Required Documentation
for Eligible Professionals
Program Year 2017

All Program Year 2017 applications will be submitted via the State Level Registry. The link to the website is: https://alslr.thinkhts.com/.

Each category listed below details the required documentation for each provider for his or her 2017 application.

Patient Volume
The following documents are required to establish the 30% Medicaid patient volume requirement or 20% Medicaid patient volume for pediatricians.
- Practice Management Report – a system-generated report or patient volume explanation of a manual count must be submitted to validate the number of Medicaid encounters and Total encounters being submitted.
- Eligible Professional "EP" Workbook - the Excel spreadsheet; the same version that was utilized from 2014-2016 will be used again for Program Year 2017. This can be found on the Meaningful Use website.

Certified Electronic Health Record Technology (CEHRT)
The following document is required to validate that the provider has a certified EHR system in place. Beginning in 2017, all providers will be Meaningful Use providers, which requires the EHR to be in use. In previous years, the provider could attest to adopting, implementing, or upgrading to an EHR.
- Vendor Letter – a letter from the vendor that confirms the vendor, product, and version of the certified system.
    - In addition, it would be useful if the letter had either the CMS Certification ID or the ONC CHPL Product ID. This allows us to process the application in a more timely manner.

Meaningful Use
The following documentation is required to validate the Meaningful Use portion of the application.

- <u>Meaningful Use Report</u> – This report should include the reporting period and provider's name to identify who the documentation belongs to as well as all numerators and denominators used to meet the Meaningful Use Objectives.
- <u>Clinical Quality Measure (CQM) Report</u> – This report should include the reporting period and provider's name as well as all numerators and denominators being used.
  - Please note, if the provider reports 0/0 for the numerator and denominator, then the report needs to show 0/0.
  - Documentation is required to validate ALL numerators and denominators.
- <u>Screenshots</u> – utilized to validate the functionality of certain system components. The following screenshots are required and most show an actual example of the functionality. For instance, a screenshot showing a drug/drug interaction is required instead of a screenshot showing a check box where the functionality is turned on.
  - Drug/Drug and Drug/Allergy (Modified Stage 2/Objective 2; Stage 3/Objective 3)
  - Drug Formulary (Modified Stage 2/Objective 4; Stage 3/Objective 2)
- <u>Security Risk Analysis Compliance Form</u> – this form is a State created form and can be found on our website. Each provider must complete this form as there are no exclusions available for this Meaningful Use Objective.
  - This form has been updated for Program Year 2017. The form utilized for Program Year 2016 is no longer valid.
- <u>Public Health Measures</u> – documentation is required for each public health measure that you report on regardless if you report to a registry or if you are taking an exclusion.
  - <u>Alabama Department of Public Health Registries</u>
    - Immunization Registry – the ADPH Status Letter will be required.
    - Cancer Registry – the ADPH Status Letter will be required.
    - Each ADPH registry has a specific letter designated for Program Year 2017.
    - The letter used for a Program Year 2016 application will not be valid for Program Year 2017.
  - <u>Syndromic Surveillance Registry</u>
    - This registry is only available to EPs practicing in an Emergency Room or Urgent Care facility. If you are not a provider that practices in one of these settings, then you should take the exclusion.
    - Additional documentation is not required if you do not practice in one of these two settings and take the exclusion.
    - If you are practice at a facility not mentioned above, you should not attest to this measure as ADPH is not accepting data from EPs in practices outside of ERs and Urgent Care clinics.
  - <u>Specialized Registries</u>
    - Any registry that you report on outside of ADPH will also require documentation. The letter will need to come from that specific registry.
      - The letter should validate the provider's active engagement status. Active engagement includes: registration, testing and validation, and production.

- Each provider must meet the Public Health Measure Objective by either meeting the measure requirements by reporting or excluding from the available measures or a combination of reporting and excluding.
- Exclusions
  - Any exclusion from a Public Health Measure will require documentation.
  - For instance, if the provider excludes from the Immunization Registry, then the provider would need to submit documentation stating he or she did not give immunizations either during the reporting period or the provider does not ever give immunizations.
  - Additional documentation regarding excluding from a Specialized Registry will be posted to the Meaningful Use website.