



NEWS FROM CMS

The information below is from a CMS EHR-related newsletter published August 27th. Any questions you may have should be directed to the CMS Help Desk at 1-888-734-6433.

Now Available: Stage 2 Overview Tipsheet

On August 23, 2012, the Centers for Medicare & Medicaid Services (CMS) published the final rule for Stage 2 of the Medicare and Medicaid Electronic Health Record (EHR) Incentive Programs. The rule provides new criteria that eligible professionals (EPs), eligible hospitals, and critical access hospitals (CAHs) must meet to successfully participate in the EHR Incentive Programs.

CMS developed [a Stage 2 Overview Tipsheet](#), a resource that provides a summary of the Stage 2 final rule and highlights key changes to the EHR Incentive Programs, including:

- **Stage 2 Timing** – The earliest eligible hospitals and CAHs will demonstrate meaningful use of Stage 2 criteria will be fiscal year 2014, or calendar year 2014 for EPs. Providers who were early demonstrators of meaningful use in 2011 will meet three consecutive years of meaningful use under the Stage 1 criteria before advancing to the Stage 2 criteria in 2014.
- **Stage 2 Core and Menu Objectives** – Stage 2 retains the Stage 1 core and menu structure for meaningful use objectives. Although some Stage 1 objectives were either combined or eliminated, most of the Stage 1 objectives are now core objectives under the Stage 2 criteria. To demonstrate meaningful use under Stage 2 criteria:
 - EPs must meet 20 measures (17 core and 3 of 6 menu).
 - Eligible hospitals must meet 19 (16 core and 3 of 6 menu).

The end of the tipsheet contains a complete list of the Stage 2 core and menu objectives for both EPs and eligible hospitals and CAHs.

- **Reporting Periods in 2014** – All providers, regardless of their stage of meaningful use, are only required to demonstrate meaningful use for a three-month EHR reporting period. CMS is permitting this one-time, three-month reporting period in 2014 only so that all providers who

must upgrade to 2014 certified EHR technology will have adequate time to implement their new Certified EHR systems.

- **Clinical Quality Measures in 2014** – Beginning in 2014, all providers, regardless of their stage of meaningful use, will report on CQMs in the same way.
 - All Medicare EPs and eligible hospitals beyond their first year of demonstrating meaningful use must electronically report their CQM data to CMS.
 - All Medicaid providers that are eligible only for the Medicaid EHR Incentive Program will electronically report their CQM data to their state.
 - Additionally, all providers will complete this number of CQMs in 2014:
 - EPs must report on 9 out of 64 CQMs
 - Eligible hospitals and CAHs must report on 16 out of 29 CQMs.

The tipsheet is available on the [CMS website](#) and should be reviewed in its entirety to effectively prepare for Stage 2 requirements.

Want more information about the EHR Incentive Programs?

Make sure to visit the [EHR Incentive Programs website](#) for the latest news and updates on the EHR Incentive Programs.

The TennCare Medicaid EHR Incentive Unit is also reviewing the Stage 2 Final Rule. As more information becomes available, we will share that with you.

Contact Information

As always, anytime you have a question or need assistance, please feel free to contact us. We will get back to you as quickly as possible. Please be sure to include the provider's name and NPI when contacting us.

For questions relating to Meaningful Use (MU), send an email to EHRMeaningfuluse.TennCare@tn.gov

For all other questions, send an email to TennCare.EHRIncentive@tn.gov

To contact CMS, the CMS Help Desk can be reached at 1-888-734-6433.