: 88 lb (39.916 kg*)
BSA: 1.25 sqm

Insurance:
 Eligibility: Pending
 Allrgs(2) Meds(2) Probs(2)

Current/Associated Problems
 Problems associated with this medication are highlighted.

Description
SINUSITIS-ACUTE
ASTHMA

Find Medication
 Custom List: Orthopedics Reference List...
 FLEXERIL 10 MG TABS 1 tablet by mouth at bedtime 30 x 1 \$1.69

Formulary: CHC Gold
 FLEXERIL 10 MG TABS is off formulary.
 Cyclobenzaprine HCl 10 MG TABS is an alternative.
Search Formulary...
Select Formulary...
Status...
Choose Alternative

Define Medication
 Medication: FLEXERIL 10 MG TABS (CYCLOBENZAPRINE HCL)
 Instructions: 1 tablet by mouth at bedtime Comments:
?
 Start Date: 08/12/2010 Stop Date:
 Duration: Days Weeks Months
! Dosing Calculator
Monograph

Prescription
 Quantity: 30 **tablet** Refills: 1 Brand medically necessary Print Pt. Handout necessary
 Pharmacy: TEST PHARMACY* (retail)
 ADDRESS LINE #1
 Addr Line #2
 CITY, AL
 Ph: (223) 465-0987 Select...
 Authorized By: Winston MD, Harry S Pharmacy Icon
 Prescribing Method: Electronic
 State: Maryland
 Note to Pharmacy:

Add to custom list: Drug Instructions/Duration Qty/Refills
 * indicates the calculated values of weight or height.

Save & Continue OK Cancel

(2)(i) **Objective.** Implement drug-drug, drug-allergy.

(ii) **Measure.** The EP, eligible hospital or CAH has enabled this functionality.

New Medication

Name: Laura P. Simpson
Birth: 06/02/1979
Age: 30 Years Old Female
Height: 68 in (172.7 cm*)
Weight: 135 lb (61.235 kg*)
BSA: 1.73 sqm

Insurance: Best Health Insurance Cor
R Eligibility: Pending
 Allrgs(2) Meds(4) Probs(3)

Current/Associated Problems
Problems associated with this medication are highlighted.

Description
ASTHMA, EXTRINSIC
ALLERGIC RHINITIS DUE TO POLLEN
Family Hx of DIABETES MELLITUS

Find Medication
Custom List: Internal Medicine Reference List...

Formulary: < None >
This patient has no formulary.
Search Formulary...
Select Formulary...
Status...
Choose Alternative

Define Medication
Medication: ALLEGRA 180 MG TABS (FEXOFENADINE HCL)
Instructions: 1 po bid
Comments:
Start Date: 03/16/2010
Stop Date:
Duration: Days Weeks Months
Dosing Calculator
Monograph

Prescription
Quantity: 30 Refills: 3 Brand medically necessary Print Pt. Handout necessary
Pharmacy: Discount Pharmacy (retail) 12250 SW Canyon Rd. Beaverton, OR 97005 USA Ph: (503) 644-2101 Fax: (503) 555-1002
Authorized By: Starr MD, Kelly G.
Prescribing Method: Telephone
State: Oregon

Add to custom list: Drug Instructions/Duration Qty/Refills
* indicates the calculated values of weight or height.

New Problem... Save & Continue OK Cancel

(3)(i) Objective. Generate and transmit permissible prescriptions electronically (eRx).

(ii) Measure. More than 40 percent of all permissible prescriptions written by the EP are transmitted electronically using certified EHR technology.

New Medication

Name: Joe Gardner
Birth: 07/01/1998
Age: 12 Years & 1 Month Old Male
Height: 56 in (142.2 cm*)
Weight: 88 lb (39.916 kg*)
BSA: 1.25 sqm

Insurance:
 Eligibility: Pending
 Allrgs(2) Meds(2) Probs(2)

Current/Associated Problems
Problems associated with this medication are highlighted.

Description
SINUSITIS-ACUTE
ASTHMA

Find Medication
Custom List: Orthopedics Reference List...
FLEXERIL 10 MG TABS 1 tablet by mouth at bedtime 30 x 1 \$1.69

Formulary: CHC Gold
 FLEXERIL 10 MG TABS is off formulary.
 Cyclobenzaprine HCl 10 MG TABS is an alternative.
Search Formulary...
Select Formulary...
Status...
Choose Alternative

Define Medication
Medication: FLEXERIL 10 MG TABS (CYCLOBENZAPRINE HCL)
Instructions: 1 tablet by mouth at bedtime Comments:
?
Start Date: 08/12/2010 Stop Date:
Duration: Days Weeks Months Dosing Calculator
! Monograph

Prescription
Quantity: 30 **tablet** Refills: 1 Brand medically necessary Print Pt. Handout necessary
Pharmacy: TEST PHARMACY* (retail)
ADDRESS LINE #1
Addr Line #2
CITY, AL
Ph: (223) 465-0987 Select...
Authorized By: Winston MD, Harry S Pharmacy Icon
Prescribing Method: Electronic
State: Maryland
Note to Pharmacy:

Add to custom list: Drug Instructions/Duration Qty/Refills
* indicates the calculated values of weight or height.

Save & Continue OK Cancel

(i) **Objective.** Record the following Demographics:

(A) Preferred language. (B) Gender. (C) Race. (D) Ethnicity. (E) Date of birth.

(ii) **Measure.** More than 50 percent of all unique patients seen by the EP or admitted to the eligible hospital or CAH have the demographics specified in paragraphs (c)(5)(i)(A) through (G) of this section recorded as structured data.

Patient | Guarantor | Additional | Insurance | Contacts | Appointments | Financial | Payment Plan | Historical

Title: First: Middle: *Last:
Laura P. Simpson

*Birthdate: 06/02/1979 Birthtime: ___:___M
Age: 30 Years
Sex: Female
SSN: 521-63-8754
Patient ID: 704
MRN: MR-000-052
Resp. Provider: Starr MD, Kelly G.
Referring:
Primary Care:
*Home Location: E IM
Facility:
Language: English
Race: Caucasian
Ethnicity: Non Hispanic or Latino

Sensitive Patient
No users denied access
User Specific Chart Access...
*Patient Status: Active
Date of Death: / /

Patient Same As Guarantor Marital Status: Single

Addresses
 Primary Alternate **Swap**
Address: 12260 SW Farmington
City/State: Aloha IL ZipCode: 60007
County: Address Type:
Country: USA

Phone: (503) 642-2930 [] Home
(503) 226-5496 [] Work
(503) 226-5497 [] Fax
Email: lsimpson@ats.com
Contact by: Phone Call

Quick Entry Mode (this session only)

Get Photo **Remove Photo**

*Centricity Practice Solution features shown

Main Health System

Get Driving Directions

Send E-mail

Get Financial Information

Get Financial History

Get Patient History

kstarr

9:50 AM

(5)(i) Objective. Maintain an up-to-date problem list of current and active diagnoses based on ICD-9-CM or SNOMED CT ®.

(6)(i) Objective. Maintain active medication list.

(ii) Measure. More than 80 percent of all unique patients seen by the EP or admitted by the eligible hospital or CAH have at least one entry (or an indication of “none” if the patient is not currently prescribed any medication) recorded as structured data.

Problems
ASTHMA, EXTRINSIC
ALLERGIC RHINITIS DUE TO POLLEN
Family Hx of DIABETES MELLITUS

Medications ⚠ Drug interactions
AZMACORT AER 100MCG (TRIAMCINOLONE ACETONIDE(INHAL)) 4 puffs q
VANCENASE AQ INHA 0.042 % (BECLOMETHASONE DIPROP MONOHYD) 2
ALLEGRA CAPS 60 MG (FEXOFENADINE HCL) 1 po qd
ALBUTEROL AER 90MCG (ALBUTEROL) 2 puffs po q 4 hrs prn

Allergies
ASPIRIN
PENICILLIN

Care Alerts

Registration Notes

Flowsheet: Enterprise/Medicine/Internal Medicine **Documents:All**

HEIGHT		
WEIGHT		
TEMPERATURE		
TEMP SITE		
PULSE RATE		
PULSE RHYTHM		
RESP RATE		
BP SYSTOLIC		
BP DIASTOLIC		
CHOLESTEROL		
HDL		
LDL		
BG RANDOM		
CXR		
EKG		
PHYSICIAN		

(7)(i) Objective. Maintain active medication allergy list.
(ii) Measure. More than 80 percent of all unique patients seen by the EP or admitted to the eligible hospital or CAH have at least one entry (or an indication of “none” if the patient has no medication allergies) recorded as structured data.

(8)(i) Objective. (A) Record and chart changes in the following vital signs:
(1) Height. (2) Weight. (3) Blood pressure.

(B) Calculate and display the body mass index (BMI) for patients 2 years and older.

(C) Plot and display growth charts for children 2 to 20 years including body mass index.

(ii) Measure. More than 50 percent of all unique patients age 2 years or older seen by the EP or admitted to the eligible hospital, record Height, weight, and blood pressure as structured data

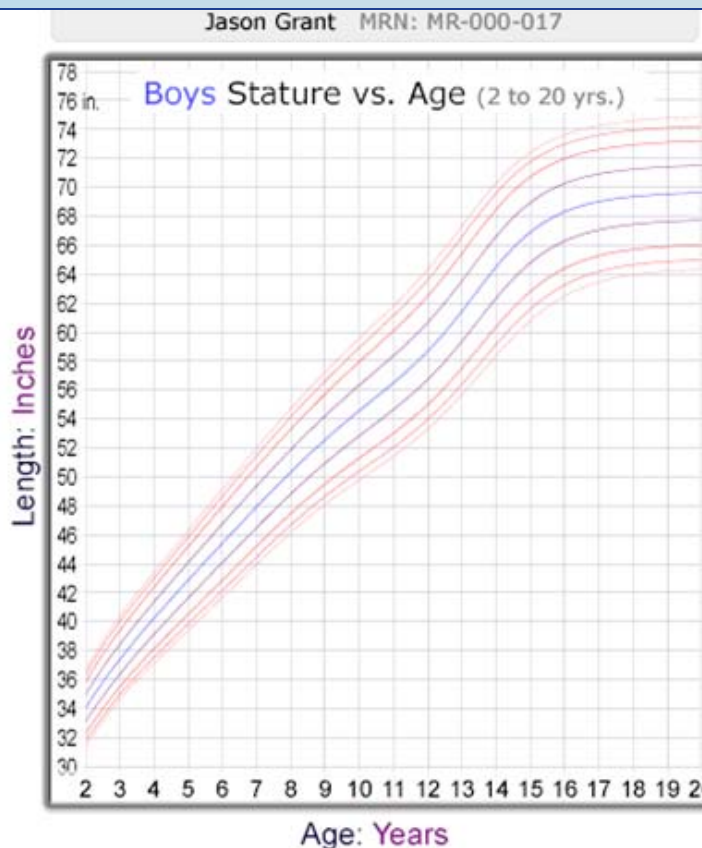
Vital Signs-2-CCC: Laura P. Simpson

Vital Signs Vision

Vital Signs:
VS View Standard Metric Convert to Metric VS Entered By =>

Standard		Previous Values	
Ht: 68 inches		68 (04/10/2005)	Height:
Wt: 138 lb		135 (04/10/2005)	Weight:
Temp: 102 °F		98.6 (04/10/2005)	Temp:
Temp Site: oral		oral (04/10/2005)	
Resp: 19 /min.		16 (04/10/2005)	BP supine: /
O2 Sat: %			BP sitting: 122 / 78
Pulse: 88 /min.		66 (04/10/2005)	BP stand: /
Pulse (Ortho): /min.			
Rhythm:			

Ht conversion table BMI Calc 21.06 lbs/in²
Recommended BMI: 19-25



*Optional form

- (9)(i) Objective.** Record smoking status for patients 13 years old or older.
- (ii) Measure.** More than 50 percent of all unique patients 13 years old or older seen by the EP or admitted to the eligible hospital or CAH have “smoking status” recorded as structured data.



FH-SH-CCC: Laura P. Simpson

FH/SH Additional Hx

Family History Select Specialty **Internal Medicine** **Insert Selected Values**

Last updated: reviewed - no changes required **Check to insert into FH Edit Field**

FH Unknown *** Non-PtLink Below **
 FH Alcoholism FH Angina

Social History **Problems** **Flowsheet** **Medications** **Allergies** **Insert Selected Values**

Last updated: 10/19/2009 reviewed - no changes required **Check to insert into SH Edit Field**

Married and lives with wife. Has 3 sons ages 25, 22 and 19, doing well. Retired school teacher.
 Patient is a former smoker.

Current every day smoker Drug Use-yes
 Current some day smoker Drug Use-no
 Former smoker HIV/High Risk-yes
 Never Smoker HIV/High Risk-no
 Smoker current status Regular Exercise-yes
 unknown if ever smoked Regular Exercise-no
 Counseled to Quit? Hx Domestic Abuse
 Passive Smoke-yes Religion Affecting Care

Insert SH Template **Remove SH Template** **Replace w/ Prior SH**

*Optional form

(10)(i) Objective. Implement One clinical decision support rules relevant to specialty or high clinical priority, including for diagnostic test ordering, along with the ability to track compliance with that rule.

(i) Measure. Implement one clinical decision support rule.

CPOE A&P-CCC: Laura P. Simpson

A&P 1-2 A&P 3-4 A&P 5-6 A&P 7-8 A&P 9-10 A&P 11-12

Assessment #1

DIABETES-TYPE 1 (0)

Assessment:

Centricity

Centricity Practice Solution

The following tests/services are now due:

- HGBA1C
- Lipid Profile
- Creat
- Microalb Urn
- TSH
- Dialated Retinal Exam
- Pneumovax
- Flu Shot

Would you like to review the indications? Click 'Yes' to review the indications; otherwise, click 'No'.

*Optional form

(11)(i) Objective. Report ambulatory quality measures to CMS or, in the case of Medicaid EPs, the States.

(ii) Measure. Successfully report to CMS (or, in the case of Medicaid EPs, the States) clinical quality measures in the form and manner specified by CMS.

Your Clinic Name Here
1111 First St., Suite 100, Anytown, USA 98765
Ph: (503) 555-5538
Fa: (555) 555-5555

Percentage of Encounters with Medical Reconciliation

Encounters from 01-Jan-2010 to 31-Dec-2010

This report calculates the percentage of Encounters with Medication Reconciliation for each provider.

Numerator

Encounters in the denominator where "Done" is entered in at least one of the following observations:

MEDS REVIEW compliance with medical treatment
-populated with 'Done' when 'Medication list reviewed during this update' is checked in Update

Meds

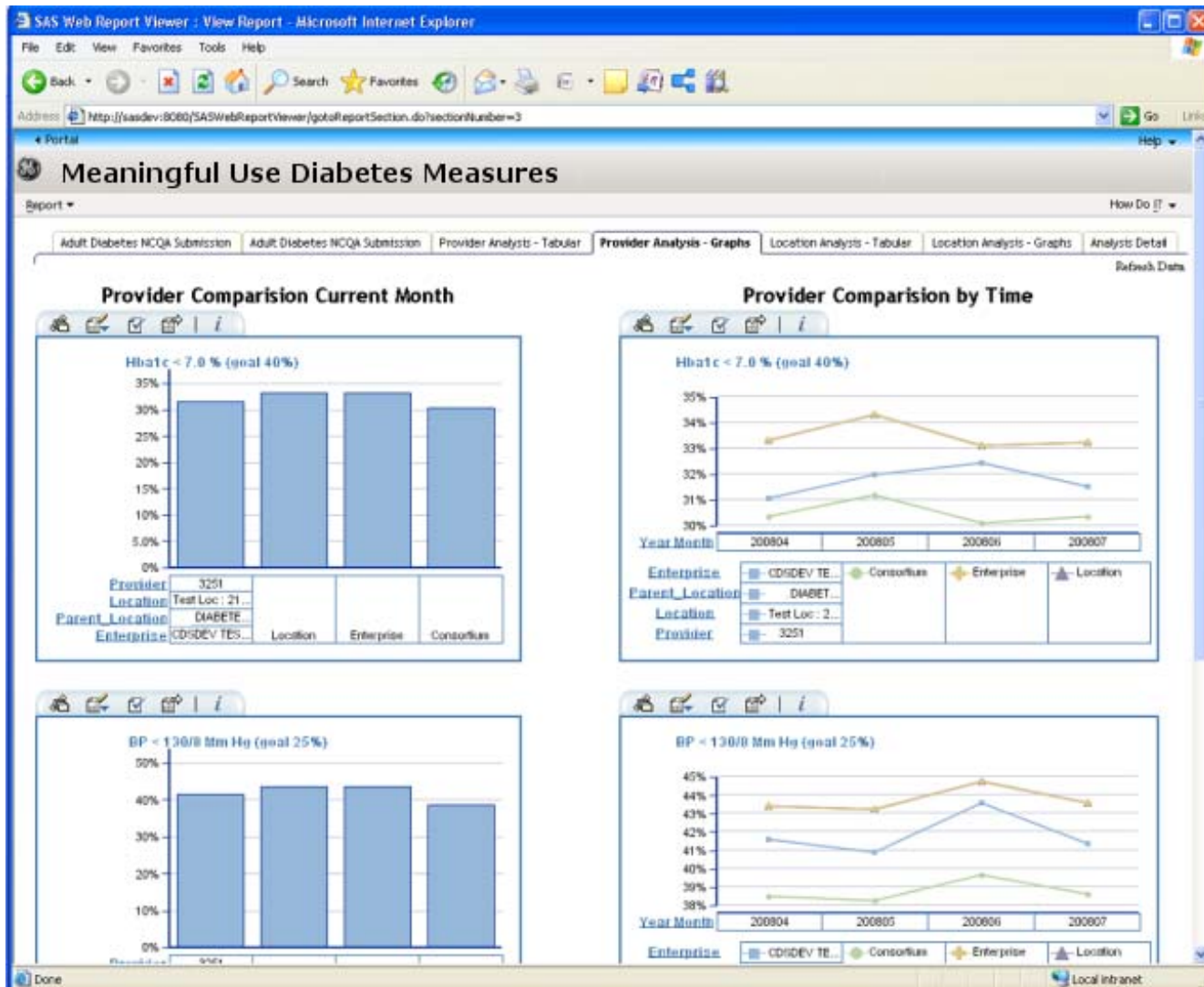
MEDS REVIEWD list of meds reviewed with patient
MEDRECON Medication Reconciliation
MEDLISTPRTD Joint Commission (JCAHO) medical reconciliation printed and given to patient
MEDSAFTEREC List of Medications after reconciliation
REW MED NCHG Med list, reviewed no changes
FALLMEDREV Falls risk assessment: medication review and modification

Denominator

All encounters - Office Visit and Office Procedure documents - with clinical date between and

Harry Winston MD	1/28=4%
Kelly Starr MD	0/3=0%
Tess Highlander RN	0/1=0%
Lynn Choong MD	0/1=0%
Tristan Lee	1/50=2%
Sam Mitchell MD	0/1=0%
Henry Topper	0/9=0%
Jerry Quinn MD	0/2=0%

Meaningful Use Dashboard via MQIC Portal



Quality Reporting

Centricity Practice Solution 10

Go Actions Options Help

New Flag Update Chart Attach New Phone Note Refill Rx Print Help Go | New

Quality and Reporting <<

Quality

- DPRP ✖
- HSRP
- DOQ-IT CAD
- DOQ-IT DM
- DOQ-IT HTN
- DOQ-IT HF
- DOQ-IT PC
- PQRI
- MLU**

Meaningful Use

+ Show Patient List

MEASURE	VALUE	NUMERATC	DENOMIN	EXCLUDED
<input type="checkbox"/> 001: Diabetes Mellitus: Hemoglobin A1c Poor Control in Diabetes Mellitus	29.8%	180	604	9
<input type="checkbox"/> 002: Diabetes Mellitus: Low Density Lipoprotein (LDL-C) Control in Diabetes Mellitus	49.1%	265	540	73
<input type="checkbox"/> 003: Diabetes Mellitus: High Blood Pressure Control in Diabetes Mellitus	55.7%	340	610	3
<input type="checkbox"/> 006: Coronary Artery Disease (CAD): Oral Antiplatelet Therapy Prescribed for Patients with CAD	88.2%	60	68	0
<input type="checkbox"/> 007: Coronary Artery Disease (CAD): Beta-Blocker Therapy for CAD Patients with Prior Myocardial Infar	0.0%	0	0	0
<input type="checkbox"/> 110: Preventive Care and Screening: Influenza Immunization for Patients ≥ 50 Years Old	13.0%	38	292	1
<input type="checkbox"/> 111: Preventive Care and Screening: Pneumonia Vaccination for Patients 65 Years and Older	41.0%	7	17	10
<input type="checkbox"/> 112: Preventive Care and Screening: Screening Mammography	0.0%	0	231	0
<input type="checkbox"/> 121: Chronic Kidney Disease (CKD): Laboratory Testing (Calcium, Phosphorus, Intact Parathyroid Horm	0.0%	0	0	0
<input type="checkbox"/> 183: Hepatitis C: Hepatitis A Vaccination in Patients with HCV	0.0%	0	0	0
<input type="checkbox"/> 184: Hepatitis C: Hepatitis B Vaccination in Patients with HCV	0.0%	0	0	0

Data as of 15-Feb-2010 Patient Count = 0

Please select measures and click on Show Patient List.

Desktop

Chart

Appointments

Quality and Reporting

Not for Patient Use - Product Under Development

Data Submission

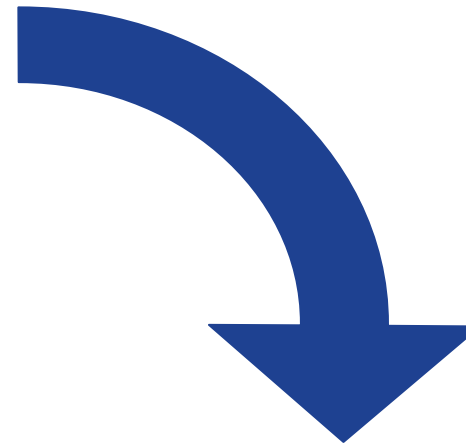
Measure 111: Preventive Care Screening: Pneumonia Vaccination

Pneum Vac Prov Signed	Elig Pneum Vac Patient Count	Pneum Vac Performance Met	Pneum Vac Performance Not Met	Pneum Vac Exclusions	P Perf Rate Pct
Resp Provider					
1255365537000600	36	14	11	0	68%
1312363734000940	191	160	13	18	92%
14996719566000830	1411	125	12	4	91%

Measure 112: Preventive Care Screening: Screening Mammography

Mammogram Prov Signed	Elig Mammogram Patient Count	Mammogram Performance Met	Mammogram Exclusions	Mammogram Performance Not Met	Mammo Perf Rate Pct
Resp Provider					
1255365537000600	6	6	0	0	100%
1312363734000940	34	30	0	4	88%
14996719566000830	26	19	1	6	73%

2011 via CMS Portal



2012 via Automated PQRI Format XML



(12)(i) **Objective.** Provide patients with an electronic copy of their health information (including diagnostic test results, problem list, medication lists, and allergies) upon request.

(ii) **Measure.** More than 50 percent of all patients of the EP who request for an electronic copy of their health information are provided it within 3 business days.

Summary

Back Forward Stop Refresh

Logged in **hwinston**

Messages

Send Save As Attach Settings Delete Close

Patient: **Janett Farrell (janetfarrell75@yahoo.com)**

CC to chart (Provider: Winston MD, Harry; Unsigned) Reply to chart

To...: janetfarrell75@yahoo.com;

Cc...:

Subject: Referral to Dr. Johnson about your ankle

Note: subject text is not encrypted - do not include sensitive or private information. Saved at 3/16/2010 10:45 AM

Documents for Janett Farrell:

Chart Summary Attach as text Attach as CCR Attach as CCD View Download

Hide EMR Attachments

<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Clinical Date	Type	Summary	Attachments
<input type="checkbox"/>	<input checked="" type="checkbox"/>	4/13/2010 5:53 AM	Ofc Visit	[No Summary]	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	2/1/2009 10:58 PM	Ofc Visit	Sore Throat x3 days w/o relief	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	2/1/2009 5:13 PM	Letter	Out of school	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	4/2/2008 10:56 PM	Ofc Visit	Sports Physical - Soccer	
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	4/1/2007 10:40 PM	Ofc Visit	WCC-9 yrs	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	12/1/2006 11:19 AM	Phone	Phone Note	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	4/3/2006 10:44 PM	Ext Oth	Anderson Pediatric Assoc - URI note (visiting w/father)	[1]
<input type="checkbox"/>	<input checked="" type="checkbox"/>	3/15/2006 8:44 AM	Release	ROI to Anderson Pediatrics (summer w/father)	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	3/10/2005 10:22 PM	Ext Oth	Urgent Care Record - weekend ankle injury	[1]
<input type="checkbox"/>	<input checked="" type="checkbox"/>	7/12/2003 10:20 PM	Consent	Immunizations - 5 yrs	[1]

0 documents selected Documents 1-10 of 27 First | Prev | Next | Last

Hi Janet,

I have contacted Dr. Johnson about your ongoing ankle pain, and he has agreed to see you. Please call him to schedule an appointment.

I have attached your chart summary and your ankle x-ray. This is the same information I already sent to Dr. Johnson.

Best regards,

***Centricity Practice – Clinical Messenger features shown**

Provide CCD via secure media

Viewer: 11/17/2009 - Clinical Summary: Imported CCD

Patient name: **Don C. Bassett** **Attach**

Properties: **Clinical Summary at SOUTH on 11/17/2009 1:30 PM by Harry S. Winston MD**

Doc ID: **43**

Eastside Internal Medicine Clinical Summary on November 17, 2009 by Harry S. Winston MD

Don C. Bassett
Gender: **Male** DOB: **June 12, 1947** MRN: **MR-000-002**

Conditions or Problems

Problem Name	Problem Code	Onset Date	Status	Entry Date
CONGESTIVE HEART FAILURE	ICD-428.0	2002/04/03	Active	2003/09/27
Symptoms of HOARSE VOICE QUALITY		2002/04/03		2003/09/27
EFFUSION, PLEURAL	ICD-511.9	2003/03/25	Active	2003/09/27
EDEMA	ICD-782.3	2003/03/25	Active	2003/09/27

Allergies, Adverse Reactions, Alerts

No known active allergies or adverse reactions

Medication List

Medication	Instructions	Start Date	Stop Date	Product Name	NDC	Generic Name
ZAROXOLYN TAB 5MG	1 po qd	2002/04/03		ZAROXOLYN	00585085071	METOLAZONE
FUROSEMIDE TABS 20 MG	1 po bid	2002/04/03		FUROSEMIDE	00005370823	FUROSEMIDE

Authored by: Harry S. Winston MD on November 17, 2009

Print Print all internal image attachments at end **Close**

(13)(i) Objective. Provide clinical summaries to patients for each office visit.
(ii) Measure. Clinical summaries provided to patients for at least 80 percent of all office visits.

Eastside Internal Medicine

120 NE Valley View Drive Gresham, OR 97030
 503-665-1010 Fax: 503-665-1011

March 16, 2010

Page 1

Chart Summary

Don C. Bassett

Male DOB: 06/12/1947

Home: 503-629-5541 Work: 503-692-8955

80-TEST011

Ins: BHI (Futura) Grp: BHI8654

Patient Information

Name: Don C. Bassett **Home Phone:** 503-629-5541
Address: 12155 SW Broadway **Work Phone:** 503-692-8955
 Beaverton, OR 97005 USA
Patient ID: 80-TEST011 **Fax:** 503-692-8956
Birth Date: 06/12/1947 **Status:** Active
Gender: Male **Marital Status:** Married
Contact By: Home Phone **Race:** White
Soc Sec No: 543-34-5621 **Language:** English
Resp Prov: Kelly G. Starr MD **MRN:** MR-000-002
Referred by: **Emp. Status:** Full-time
Email: dbassett@aol.com **Sens Chart:** No
Home LOC: Eastside Internal Medicine **External ID:** MR-000-002

Problems

CONGESTIVE HEART FAILURE (ICD-428.0)
 EFFUSION, PLEURAL (ICD-511.9)
 EDEMA (ICD-782.3)
 Sx of HOARSE VOICE QUALITY

Medications

ZAROXOLYN TAB 5MG (METOLAZONE) 1 po qd
 Last Refill: #90 x 1, 09/27/2003, Kelly G. Starr MD
 FUROSEMIDE TABS 20 MG (FUROSEMIDE) 1 po bid
 Last Refill: #60 x 1, 09/27/2003, Kelly G. Starr MD

Directives

Allergies and Adverse Reactions (! = critical)

This patient has no known allergies or adverse reactions.

Viewer: 11/17/2009 - Clinical Summary: Imported CCD

Patient name: **Don C. Bassett** **Attach**

Properties: **Clinical Summary at SOUTH on 11/17/2009 1:30 PM by Harry S. Winston MD**

Doc ID: **43**

Eastside Internal Medicine Clinical Summary on November 17, 2009 by Harry S. Winston MD

Don C. Bassett
 Gender: Male DOB: June 12, 1947 MRN: MR-000-002

Conditions or Problems

Problem Name	Problem Code	Onset Date	Status	Entry Date
CONGESTIVE HEART FAILURE	ICD-428.0	2002/04/03	Active	2003/09/27
Symptoms of HOARSE VOICE QUALITY		2002/04/03		2003/09/27
EFFUSION, PLEURAL	ICD-511.9	2003/03/25	Active	2003/09/27
EDEMA	ICD-782.3	2003/03/25	Active	2003/09/27

Allergies, Adverse Reactions, Alerts

No known active allergies or adverse reactions

Medication List

Medication	Instructions	Start Date	Stop Date	Product Name	NDC	Generic Name
ZAROXOLYN TAB 5MG	1 po qd	2002/04/03		ZAROXOLYN	00585085071	METOLAZONE
FUROSEMIDE TABS 20 MG	1 po bid	2002/04/03		FUROSEMIDE	00005370823	FUROSEMIDE

Authored by: Harry S. Winston MD on November 17, 2009

Print Print all internal image attachments at end **Close**

- (14)(i) **Objective.** Capability to exchange key clinical information among providers of care and patient authorized entities electronically.
- (ii) **Measure.** Perform at least one test of certified EHR technology's capacity to electronically exchange key clinical information.

The screenshot displays a web-based clinical messaging application. At the top, there are tabs for 'Summary', 'Flags', 'Documents', 'File Attachments', and 'Messaging'. Below these are navigation buttons: 'Back', 'Forward', 'Stop', and 'Refresh'. The main header shows 'Patient Message' and 'Logged in hwinston'. A toolbar includes 'Send', 'Save As', 'Attach', 'Settings', 'Delete', and 'Close'. The message details for 'Janett Farrell (janetfarrell75@yahoo.com)' are shown, including 'To...', 'Cc...', and 'Subject: Referral to Dr. Johnson about your ankle'. A note states: 'Note: subject text is not encrypted - do not include sensitive or private information.' Below the message, there is a section for 'Documents for Janett Farrell:' with options to 'Attach as text', 'Attach as CCR', and 'Attach as CCD'. A table of EMR attachments is displayed with columns for 'Clinical Date', 'Type', 'Summary', and 'Attachments'. The table lists various medical records from 2003 to 2010, including office visits, letters, phone notes, and urgent care records. At the bottom, the message body begins with 'Hi Janet, I have contacted Dr. Johnson about your ongoing ankle pain, and he has agreed to see you. Please call to schedule an appointment. I have attached your chart summary and your ankle x-ray. This is the same information I already sent to Dr. Johnson. Best regards,'. An orange banner at the bottom right reads '*Centricity Practice – Clinical Messenger features shown'.

	Clinical Date	Type	Summary	Attachments
<input type="checkbox"/>	4/13/2010 5:53 AM	Ofc Visit	[No Summary]	
<input type="checkbox"/>	2/1/2009 10:58 PM	Ofc Visit	Sore Throat x3 days w/o relief	
<input type="checkbox"/>	2/1/2009 5:13 PM	Letter	Out of school	
<input type="checkbox"/>	4/2/2008 10:56 PM	Ofc Visit	Sports Physical - Soccer	
<input type="checkbox"/>	4/1/2007 10:40 PM	Ofc Visit	WCC-9 yrs	
<input type="checkbox"/>	12/1/2006 11:19 AM	Phone	Phone Note	
<input type="checkbox"/>	4/3/2006 10:44 PM	Ext Oth	Anderson Pediatric Assoc - URI note (visiting w/father)	[1]
<input type="checkbox"/>	3/15/2006 8:44 AM	Release	ROI to Anderson Pediatrics (summer w/father)	[1]
<input type="checkbox"/>	3/10/2005 10:22 PM	Ext Oth	Urgent Care Record - weekend ankle injury	[1]
<input type="checkbox"/>	7/12/2003 10:20 PM	Consent	Immunizations - 5 yrs	[1]

(15)(i) Objective. Protect electronic health information created or maintained by certified EHR technology through the implementation of appropriate technical capabilities.

(ii) Measure. Conduct or review a security risk analysis in accordance with the requirements under 45 CFR 164.308(a)(1) and implement security updates as necessary.

Sec. 164.308 Administrative safeguards.

(a) A covered entity must, in accordance with Sec. 164.306:

(1) (i) Standard: Security management process. Implement policies and procedures to prevent, detect, contain, and correct security violations.

(ii) Implementation specifications:

(A) Risk analysis (Required). Conduct an accurate and thorough assessment of the potential risks and vulnerabilities to the confidentiality, integrity, and availability of electronic protected health information held by the covered entity.

(B) Risk management (Required). Implement security measures sufficient to reduce risks and vulnerabilities to a reasonable and appropriate level to comply with Sec. 164.306(a).

(C) Sanction policy (Required). Apply appropriate sanctions against workforce members who fail to comply with the security policies and procedures of the covered entity.

(D) Information system activity review (Required). Implement procedures to regularly review records of information system activity, such as audit logs, access reports, and security incident tracking reports.



Examples:

Objectives and Measures for Meaningful Use with Centricity EMR



Menu Set

Select 5 of 10 Objectives including 1 public health criteria

- (1)(i) **Objective.** Implement drug formulary checks.
- (ii) **Measure.** The EP, eligible hospital or CAH has enabled this functionality.

New Medication

Name: Joe Gardner
Birth: 07/01/1998
Age: 12 Years & 1 Month Old Male
Height: 56 in (142.2 cm*)
Weight: 88 lb (39.916 kg*)
BSA: 1.25 sqm

Insurance:
 Eligibility: Pending
 Alrgs(2) Meds(2) Probs(2)

Current/Associated Problems
 Problems associated with this medication are highlighted.

Description
SINUSITIS-ACUTE
ASTHMA

Find Medication
 Custom List: Orthopedics Reference List...
 FLEXERIL 10 MG TABS 1 tablet by mouth at bedtime 30 x 1 \$1.69

Formulary: CHC Gold
 FLEXERIL 10 MG TABS is off formulary.
 Cyclobenzaprine HCl 10 MG TABS is an alternative.
Search Formulary...
Select Formulary...
Status...
Choose Alternative

Define Medication
 Medication: FLEXERIL 10 MG TABS (CYCLOBENZAPRINE HCL)
 Instructions: 1 tablet by mouth at bedtime Comments:
 Start Date: 08/12/2010 Stop Date:
 Duration: Days Weeks Months
Dosing Calculator
Monograph

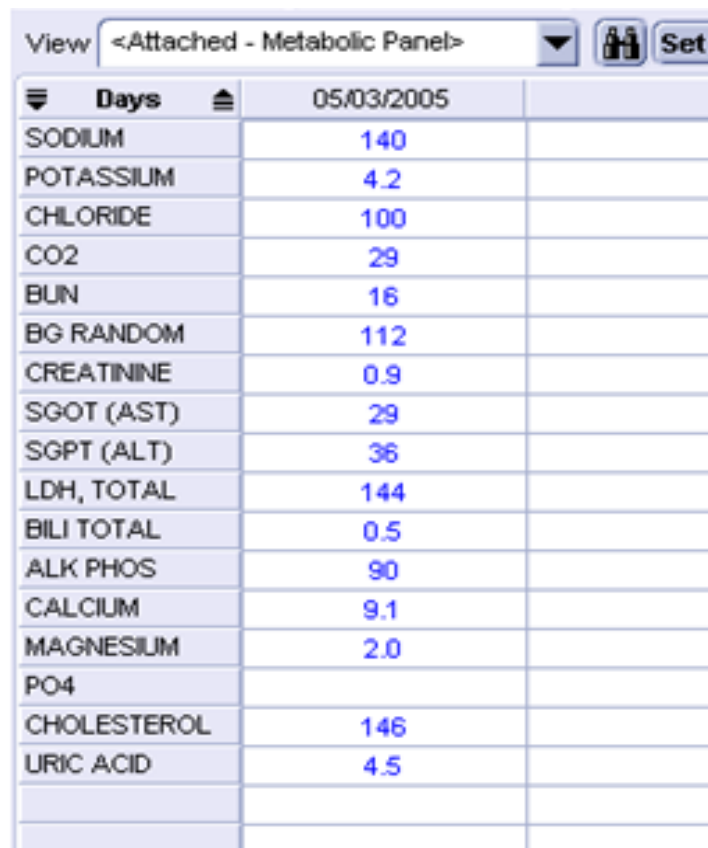
Prescription
 Quantity: 30 **tablet** Refills: 1 Brand medically necessary Print Pt. Handout necessary
 Pharmacy: TEST PHARMACY* (retail) Select...
 ADDRESS LINE #1
 Addr Line #2
 CITY, AL
 Ph: (223) 465-0987
 Authorized By: Winston MD, Harry S Print
 Prescribing Method: Electronic
 State: Maryland
 Note to Pharmacy:

Add to custom list: Drug Instructions/Duration Qty/Refills
 * indicates the calculated values of weight or height.

New Problem... Save & Continue OK Cancel

(2)(i) Objective. Incorporate clinical lab-test results into EHR as structured data.

(ii) Measure. At least 50 percent of all clinical lab tests results ordered by the EP or authorized provider of the hospital during the EHR reporting period whose results are either in a positive/negative or numerical format are incorporated in certified EHR technology as structured data.



Days	05/03/2005
SODIUM	140
POTASSIUM	4.2
CHLORIDE	100
CO2	29
BUN	16
BG RANDOM	112
CREATININE	0.9
SGOT (AST)	29
SGPT (ALT)	36
LDH, TOTAL	144
BILI TOTAL	0.5
ALK PHOS	90
CALCIUM	9.1
MAGNESIUM	2.0
PO4	
CHOLESTEROL	146
URIC ACID	4.5

(3)(i) Objective. Generate lists of patients by specific conditions to use for quality improvement, reduction of disparities, research and outreach.

(ii) Measure. Generate at least one report listing patients of the EP, eligible hospital or CAH with a specific condition.

The screenshot shows a software interface with two tabs: "Inquiries" and "Reports". The "Inquiry" section on the left contains a search form with the following fields and options:

- Find:** Patients
- Active Patients Only
- Where:** Problem Code, Active (Diagnosis lookup)
- is:** is
- Search Term:** Hypertension, benign (ICD-401.1)
- Buttons:** Add, Delete, Replace
- Combine With:** AND OR
- Find Patients where:** Problem Code, Active (Diagnosis lookup) is 'Hypertension, benign (I
- Match case when searching mixed case text

The **Count Result:** is **Search Result: Patients found: 8**. The search results are listed in a table:

Fuller, Joseph D
Henderson, Ralph E.
Mason, Olivia P.
Nyberg, Carl O.
O'Malley, Martha A.
Olson, Maggie D.
Test, Twenty7
Torres, Raul R.

At the bottom of the interface are buttons for **Select...**, **Save...**, **Clear**, **Count**, **Search**, **View Item**, **Print...**, and **Bulk Alerts/Flags**.

(4)(i) Objective. Send reminders to patients per patient preference for preventive/follow-up care.

(ii) Measure. Reminder sent to more than 20 percent of all unique patients 65 years of age and older or 5 years old or younger were sent an appropriate reminder during the reporting period.

Patient | Guarantor | Additional | Insurance | Contacts | Appointments | Financial | Payment Plan | Historical

Title: *First: Laura Middle: P *Last: Simpson Suffix: Preferred: Laura

*Birthdate: 05/03/1973 Birthtime: : M Patient Same As Guarantor Marital Status: Single

Age: 37 Years

*Sex: Female

SSN: 521-63-8754

Patient ID: 106-TEST011

MRN: MR-000-052

Resp. Provider: Starr, MD, Kelly G

Referring:

Primary Care:

*Home Location: E IM

Facility: E IM

Language: English

Race: Caucasian

Ethnicity: Non Hispanic or Latino


Sensitive Patient

No users denied access

User Specific Chart Access...

*Patient Status: Active

Date of Death: / /



Get Photo Remove Photo

Addresses

Primary Alternate

Address: 12260 SW Farmington

City/State: Barrington IL ZipCode: 60010

County: Address Type:

County:

Phone: (847) 642-2930 [] Home

(847) 226-5496 [] Work

[] - []

Email: lsimpson@patient.com

Contact by: E-mail

Letter

Phone Call

E-mail

Mail

Fax

Quick Entry Mode (this session only)

E IM

*Centricity Practice Solution features shown

(5)(i) Objective. Provide patients with timely electronic access to their health information (including diagnostic test results, problem list, medication lists, and allergies) within 4 business days of the information being available to the EP.

(ii) Measure. More than 10 percent of all unique patients seen by the EP are provided timely electronic access to their health information subject to the EP's discretion to withhold certain information.



Internal Medicine Clinic

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MyMedicalRecord



New Secure Messages

- There are currently no messages in your inbox.
- [View My Inbox](#)

Janett S.

Sarah

Zoe

Personal Information

Janett S. Farrell

2973 Town Center Way
Hillsboro, OR 97124

Home: 503-551-0592

Work: 503-567-0909

[...More](#)

Health Conditions

ANKLE SPRAIN

[...More](#)

Medications

TRIPHASIL TABS

IBUPROFEN TAB 800MG

[...More](#)

Insurance

Primary

Consolidated Health Care

Allergies

AMOXICILLIN

Download My Continuity
of Care Record.

[More Information](#)

*Centricity Practice - Patient Portal features shown

(6)(i) Objective: Use certified EHR technology to identify patient-specific education resources and provide those resources to the patient if appropriate

(ii) Measure: More than 10% of all unique patients seen by the EP are provided patient-specific education resources

Chickenpox

Chickenpox is a common but serious infection caused by a virus. This infection can be spread very easily from person to person. It is most common in children (under 15 years old). If your child has not already had the chicken pox, they can get a chicken pox shot after 12 months of age. Children less than 13 years old need one dose of the vaccine while teenagers and adults need two doses given 4 to 6 weeks apart.

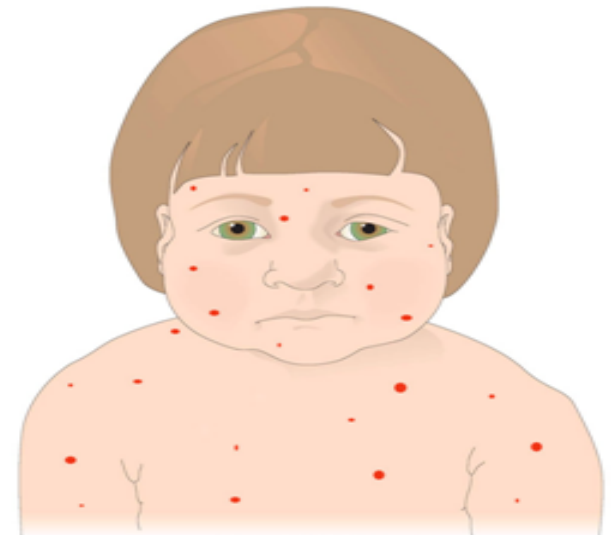
HOME CARE

Children with chickenpox may have these problems:

- Fever.
- An itchy red rash that starts on the front or back of the body. It can start out looking like bug bites. This rash then spreads all over the body. It usually starts as red bumps and then changes to a red fluid filled blister. These blisters dry up and form scabs.
- The child may feel sick to their stomach and be throwing up.
- The child may have stomach pain or not be hungry.
- Do not let your children be around others who may have chickenpox. Children with chickenpox will be sick for about 7 to 10 days.
- Do not send your child to school or daycare until all of the sores have dried or crusted.

What to do for chickenpox:

- Take the child's temperature at least every four hours in the way your doctor has told you.



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New .rtf handouts

(7)(i) Objective. Perform medication reconciliation at relevant encounters and each transition of care.

(ii) Measure. Perform medication reconciliation for more than 50 percent of relevant encounters and transitions of care.

Status of last history request: **Complete.**

Last Requested by: Thompson CFNP, Ellen R

Last Received on: 07/07/2010

Date Range (Optional)

From

To

Request Med Hx

Requesting Provider

Winston MD, Harry S

Patient Consent Status: Consent granted by patient

Last Recorded by: Jones MD, Samuel A

Last Recorded on: 06/29/2010 4:45 PM

Consent Status

Consent granted by patient

Medication Hx from prescribing network received 07/07/2010 at 09:36

Refresh Grid

	Description	Instructions	Quantity	Refills	Written	Filled	Prescribing Provider	
Ok	LIPITOR 20 MG TAB	TAKE 1 TAB...	60	0		07/07/2010	BUTLER, E	CCH
?	ZANTAC 150 MG TAB	TAKE 1 TAB...	12	0		07/06/2010	BUTLER, E	CCH
Ok	ACTOS 30 MG TAB	TAKE 1 TAB...	30	0		07/05/2010	DOE, JOHN	CCH
Ok	SYNTHROID 112 MCG	TAKE 1 TAB...	30	0		07/04/2010	DOE, JOHN	CCH
Ok	LISINAPRIL 5 MG TAB	TAKE 1 TAB...	30	0		07/03/2010	DOE, JOHN	CCH
	WARFARIN SODIUM 5 MG	TAKE 1 TAB...	30	0		07/02/2010	DOE, JOHN	CCH

Add to Current Meds

Note: This Rx History contains prescription records provided by community pharmacies and pharmacy benefit managers (PBMs). Such RxHistory may be incomplete and prescriber should not rely solely on this Rx History data to make any clinical decisions. It is the responsibility of the prescriber to validate and verify the information directly with the patient or via other appropriate means.

Current Meds in Chart

Description	Instructions	Start Date	Last Refill	BMN
LIPITOR 20 MG TABS	1 Tablet by mouth each evening	04/14/2003	#30 x 3, 06/29/2010, Samuel A Jone...	No
ZANTAC 150 MG CAPS	1 tablet by mouth each morning	04/14/2003	#30 x 3, 06/29/2010, Samuel A Jone...	No
ACTOS 30 MG TABS	1 tablet by mouth daily	04/14/2003	#30 x 3, 06/29/2010, Samuel A Jone...	No
SYNTHROID 112 MCG TABS	1 tablet by mouth on an empty sto...	04/14/2003	#30 x 3, 06/29/2010, Samuel A Jone...	No
LISINAPRIL 5 MG TABS	1 tablet by mouth daily	04/12/2010	#30 x 2, 07/02/2010, Internist E. Butle...	No
GLUCOSAMINE-CHONDROITIN 500-400 M...	1 capsule by mouth two times a day	04/14/2003		
PLAVIX 75 MG TABS	1 each day	07/09/2010	#30 x 3, 07/09/2010, Internist E. Butle...	No

Close

Medication Reconciliation Option

Update Medications

Potential medication list for: **Laura P. Simpson**
 Eligibility: Pending
  Drug Interactions

Description	Instructions	Start Date	Last Refill	BMN?	Formulary
AZMACORT AER 100MCG (TRIAMCINO	4 puffs po bid	05/09/2005	#1 x 2, 05/24/2005, Kelly G.		
VANCENASE AQ INHA 0.042 % (BECL	2 puffs tid	05/09/2005	#1 x 2, 05/24/2005, Kelly G.		
ALLEGRA CAPS 60 MG (FEXOFENADIN	1 po qd	05/09/2005	#30 x 2, 05/24/2005, Kelly G		
ALBUTEROL AER 90MCG (ALBUTEROL	2 puffs po q 4 hrs prn	05/09/2005	#30 x 0, 05/24/2005, Kelly G		

Up

Down

Left

Right

To Top

To Bottom

Med Hx...

This patient takes no known medications (NKMED)
 Medication list reviewed during this update

Reviewed on 03/16/2010 9:18 AM by Kelly G. Starr MD Formulary: < None >

(8)(i) Objective. Provide summary care record for each transition of care and referral.

(ii) Measure. Provide summary of care record for more than 50 percent of transitions of care and referrals.

The screenshot shows a web-based patient message interface. At the top, there are tabs for Summary, Flags, Documents, File Attachments, and Messaging. Below these are navigation buttons: Back, Forward, Stop, and Refresh. The main header reads "Patient Message" and "Logged in hwinston".

The message is from "Janett Farrell (janetfarrell75@yahoo.com)". It includes a "Send" button, "Save As", "Attach", "Settings", "Delete", and "Close" options. The message content is:

To... janetfarrell75@yahoo.com;
Cc...
Subject: Referral to Dr. Johnson about your ankle
Note: subject text is not encrypted - do not include sensitive or private information.

Documents for Janett Farrell:

Chart Summary Attach as text Attach as CCR Attach as CCD [View](#) [Download](#)

Hide EMR Attachments

<input type="checkbox"/>	<input type="checkbox"/>	Clinical Date	Type	Summary	Attachments
<input type="checkbox"/>	<input type="checkbox"/>	4/13/2010 5:53 AM	Ofc Visit	[No Summary]	
<input type="checkbox"/>	<input type="checkbox"/>	2/1/2009 10:58 PM	Ofc Visit	Sore Throat x3 days w/o relief	
<input type="checkbox"/>	<input type="checkbox"/>	2/1/2009 5:13 PM	Letter	Out of school	
<input type="checkbox"/>	<input type="checkbox"/>	4/2/2008 10:56 PM	Ofc Visit	Sports Physical - Soccer	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	4/1/2007 10:40 PM	Ofc Visit	WCC-9 yrs	
<input type="checkbox"/>	<input type="checkbox"/>	12/1/2006 11:19 AM	Phone	Phone Note	
<input type="checkbox"/>	<input type="checkbox"/>	4/3/2006 10:44 PM	Ext Oth	Anderson Pediatric Assoc - URI note (visiting w/father)	[1]
<input type="checkbox"/>	<input type="checkbox"/>	3/15/2006 8:44 AM	Release	ROI to Anderson Pediatrics (summer w/father)	
<input type="checkbox"/>	<input type="checkbox"/>	3/10/2005 10:22 PM	Ext Oth	Urgent Care Record - weekend ankle injury	[1]
<input type="checkbox"/>	<input type="checkbox"/>	7/12/2003 10:20 PM	Consent	Immunizations - 5 yrs	[1]

0 documents selected Documents 1-10 of 27 [First](#) | [Prev](#) | [Next](#) | [Last](#)

Hi Janet,

I have contacted Dr. Johnson about your ongoing ankle pain, and he has agreed to see you. Please call him to schedule an appointment.

I have attached your chart summary and your ankle x-ray. This is the same information I already sent to Dr. Johnson.

Best regards,

*Centricity Practice – Clinical Messenger features shown

(9)(i) **Objective:** Capability to submit electronic data to immunization registries and actual submission where required and accepted.

(ii) **Measure:** Performed at least one test of certified EHR technology's capability to submit electronic data to immunization registries.

	Registry	Registry Type	Registry ID	Last Transaction	Opt Out	Opt Out Date
✓	Print Reports	IMMUNIZATION			<input type="checkbox"/>	
✓	WIR	IMMUNIZATION			<input type="checkbox"/>	

Quick Entry Mode (this session only)

(10)(i) Objective. Capability to provide electronic syndromic surveillance data to public health agencies and actual transmission according to applicable law and practice.

(ii) Measure. Performed at least one test of certified EHR technology's capacity to provide electronic syndromic surveillance data to public health agencies (unless none of the public health agencies to which the EP, eligible hospital or CAH submits such information have the capacity to receive the information electronically).

Change Problems Constraint Options - Essex Archives

Include data from documents with locations of care

- MHS
- EAST
- E CARDIO
- E IM
- E OB GYN

Include all responsible providers

Include selected responsible provider(s)

Include selected problem(s) of type

- Diagnosis of
- Minor Diagnosis of
- Hospitalized for
- History of
- Status Post
- Rule out
- Question of
- Symptom of
- Risk of

Include problems that match

- All problems
- Coded problems only
- Uncoded problems only
- Problem table SQL filter

Include inactive patients Export only active problems

Include obsolete patients Include signed problems from unsigned documents

Include deceased patients

Filter Problem Export

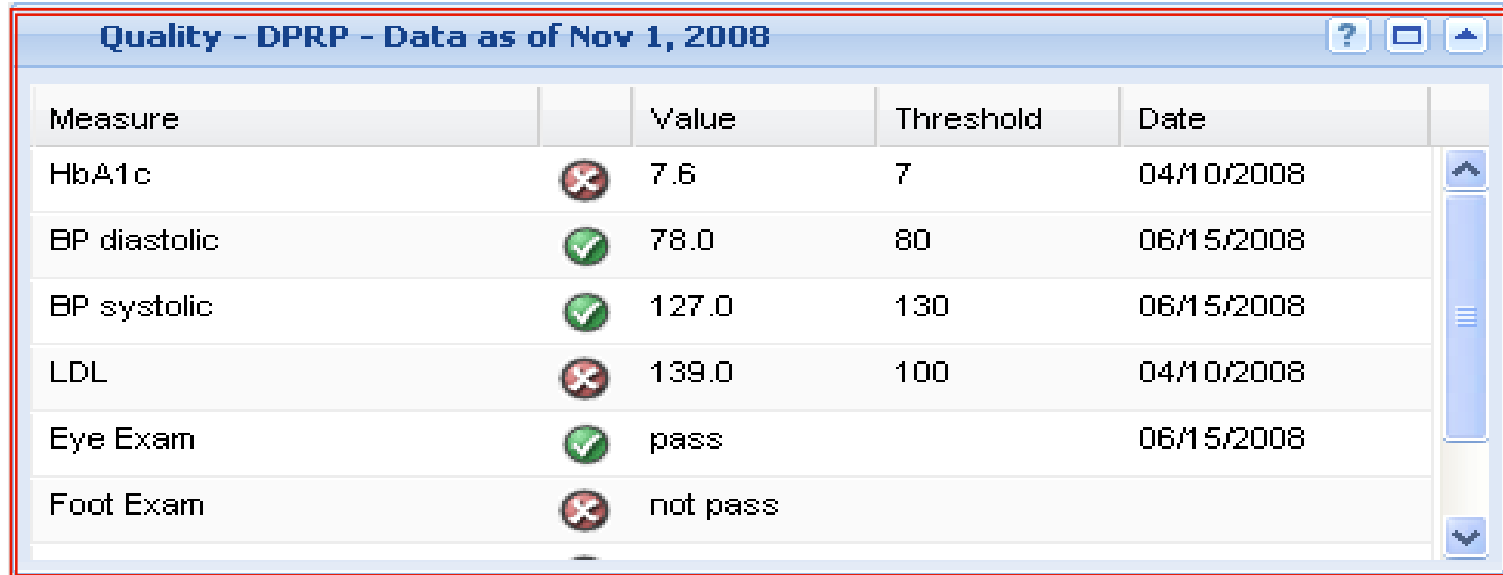
To filter the problem table, enter the SQL "where" phrase. Use _ to match one character or % to match zero or more characters.







Example: Code like 'ICD-487.%' or Description like 'INFLUENZA%'

Description like 'INFLUENZA%'

ACHIEVING MEANINGFUL USE WITH CENTRICITY® EMR

Sample of enhanced reporting capabilities that will be available to providers at the point of care.



Measure		Value	Threshold	Date
HbA1c		7.6	7	04/10/2008
BP diastolic		78.0	80	06/15/2008
BP systolic		127.0	130	06/15/2008
LDL		139.0	100	04/10/2008
Eye Exam		pass		06/15/2008
Foot Exam		not pass		

ACHIEVING MEANINGFUL USE WITH CENTRICITY® EMR

The following outlines the phases and milestones for full customer engagement with all services teams for a **“Meaningful Use Implementation”**.

GROWTH

GO-LIVE

INITIATE

EXECUTE

PLAN

PREPARE

DESIGN

ACHIEVING MEANINGFUL USE WITH CENTRICITY® EMR

INITIATE

- Determine / confirm overall goals for the project.
- Outline a phased approach for integrating new data collection as part of EMR documentation
- Ensure physician involvement.
- Evaluate current state of clinical data collection and quality reporting.
- Deliver and review “Meaningful Use Scorecard” and create action plan.

ACHIEVING MEANINGFUL USE WITH CENTRICITY® EMR

PLAN

- Plan for a phased approach.
 - Stage 1: 2011 – 2012
 - Criteria for Stages 2 & 3 will be further refined by 2013.
- Start early to achieve maximum clinical and financial benefits.
- Leverage existing systems, workflows and reports.

ACHIEVING MEANINGFUL USE WITH CENTRICITY® EMR

DESIGN

- Determine new hardware required.
- Design integration implementations and create test plans.
- Determine adjustments required in EMR setup.
- Build and/or edit content to capture additional data as needed.
- Document new workflows as needed.

ACHIEVING MEANINGFUL USE WITH CENTRICITY® EMR

PREPARE

- Install new hardware as needed.
- Upgrade to latest version of EMR as needed.
- Install / test third-party applications, such as patient portal, as needed.
- Install and test new interpretability functions, such as HIE and CCD, as needed.
- Finalize and test new content.
- Prepare Super Users for new features and functionality

ACHIEVING MEANINGFUL USE WITH CENTRICITY® EMR

EXECUTE

- Ensure that current workflows are being followed and that current forms are completed appropriately.
- Confirm Go Live Readiness on all new features and applications for phase one.
- Train staff on new or updated workflows and new functionality.

ACHIEVING MEANINGFUL USE WITH CENTRICITY® EMR

GO-LIVE

- Go Live with additional components or applications, such as eRX and patient portal, as needed.
- Go live with new interfaces and interoperability options, such as HIE or CCD, as needed.
- End users Go-live with enhanced workflows and reporting.
- Create schedule for regular monitoring.

ACHIEVING MEANINGFUL USE WITH CENTRICITY® EMR

GROWTH

- Perform regular monitoring of meaningful use criteria.
- Review Stage 2 and 3 criteria as they are refined and published.
- Continue to incorporate advanced clinical processes as needed to improve patient care outcomes through 2015.

ACHIEVING MEANINGFUL USE WITH CENTRICITY® EMR

Meaningful Use Implementation

GROWTH

GO-LIVE

INITIATE

EXECUTE

PLAN

PREPARE

DESIGN

Thank you!

