

MODIFIED STAGE 2

FINAL RULE

2017 Modified Stage 2 Program Requirements

- All providers are required to attest to a single set of objectives and measures.
- For eligible providers (EPs), there are 10 objectives, including one consolidated public health reporting objective. For eligible hospitals (EHs), there are 9 objectives.
View the 2017 Specification Sheets for [EPs](#) and [hospitals](#).
- In 2017, all providers must attest to objectives and measures using EHR technology certified to the 2014 Edition. If it is available, providers may also attest using EHR technology certified to the 2015 Edition, or a combination of the two.
- Please note there are no alternate exclusions or specifications available.

Specific Changes to Objectives and Measures

Objective 8, Measure 2, Patient Electronic Access (EPs): For an EHR reporting period in 2017, more than 5 percent of unique patients seen by the EP during the EHR reporting period (or his or her authorized representatives) view, download or transmit to a third party their health information during the EHR reporting period.

Objective 9, Secure Messaging (EPs): For an EHR reporting period in 2017, for more than 5 percent of unique patients seen by the EP during the EHR reporting period, a secure message was sent using the electronic messaging function of CEHRT to the patient (or the patient-authorized representative), or in response to a secure message sent by the patient (or the patient-authorized representative) during the EHR reporting period.

Objective 8, Measure 2, Patient Electronic Access (EHs): For an EHR reporting period in 2017, more than 5 percent of unique patients discharged from the inpatient or emergency department (POS 21 or 23) of an eligible hospital or CAH (or patient authorized representative) view, download or transmit to a third party their health information during the EHR reporting period.

EHR Reporting Period

- In Program Year 2017, all returning Meaningful Users will have a 90-day Meaningful Use reporting period in calendar year 2017. However, the eCQM reporting period will be for the full calendar year.
- In Program Year 2017, all newly attesting participants in the Medicaid EHR Incentive Program will have a 90-day Meaningful Use AND eCQM reporting period in calendar year 2017. The OPSS rule did not address Program Year 2017 CQM reporting period requirements.

Payment Adjustments

- EPs who first demonstrate meaningful use in 2017 must demonstrate meaningful use for a 90-day reporting period in 2017 to avoid payment adjustments in 2018. This reporting period must occur in the first 9 months of calendar year 2017, and EP must attest to meaningful use no later than October 1, 2017, in order to avoid the payment adjustments in calendar year 2018.