

In an effort to support Dentists who are transitioning from adopting a certified EHR technology to meaningfully using the technology, we have compiled the table below. The table includes the Stage 1 core and menu meaningful use (MU) measures for the Electronic Health Record (EHR) incentive program as well as feasibility for dental practices to meet the measures based on feedback gathered from the dental community (Agency and Community Dentists). The table also provides suggestions for how Dentists could become meaningful users. The Medical Assistance Health IT initiative encourages Dentists to review this document in order to determine what support is needed to become meaningful users of EHRs. By meeting the meaningful use requirements Dentists will be able to receive additional incentive payments as well as be positioned to integrate electronically into the larger healthcare community. Additional Information about the Core and Menu MU Measures is available at: <http://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/Downloads/EP-MU-TOC.pdf>

## CORE

### The following Core Measures could be met by Dentists with potentially limited impact on their practice

Measure	Feasibility for Dental Practice	Ideas to help meet Requirements
<p><b>Demographics</b> - Record, as structured data, all of the following demographics: (A) Preferred language, (B) Gender, (C) Race, (D) Ethnicity, (E) Date of birth for more than 50% of all unique patients seen by the EP.</p>	Measure achievable	Make sure your practice has a process to capture this data for all patients. An effective way to capture this information is through patient registration process.
<p><b>Smoking Status</b> - For more than 50% of all unique patients 13 years old or older seen by the EP, record as structured data smoking status. <b>Exclusion:</b> Any EP who sees no patients 13 years or older.</p>	Measure achievable	Review the patient's Health Summary or the EHR at each dental visit to verify that smoking status has been recorded. If not, record status in an appropriate section of the EHR such as health factors if applicable to your system.
<p><b>Electronic Copy of Health Information</b> - For more than 50% of all patients who request it, provide patients with an electronic copy of their health information (including diagnostic test results, problem list, medication lists, and medication allergies) within 3 business days. <b>Exclusion:</b> Any EP that has no requests from patients or their agents for an electronic copy of patient health information during the EHR reporting period.</p>	Measure achievable	Ensure that your practice has a process to capture requests for electronic copies of health information and to fulfill these requests.

**The following Core Measures could be met by Dentists with potentially limited impact on their practice**

Measure	Feasibility for Dental Practice	Ideas to help meet Requirements
<p><b>Clinical Summaries</b> - Provide clinical summaries to patients for more than 50% of all office visits within 3 business days. <b>Exclusion:</b> Any EP who has no office visits during the EHR reporting period.</p>	<p>Measure achievable</p>	<p>Ensure that your practice has a process to address requests for clinical summaries as well as a way to track requests. Could provide through patient portal but need to assess ability for EHR to integrate effectively with patient portal.</p>
<p><b>Protect Electronic Health Information</b> - Protect electronic health information created or maintained by the certified EHR technology through the implementation of appropriate technical capabilities. Conduct or review a security risk analysis per 45 CFR 164.308 (a)(1) and implement security updates as necessary and correct identified security deficiencies as part of its risk management process.</p>	<p>Measure achievable</p>	<p>This analysis needs to be completed and updated when necessary.</p>

**Dentists may potentially be eligible to claim an exclusion for the following Core Measures**

Measure	Feasibility for Dental Practice	Ideas to help meet Requirements
<p><b>CPOE</b> - Use computerized provider order entry (CPOE) for medication orders directly entered by any licensed healthcare professional who can enter orders into the medical record per state, local and professional guidelines. This is to be done for more than 30% of unique patients with at least one medication in their medication list seen by the EP or admitted to the EP or CAH. <b>Exclusion:</b> Any EP who writes fewer than 100 prescriptions during the EHR reporting period.</p>	<p>Measure is achievable although CPOE functionality can vary by system so dentists must verify how their system will integrate with practice workflow. Dentists who do not write 100 prescriptions during the reporting period would qualify for the exclusion.</p>	<p>It is possible to meet this requirement although EHR systems are different and each system may have different options on how to meet this measure. Some systems require the user to enter all drugs the patient is currently taking vs. having them entered by the physician. Also, this data may not be transferred from the software of your EHR, and therefore require manual data entry which is vulnerable to error.</p>

**Dentists may potentially be eligible to claim an exclusion for the following Core Measures**

<b>Measure</b>	<b>Feasibility for Dental Practice</b>	<b>Ideas to help meet Requirements</b>
<p><b>E-Prescribing</b> - More than 40% of all permissible prescriptions written by the EP are generated and transmitted electronically (eRx) using certified EHR technology. <b>Exclusion:</b> Any EP who writes fewer than 100 prescriptions during the EHR reporting period.</p>	<p>Measure is achievable. Dentists who do not write 100 prescriptions would qualify for exclusion.</p>	<p>Order/transmit all prescriptions electronically through EHR in place of a written prescription, whether the pharmacy is on-site or off-site.</p>

**For the following Core Measures, adjusted workflow may be required for dentist to meet the measure.**

<b>Measure</b>	<b>Feasibility for Dental Practice</b>	<b>Ideas to help meet Requirements</b>
<p><b>Vital Signs</b> - For more than 50% of all unique patients age 2 and over seen by the EP, record as structured data and chart changes in the following vital signs: (A) Height, (B) Weight, (C) Blood pressure, (D) Calculate and display body mass index (BMI), (E) Plot and display growth charts for children 2-20 years, including BMI <b>Exclusion:</b> 1. Sees no patients 3 years or older is excluded from recording blood pressure; 2. Believes that all three vital signs of height, weight, and blood pressure have no relevance to their scope of practice is excluded from recording them; 3. Believes that height and weight are relevant to their scope of practice, but blood pressure is not, is excluded from recording blood pressure; or 4. Believes that blood pressure is relevant to their scope of practice, but height and weight are not, is excluded from recording height and weight.</p>	<p>BMI and growth chart plotting are somewhat outside of dental practice scope. Likelihood of exclusion qualification for BMI related vital signs but would still need to record blood pressure. Recommend reviewing all exclusion requirements for this measure.</p>	<p>Review the patient's EHR record at each dental visit to verify that height, weight and blood pressure have been recorded. If not current, take these measures and record in the EHR.</p>
<p><b>Clinical Quality Measures (CQMs)</b> - Successfully report ambulatory clinical quality measures to CMS in the manner specified by CMS.</p>	<p>Certain CQMs could be relevant to dental practice and would potentially be reportable from EHR.</p>	<p>Providers must meet the minimum requirements for the Clinical Quality Measures. Zeroes are acceptable if that is what is reported from EHR.</p>

**The following Core Measures seem to impact common dental practice workflow**

<b>Measure</b>	<b>Feasibility for Dental Practice</b>	<b>Ideas to help meet Requirements</b>
<p><b>Drug Interaction Checks</b> - Implement drug-drug and drug-allergy interaction checks for the entire EHR reporting period.</p>	<p>Measure is achievable although functionality can vary by system so dentists must verify how their system will integrate with practice workflow.</p>	<p>Current medications may need to be hand-entered at the dental appointment if not already completed. It is another step in the workflow that should be considered. Recommend speaking with your EHR vendor to discuss how this functionality is enabled.</p>
<p><b>Problems List</b> - Maintain an up-to-date problem list of current and active diagnoses for more than 80% of all unique patients seen by the EP. At least one entry or an indication that no problems are known for the patient must be recorded as structured data.</p>	<p>Measure is achievable by including dental problems. Dentists should also explore how to enter unknown problems into the EHR as structured data.</p>	<p>Review and update the dental problem list prior to treatment. If no known dental problems, then document that in the EHR.</p>
<p><b>Active Medication List</b> - More than 80% of all unique patients seen by the EP have at least one entry (or an indication that the patient is not currently prescribed any medication) recorded as structured data.</p>	<p>Measure is achievable as dentists should be apprised of any medication changes that are pertinent to the patient's health history.</p>	<p>Review and update active medication list prior to treatment. If no known active medications, then document that in the EHR.</p>
<p><b>Active Medication Allergy List</b> - More than 80% of all unique patients seen by the EP have at least one entry (or an indication that the patient has no known medication allergies) recorded as structured data.</p>	<p>Measure is achievable as dentists should be apprised of any allergies that are pertinent to the patient's health history.</p>	<p>Review and update medication allergy list prior to treatment. If no known medication allergies, then document that in the EHR.</p>
<p><b>Clinical Decision Support Rule</b> - Implement one clinical decision support rule relevant to specialty or high clinical priority along with the ability to track compliance with that rule.</p>	<p>CMS does not dictate clinical decision support rules so dentists could define for their practice but this may require change to workflow and must conduct a thorough assessment of EHR's capability.</p>	<p>Consult with EHR vendor about how they can support your practices needs to implement relevant Clinical Decision Support Rules.</p>

## MENU

**The following Menu Measures could be met by Dentists with potentially limited impact on their practice or Dentist could qualify for exclusion.**

<u>Measure</u>	Feasibility for Dental Practice	Ideas to help meet Requirements
<p><b>Patient Reminders</b> - Send patient reminders during reporting period per patient presence for preventive/follow-up care to more than 20% of all unique patients 65 years or older or 5 years or younger. <b>Exclusion:</b> An EP who has no patients 65 years old or older or 5 years old or younger with records maintained using certified EHR technology.</p>	Measure achievable	Reminders are sent per patient preference so gather that information and determine effective way to send reminder.
<p><b>Patient Electronic Access</b> - Provide at least 10% of all unique patients seen by the EP timely electronic access to their health information (including lab results, problem list, medication lists and allergies) within 4 business days of the information being available to the EP subject to the EP's discretion to withhold certain information. <b>Exclusion:</b> Any EP that neither orders nor creates lab tests or information that would be contained in the problem list, medication list, medication allergy list (or other information as listed at 45 CFR 170.304(g)) during the EHR reporting period.</p>	Measure achievable	Assess EHR system ability to support this measure. Especially important to understand if EHR system has patient portal functionality and can integrate with other patient portal and/or personal health record technologies.
<p><b>Patient-Specific Education Resources</b> - More that 10% of all unique patients seen by the EP during the EHR reporting period are provided patient-specific education resources. The EHR technology is used to identify the patient-specific education resources.</p>	Measure achievable	Your certified EHR system should be able to identify patient specific education resources that can be made available to your patients. Make sure you have worked with EHR vendor to understand what materials are available. Develop effective ways of tracking distribution of educational materials through EHR.

**Dentists may potentially be eligible to claim an exclusion for the following Menu Measures**

<b><u>Measure</u></b>	<b>Feasibility for Dental Practice</b>	<b>Ideas to help meet Requirements</b>
<p><b>Drug Formulary Checks</b> - The EP has enabled the functionality for drug formulary checks and has access to at least one internal or external drug formulary for the entire EHR reporting period. <b>Exclusion:</b> Any EP who writes fewer than 100 prescriptions during the EHR reporting period.</p>	<p>Measure is achievable. Dentists who write fewer than 100 prescriptions during the EHR reporting period would qualify for an exclusion.</p>	<p>Work with EHR vendor to understand how this functionality is implemented and determine if formularies are relevant to your patient needs.</p>
<p><b>Clinical Lab Test Results</b> - More than 40% of all clinical lab tests results ordered by the EP during the EHR reporting period whose results are in either a positive/ negative or numerical format and are incorporated into the certified EHR technology as structured data. <b>Exclusion:</b> An EP who orders no lab tests whose results are either in a positive/negative or numeric format during the EHR reporting period.</p>	<p>Measure is achievable. Dentists who order no lab tests during the EHR reporting period would qualify for an exclusion.</p>	<p>Work with EHR vendor to understand how this functionality is implemented. Evaluate if this measure would be of benefit to practice to effectively integrate into workflow.</p>
<p><b>Immunization Registries Data Submission</b> - Performed at least one test of certified EHR technology's capacity to submit electronic data to immunization registries and follow up submission if the test is successful, except where prohibited. <b>Exclusion:</b> An EP who administers no immunizations during the EHR reporting period or where no immunization registry has the capacity to receive the information.</p>	<p>Immunization reporting would probably be outside of dental practice scope. Likelihood of exclusion qualification.</p>	<p>Immunization administration is generally not within the scope of dental practice and therefore acceptable to claim an exclusion for this measure.</p>

**Dentists may potentially be eligible to claim an exclusion for the following Menu Measures**

<b><u>Measure</u></b>	<b>Feasibility for Dental Practice</b>	<b>Ideas to help meet Requirements</b>
<p><b>Syndromic Surveillance Data Submission</b>                      - Performed at least one test of the certified EHR technology's capacity to provide electronic syndromic surveillance data to public health agencies and follow-up submission (according to applicable law and practice) if the test is successful (unless none of the public health agencies to which an EP submits such information have the capacity to receive the information electronically).  <b>Exclusion:</b> An EP who does not collect any reportable syndromic information on their patients during the EHR reporting period or does not submit such information to any public health agency that has the capacity to receive the information electronically.</p>	<p>Syndromic Surveillance reporting is probably outside of dental practice scope. Likelihood of exclusion qualification.</p>	<p>Collection of reportable syndromic information is generally not within the scope of dental practice and therefore acceptable to claim an exclusion for this measure.</p>

**For the following Menu Measure, adjusted workflow may be required for dentist to meet the measure.**

<b><u>Measure</u></b>	<b>Feasibility for Dental Practice</b>	<b>Ideas to help meet Requirements</b>
<p><b>Patient Lists</b> - Generate at least on report listing patients of the eligible provider with a specific condition to use for quality improvement, reduction of disparities, research or outreach.</p>	<p>Verify with EHR vendor how system can include oral health conditions.</p>	<p>Generate a list of patients with a medical condition relevant to dental service delivery.</p>

**The following Menu Measures seem to impact common dental practice workflow**

<b><u>Measure</u></b>	<b>Feasibility for Dental Practice</b>	<b>Ideas to help meet Requirements</b>
<p><b>Medication Reconciliation</b> - The EP performs medication reconciliation for more than 50% of transitions of care in which the patient is transitioned into the care of the EP.  <b>Exclusion:</b> An EP who was not the recipient of any transitions of care during the EHR reporting period.</p>	<p>Transition to a dentist from another care setting would be a very rare event in the dental setting. Qualification for exclusion is likely.</p>	<p>Although it's likely exclusion can be claimed, dentists can perform a medication reconciliation for transitions of care and document medication reconciliation in the EHR system.</p>

**The following Menu Measures seem to impact common dental practice workflow**

<b><u>Measure</u></b>	<b>Feasibility for Dental Practice</b>	<b>Ideas to help meet Requirements</b>
<p><b>Transition of Care Summary</b> - The EP who transitions or refers their patient to another setting of care or provider of care provides a summary of care record for more than 50% of transitions of care and referrals. <b><u>Exclusion:</u></b> An EP who neither transfers a patient to another setting nor refers a patient to another provider during the EHR reporting period.</p>	<p>Transition from a dentist to another care setting would be a very rare event in the dental setting. However, transfer of records to another dentist or referral to a dental specialist is not a rare occurrence, so compliance in those instances should not be an issue.</p>	<p>Evaluate how to provide the summary of care when referrals are made. Must consider if sending directly to the other provider and how patient would receive.</p>