EHR Incentive Programs in 2015: Alternate Exclusions & Specifications

CMS recently published a final rule that specifies criteria that eligible professionals (EPs), eligible hospitals, and critical access hospitals (CAHs) must meet in order to participate in the Medicare and Medicaid Electronic Health Record (EHR) Incentive Programs. The final rule's provisions encompass 2015 through 2017 as well as Stage 3 in 2018 and beyond.

The final rule includes alternate exclusions and specifications for certain objectives and measures where there is not a Stage 1 measure equivalent to the Modified Stage 2 (2015 through 2017) measure or where a menu measure is now a requirement.

Overview of Alternate Exclusions and Specifications

To assist providers who may have already started working on meaningful use in 2015, there are alternate exclusions and specifications within individual objectives for providers. These include:

- Allowing providers who were previously scheduled to be in a Stage 1 EHR reporting period for 2015 to use a lower threshold for certain measures.
- Allowing providers to exclude for Stage 2 measures in 2015 for which there is no Stage 1 equivalent.
- Allowing providers to claim an alternate exclusion where previously a menu measure is now a requirement.

Alternate exclusions are based on the provider's scheduled stage and are available only for 2015 (and in 2016 for some limited cases). They are intended to accommodate changes required for the transition to the Modified Stage 2 objectives and measures.

There are also exclusions for some measures that are *not* based on the provider's stage, but on other factors as there have been in both Stage 1 and Stage 2 of the program. These exclusions—which are described for each measure as applicable—are specific to the measure and not dependent on the Stage or year of participation.

How to Attest Using Alternate Exclusions and Specifications

Providers scheduled to be in Stage 1 may opt to use the alternate exclusions and specifications, but they **are not required** to use them. The Medicare and Medicaid EHR Incentive Programs registration and attestation system will automatically identify those providers who are eligible for alternate exclusions and specifications. Upon attestation, these providers will be offered the option to attest to the Modified Stage 2 objective and measure, *and* the option to attest to the alternate specification or claim the alternate exclusion, if available. The provider may independently select the option available to them for each measure for which an alternate specification or exclusion may apply.

2015 Alternate Exclusions and Specifications

There are **9 objectives for EPs** that include alternate exclusions and specifications for providers in 2015.

Alternate Exclusions and Specifications	
Eligible Professionals (EPs)	
Objective 2: Clinical Decision Support	*For an EHR reporting period in 2015 only, an EP who is scheduled to participate in Stage 1 in 2015 may satisfy the following in place of measure 1:* **Objective:** Implement one clinical decision support rule relevant to specialty or high clinical priority along with the ability to track compliance with that rule. **Measure:** Implement one clinical decision support rule.
Objective 3: Computerized Provider Order Entry	**Alternate Measure 1**: For Stage 1 providers in 2015, more than 30 percent of all unique patients with at least one medication in their medication list seen by the EP during the EHR reporting period have at least one medication order entered using CPOE; or more than 30 percent of medication orders created by the EP during the EHR reporting period are recorded using computerized provider order entry. **Alternate Exclusion for Measure 2**: Providers scheduled to be in Stage 1 in 2015 may claim an exclusion for measure 2 (laboratory orders) of the Stage 2 CPOE objective for an EHR reporting period in 2015. **Alternate Exclusion for Measure 3**: Providers scheduled to be in Stage 1 in 2015 may claim an exclusion for measure 3 (radiology orders) of the Stage 2 CPOE objective for an EHR reporting period in 2015.
Objective 4: Electronic prescribing (eRx)	**Alternate EP Measure**: For Stage 1 providers in 2015, more than 40 percent of all permissible prescriptions written by the EP are transmitted electronically using CEHRT.
Objective 5: Health Information Exchange	**Alternate Exclusion**: Provider may claim an exclusion for the Stage 2 measure that requires the electronic transmission of a summary of care document if for an EHR reporting period in 2015, they were scheduled to demonstrate Stage 1, which does not have an equivalent measure. *click here for FAQ 12817 concerning this objective*
Objective 6: Patient Specific Education	**Alternate Exclusion:** Provider may claim an exclusion for the measure of the Stage 2 Patient Specific Education objective if for an EHR reporting period in 2015 they were scheduled to demonstrate Stage 1 but did not intend to select the Stage 1 Patient Specific Education menu objective. *click here for FAQ 12821 related to this objective* *click here for FAQ 12825 related to this objective*

Objective 7: Medication Reconciliation	**Alternate Exclusion**: Provider may claim an exclusion for the measure of the Stage 2 Medication Reconciliation objective if for an EHR reporting period in 2015 they were scheduled to demonstrate Stage 1 but did not select the Stage 1 Medication Reconciliation menu objective.
Objective 8: Patient Electronic Access	**Alternate Exclusion:** Providers may claim an exclusion for the second measure if for an EHR reporting period in 2015 they were scheduled to demonstrate Stage 1, which does not have an equivalent measure. *click here for FAQ 12821 related to this objective* *click here for FAQ 12825 related to this objective*
Objective 9: Secure Messaging	**Alternate Exclusion**: An EP may claim an exclusion for the measure if for an EHR reporting period in 2015 they were scheduled to demonstrate Stage 1, which does not have an equivalent measure. *click here for FAQ 12825 related to this objective*
Objective 10: Public Health Reporting	***Click here for FAQ 13409 related to this objective*** **Alternate Exclusions:** *EPs scheduled to be in Stage 1*: Must attest to at least 1 measure from the Public Health Reporting Objective Measures 1-3. • May claim an Alternate Exclusion for Measure 1, Measure 2, or Measure 3. • An Alternate Exclusion may only be claimed for up to two measures, then the provider must either attest to or meet the exclusion requirements for the remaining measure described in 495.22 (e)(10)(i)(C). *EPs scheduled to be in Stage 2*: Must attest to at least 2 measures from the Public Health Reporting Objective Measures 1-3. • May claim an alternate exclusion for Measure 2 or Measure 3 (Syndromic Surveillance Measure or Specialized Registry Reporting Measure) or both. FAQ 13409 **Question:** For 2015, how should a provider report on the public health reporting objective if they had planned to be in Stage 1 meaningful use which required sending a test message and continued submission if successful, but did not require registration of intent? **Answer:** We did not intend to require providers to engage in new activities during 2015, which may not be feasible after the publication of the final rule in order to successfully demonstrate meaningful use in 2015. Since providers in Stage 1 in 2015 were not previously required to submit a registration of intent to submit data to meet Objective 10 measures, providers may meet the measures by having sent a test message or by being in production. Providers who have sent a test message can be considered to have met Option 2 of Active Engagement - Test and Validation; providers who are in production can be considered to have met Option 3 of Active Engagement - Production. Created 11/9/2015 (FAQ13409)