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# State Level Registry (SLR) Flexibility Rule User Guide

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For Providers

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Version Number	Date
1.0	03/26/2015

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## 2014 Flexibility Rule Information

***IMPORTANT NOTE:*** This user guide for the new Flexibility Rule functionality in the SLR will only cover **Step 3: AIU or Meaningful Use**. For information on the other SLR steps (Steps 1 through 5) and to get a thorough understanding of the attestation process and requirements, please refer to the [Provider Quick Start Guide](http://www.dhcs.ca.gov/provgovpart/Documents/OHIT/Provider_SLR_Quick_Start_Guide.pdf) ([http://www.dhcs.ca.gov/provgovpart/Documents/OHIT/Provider\\_SLR\\_Quick\\_Start\\_Guide.pdf](http://www.dhcs.ca.gov/provgovpart/Documents/OHIT/Provider_SLR_Quick_Start_Guide.pdf))

Additionally, you can also visit the Centers for Medicare and Medicaid Services (CMS) website for information on the Medicare and Medicaid EHR Incentive Programs: <http://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/index.html>

The State Level Registry (SLR) ([www.medi-cal.ehr.ca.gov](http://www.medi-cal.ehr.ca.gov)) is accepting Flexibility Rule attestations for the 2014 Program Year from April 1, 2015 through **May 31, 2015**. Providers can attest for Program Year 2015 starting on June 1, 2015.

On August 29, 2014 the Centers for Medicare and Medicaid Services (CMS) and the Office of the National Coordinator (ONC) released a [final rule](#) that grants flexibility to providers who were **unable to fully implement 2014 Edition Certified Electronic Health Record Technology (CEHRT)** for Program Year 2014 due to delays in 2014 CEHRT availability. Under the Flexibility Rule, in Program Year 2014 providers are able to use EHRs that have been certified under the 2011 Edition, a combination of the 2011 and 2014 Editions, or the 2014 Edition (note: In 2015, all providers will be required to report using 2014 CEHRT).

The Rule specifies that a provider's inability to *fully implement* a 2014 CEHRT must be based on one of the following allowable (vendor-related) reasons:

- Software development delays
- Missing or delayed software updates
- Being able to implement 2014 CEHRT for part of the reporting period, but not the full reporting period
- Unable to train staff, test the system updates, or put new workflows in place due to delay with installation of 2014 CEHRT
- Inability to meet the Stage 2 Summary of Care measures due to the recipient of their Summary of Care transmittal being impacted by 2014 CEHRT issues. The sending provider may experience significant difficulty meeting the 10% threshold for electronic transmissions, despite the transferring provider's ability to send the electronic document, if the intermediary or the recipient of the transition or referral is experiencing delays in the ability to fully implement 2014 CEHRT that prevent reception.

The Rule specifically states that the following are NOT acceptable reasons for failure to be able to *fully implement*:

- Financial issues
- Inability to meet one or more measures (except Stage 2 Summary of Care)
- Staff turnover and change
- Provider waited too long to engage a vendor
- Refusal to purchase the requisite software

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### Flex Rule Options

Providers who are unable to fully implement 2014 CEHRT based on one of the acceptable (vendor-related) reasons above are able to utilize the Flexibility Rule. Based on the Meaningful Use stage you are scheduled to report on and the CEHRT you report, here are the options available under the Flexibility Rule:

#### Providers attesting to AIU

**You must use 2014 CEHRT**

#### Providers scheduled to report to Stage 1 Meaningful Use

If you used:	These are your reporting options:
2011 CEHRT	2013 Stage 1 Objectives and CQMs
Combo 2011 & 2014 CEHRT	2013 Stage 1 Objectives and CQMs, or 2014 Stage 1 Objectives and CQMs
2014 CEHRT	2014 Stage 1 Objectives and CQMs

#### Providers scheduled to report to Stage 2 Meaningful Use

If you used:	These are your reporting options:
2011 CEHRT	2013 Stage 1 Objectives and CQMs
Combo 2011 & 2014 CEHRT	2013 Stage 1 Objectives and CQMs, or 2014 Stage 1 Objectives and CQMs, or 2014 Stage 2 Objectives and CQMs
2014 CEHRT	2014 Stage 1 Objectives and CQMs*, or 2014 Stage 2 Objectives and CQMs

\*Note, this scenario is only available if the provider was unable to meet the threshold for the Stage 2 Summary of Care objective because the recipients of the transmissions or referrals were impacted by issues related to 2014 EHR Technology availability delays and therefore could not implement the technology required to receive the summary of care documents.

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## Meaningful Use Requirements

The reporting requirements for the three available MU options are as follows:

2013 Stage 1 Objectives and CQMs	
MU Section	Requirement
Core Objectives	Complete all 13
Menu Objectives	Complete 5 of 10 measures. One selection must be a Public Health Measure. Exclusions count towards the required 5.
CQM Core	Complete all 3 (For any measure where the denominator is zero, a CQM Alternate Core Measure* must be completed)
CQM Alternate Core*	Complete one Alternate for each Core Measure with a denominator of zero
CQM Additional	Complete 3 of 38

2014 Stage 1 Objectives and CQMs	
MU Section	Requirement
Core Objectives	Complete all 13
Menu Objectives	Meet 5 of 9 objectives or meet or exclude all 9 objectives. One selection must be a Public Health Measure. Exclusions do not count towards the required 5 except as specified above.  Note: all provider should be able to pass the public health immunization objective by submitting a test even if they do not perform immunizations.
CQMs	Complete 9 of 64 from at least 3 of 6 domains.

2014 Stage 2 Objectives and CQMs	
MU Section	Requirement
Core Objectives	Complete all 17
Menu Objectives	Complete 3 of 6 measures. If the provider has an exclusion from 4 or more objectives they must meet all remaining measures.
CQMs	Complete 9 of 64 from at least 3 of 6 domains.

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### Step 3: AIU or Meaningful Use (Flex Rule Version)

Before you can access the Flexibility Rule page (Step 3: AIU or Meaningful Use), Steps 1 & 2 must be completed (please reference the [Provider Quick Start Guide](#) if you need assistance with creating an account, login, and/or completing Steps 1 & 2).

#### Attesting to Adopt, Implement, Upgrade (AIU)

Providers in their first year can choose to attest to Adopt, Implement, or Upgrade (AIU), or Meaningful Use (MU).

The screenshot shows the user interface for the State Level Registry for the Medi-Cal EHR Incentive Program. The page title is "3. AIU or Meaningful Use". There are two main buttons: "Attest to Adopt, Implement, Upgrade" and "Attest to Meaningful Use". Below each button is a brief instruction: "Select this option to attest to your Adoption, Implementation or Upgrade of certified EHR technology." and "Select this option to attest to demonstrating Meaningful Use of certified EHR technology." The page also includes a navigation menu with "About You", "Eligibility Information", "AIU or Meaningful Use", "Attestation", and "Submit". A "Program Year" dropdown is set to "1". The footer contains links for "Privacy", "Legal", "Accessibility", and "EULA", and a copyright notice for 2011 State of California.

Providers who opt to attest to AIU will be required to enter a 2014 CEHRT on the CMS EHR Certification ID page. Please refer to the [Provider Quick Start Guide](#) for more information on attesting to AIU, as this topic is not covered in this guide.

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## Attesting to Meaningful Use (MU)

### MU Reporting Period Page

#### 90-day Reporting Period

Providers who select to attest to meaningful use (MU) will be taken to the MU Reporting Period page where they will enter their 90-day MU Reporting Period. This reporting period must be within the 2014 calendar year. If the provider chooses, the end date can be edited to be greater (but not less than) than 90-days.

### 3. MU Reporting Period

#### 90-Day Reporting Period

Start Date   End Date  

Enter the start date of a 90-day meaningful use reporting period. The end date will be automatically calculated as 90 days from the start date. The reporting period must begin and end in the same calendar year as the Program Year for which you are applying for meaningful use incentive payments. For example, if you are applying for payments in Program Year 2015, the meaningful use reporting period must begin and end in 2015.

#### Location Information

In order for a provider to be considered a meaningful user, it is a requirement that at least 50% of their patient encounters during the MU Reporting Period have occurred at a practice location equipped with certified EHR technology.

**Providers are required to meet the following requirements during the 90-day reporting period in order to be eligible to attest to meaningful use.**

#### Location Information

At least 50% of your patient encounters during the MU reporting period must have occurred at a practice location with certified EHR technology. In addition to the practice locations you specified for program eligibility in Step 2 (which are displayed in the table below) you are required to add all locations at which you practiced during the MU reporting period. For each location you must specify the number of patient encounters that occurred during the MU reporting period.

#### Location(s)

Street Address	City	State	Zip	Certified EHR Technology	Number of Encounters During MU Reporting Period	Action
1234 Capitol Ave	Sacramento	CA	95814	<input checked="" type="checkbox"/>	250	<a href="#">Edit</a> <a href="#">Delete</a> <a href="#">X</a>
4567 1st Street	Sacramento	CA	95814	<input checked="" type="checkbox"/>	250	<a href="#">Edit</a> <a href="#">Delete</a> <a href="#">X</a>
100 200th Street	Roseville	CA	95678	<input type="checkbox"/>	500	<a href="#">Edit</a> <a href="#">Delete</a> <a href="#">X</a>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<a href="#">Add</a> <a href="#">+</a>

Percentage of total patient encounters at locations where certified EHR technology is available: **50.00 %**

The SLR will automatically populate the locations that the provider entered in Step 2: Eligibility, and the provider can add or delete locations as needed. Once the provider enters all practice locations, specifies the number of encounters that occurred at each of the locations during the MU Reporting Period, and indicates whether or not certified EHR technology was available at the

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site(s), the SLR will calculate the percentage of patient encounters where CEHRT was available. If the percentage is less than 50%, the provider will not be able to proceed to attestation.

Additionally, the user will be required to attest to the following statements before proceeding to the next MU page (EHR Certification):

I agree with the following statements:

- The information submitted for clinical quality measures (CQMs) was generated as an output from the provider's certified EHR technology.
- The information submitted is accurate to the knowledge and belief of the provider and the person submitting on behalf of the provider.
- The information submitted is accurate and complete for numerators, denominators, exclusions, and measures applicable to the provider.
- The information submitted for each measure includes information on all applicable patients.

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## EHR Certification Page

The provider will be prompted to enter their CMS EHR Certification number and will be given the appropriate MU reporting options (see page 4 for details) depending on 1) the CEHRT Edition entered, and 2) their scheduled stage of MU.

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Program Year 1

3. EHR Certification

Providers must provide information demonstrating that their EHR technology is certified through the Office of the National Coordinator (ONC). ONC provides a public web service that contains a list of all certified EHR technology, including the name of the vendor and the product's unique certification ID, and the meaningful use criteria for which the product was certified.

It is the provider's responsibility to ensure that the certified EHR technology code is listed on the ONC public web service before attesting to the state.

**Your EHR Certification Information**

Please enter your EHR Certification ID from the Office of the National Coordinator for Health Information Technology (ONC).

For Program Year 2014, CMS has issued a Flexibility Rule which allows providers and hospitals who were unable to fully implement 2014 technology to attest to MU using 2011 Certified EHR Technology (CEHRT), or a combination of 2011/2014 CEHRT.

In order to be eligible to utilize the Flexibility Rule options, providers and hospitals must provide supporting documentation and attest that they were unable to fully implement 2014 CEHRT due to one of the following reasons:

- Software development delays
- Certification Delays
- Implementation delays by the vendor
- Delays in the release of the product or update by the vendor
- Unable to train staff, test the system updates, or put new workflows in place due to delays with installation of 2014 CEHRT by the vendor
- Other vendor related delays

Those who do not meet the criteria above are required to have used 2014 CEHRT for Program Year 2014 and cannot use 2011 CEHRT, or 2011/2014 CEHRT.

Note that the delay must be attributable to issues related to software development, certification, implementation, testing, or release of the product by the EHR vendor. The Flexibility Rule does not allow for issues attributable to the provider or hospital. Examples that do not count as delays in availability:

- Financial Issues
- Difficulty Meeting Measures
- Staffing Issues
- Provider Delays

Please enter your CMS EHR Certification ID (also known as the CEHRT ID) below to proceed with your options for MU.

CMS EHR Certification ID =

- 1) Go to the ONC website: <http://onc-chat.force.com/attest>
- 2) Search for your product(s) and add each to the shopping cart by clicking "Add to Cart."
- 3) When you have added all product(s) to your shopping cart, click the "View Cart" link.
- 4) Click "Get CMS EHR Certification ID."
- 5) Your CMS EHR Certification ID will be displayed on the screen. This is the number you will need to enter above as part of your attestation.
- 6) Print the CMS EHR Certification ID page(s), because you will be required to upload the page(s) with your application.

NOTE: ONC does not allow you to mix inpatient products and Ambulatory products together to represent a complete EHR solution. Additionally, if the product(s) you add to your shopping cart do not represent a complete EHR solution capable of achieving meaningful use criteria, you will not be able to click "Get CMS EHR Certification ID" in step 4.

**Attachments**

**Supporting Documentation:**  
 You are required to attach a copy of the CMS EHR Certification ID page from the ONC website.\*

File(s) Attached: (1) [Upload Files](#)

Press Save and Continue to continue.

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Please note: If selecting a Combo 2011 & 2014 CEHRT the provider must add both a 2011 and 2014 complete CEHRT to their cart in the ONC website.

Upon clicking *Save and Continue*, you will be taken to the Survey Selection page.

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### CQM Reporting Period

**CQM Reporting Period**

Start Date   End Date  

The CQM Reporting Period must be at least 90 days unless a 2011/2014 hybrid CEHRT was used during the regular/non-CQM Reporting Period. In such cases, the CQM Reporting Period must be confined to the period of time in which the version of CEHRT (either 2011 or 2014) was used. In other words, the data for the CQM reporting period specified by the provider must be during a period where the provider exclusively used either a 2011 CEHRT or a 2014 CEHRT.

On the survey selection page, the provider will enter their CQM Reporting Period, which must be at least 90 days unless a Combo 2011 & 2014 CEHRT was used. In such cases, the CQM Reporting Period must be confined to the period of time in which the version of CEHRT (either 2011 or 2014) was used. In other words, the data for the CQM reporting period specified by the provider must be during a period (which may be less than 90-days) when the provider exclusively used either a 2011 CEHRT or a 2014 CEHRT.

### Flexibility Rule Selection

Depending on the 1) CEHRT ID entered on the EHR Certification Page, and 2) the provider's scheduled stage of MU, the SLR will display the relevant MU reporting options to the user for selection. Please refer to [Flex Rule Options](#) on page 4 for a complete list of scenarios/options available.

In the example below, the provider has entered a Combo 2011 & 2014 CEHRT ID, and is scheduled to do Stage 1 MU:

**You have entered a 2011/2014 (hybrid) EHR certification ID. Please select one of the following:**

\* I will attest to 2013 Stage 1 Meaningful Use

\* I will attest to 2014 Stage 1 Meaningful Use

Note: For providers who practice in multiple locations, if over 50% of the EP's patient encounters during the EHR reporting period occur at locations equipped with 2014 Edition CEHRT which has been fully implemented, the EP is not eligible to use the flexibility options in this final rule and must attest to 2014 objectives and measures, and must limit their denominators to only those patient encounters in locations equipped with fully implemented 2014 Edition CEHRT.

Once the provider selects their MU Year & Stage, they will be prompted to select one of the acceptable reasons for not being able to fully implement a 2014 CEHRT. This reason will appear on the provider's attestation. The provider may also enter additional comments and upload documentation to support their inability to fully implement 2014 CEHRT due to vendor issues. If the provider enters a 2014 CEHRT and chooses to do their scheduled stage of MU, they will not be prompted to enter in a Flexibility Rule reason as these providers are not utilizing the Flexibility Rule option (for example, a provider scheduled to do stage 2 MU enters a 2014 CEHRT and chooses to do 2014 Stage 2 Meaningful Use).

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You have entered a 2011/2014 (hybrid) EHR certification ID. Please select one of the following:

- \* I will attest to 2013 Stage 1 Meaningful Use
- \* I will attest to 2014 Stage 1 Meaningful Use

Note: For providers who practice in multiple locations, if over 50% of the EP's patient encounters during the EHR reporting period occur at locations equipped with 2014 Edition CEHRT which has been fully implemented, the EP is not eligible to use the flexibility options in this final rule and must attest to 2014 objectives and measures, and must limit their denominators to only those patient encounters in locations equipped with fully implemented 2014 Edition CEHRT.

In order to be eligible to utilize the Flexibility Rule options, providers and hospitals must provide supporting documentation and attest that they were unable to fully implement 2014 CEHRT due to one of the following:

- 1) Software development delays
- 2) Certification Delays
- 3) Implementation delays by the vendor
- 4) Delays in the release of the product or update by the vendor
- 5) Unable to train staff, test the system updates, or put new workflows in place due to delays with installing CEHRT by the vendor
- 6) Other vendor related delays

Please select the reason you could not fully implement 2014 CERHT from the following list: \*

-- Please Select --

Comments

-- Please Select --

-- Please Select --

- 1) Software development delays
- 2) Certification Delays
- 3) Implementation delays by the vendor
- 4) Delays in the release of the product
- 5) Unable to train staff, test the system updates
- 6) Other vendor related delays

**Attachments**

**Supporting Documentation:**  
You may upload supporting documentation.

File(s) Attached - (0) [Upload Files](#)

Note: Providers who are scheduled to to stage 2 MU and who enter a 2014 CEHRT will be given the option to either do 2014 Stage 1 MU, or 2014 Stage 2 MU. If the provider in this scenario selects 2014 Stage 1, they will not be prompted to choose a Flexibility Rule reason as indicated above. Instead, they will be required to attest to the following:

*I cannot meet the threshold for the Stage 2 Summary of Care objective because the recipients of the transmissions or referrals were impacted by issues related to 2014 EHR Technology availability delays and therefore could not implement the technology required to receive the summary of care documents.*

You have entered a 2014 EHR certification ID. Please select one of the following:

- \* I will attest to 2014 Stage 1 Meaningful Use
- \* I will attest to 2014 Stage 2 Meaningful Use

Note: Eligible providers in Stage 2 may select to attest to 2014 Stage 1 objectives and measures ONLY if they cannot meet the threshold for the Stage 2 Summary of Care objective because the recipients of the transmissions or referrals were impacted by issues related to 2014 certified EHR technology availability delays and therefore could not implement the functionality required to receive electronic summary of care documents.

I attest that I cannot meet the threshold for the Stage 2 Summary of Care objective because the recipients of the transmissions or referrals were impacted by issues related to 2014 EHR Technology availability delays and therefore could not implement the technology required to receive the summary of care documents.

Comments

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Once the provider selects their MU reporting option, this confirmation will appear at the bottom of the Survey Selection Page:

**Confirmation – Please read carefully!**

Based on the information you have provided, you will attest to: 2011/2014 CEHRT Edition / Program Year 2014 Stage 1

When you select the Continue button below, your attestation will be created with the appropriate set of Meaningful Use Objectives and Measures. If you determine later that you would like to change the information that you have entered up until this point, you will need to contact the SLR Help Desk at 866.879.0109.

Press Save and Continue to continue.

It is important to note that once the provider clicks *Save* or *Save and Continue*, they will be taken to the appropriate set of MU objectives and measures and will be unable to edit their CMS EHR Certification ID, or change the MU survey selected. If the user wishes to edit their selection after this point, they must contact the SLR Help Desk at 866-879-0109.

## Meaningful Use Objectives & Measures

After completing the Survey Selection Page, the provider will be directed to the appropriate MU objectives and measures.

Please refer to [Meaningful Use Requirements](#) on page 5 which summarizes the different requirements for 2013 Stage 1, 2014 Stage 1, and 2014 Stage 2.

Below are examples of each of the three MU surveys and how you can identify which one you are completing:

The screenshot displays the 'State Level Registry for the Medi-Cal EHR Incentive Program' interface. On the left, a navigation menu lists various sections under 'Meaningful Use Stage 1', including 'Reporting Period', 'EHR Certification', 'Core Measures', and 'Menu Measures'. A red callout box points to the 'Reporting Period' and 'EHR Certification' sections, stating: "This provider is completing the 2013 Stage 1 MU survey. This is evident because in 2013 there two sets of Clinical Quality Measures (CQMs) – Core and Additional". The main content area shows a 'Meaningful Use Checklist' with a yellow pencil icon. The checklist includes:

- Reporting Period
- EHR Certification
- Core Measures
- Menu Measures
- CQM Core Measures
- CQM Additional

A legend at the bottom left indicates:

- Completed
- Failed
- In Progress
- Notice (open item for details)

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Program Year 1

**Meaningful Use Stage 1**

- Reporting Period
- EHR Certification
- Core Objectives
  - CPOE
  - Drug-Drug/Drug Allergy
  - Problem List
  - E-Prescribing
  - Medication List
  - Medication Allergy List
  - Record Demographics
  - Vital Signs
  - Smoking Status
  - Clinical Decision Support
  - Patient Electronic Access
  - Patient Clinical Summaries
  - Protect Health Information
- Menu Objectives
  - Clinical Quality Measures
  - Detailed Summary Report

Completed  
Failed  
In Progress  
Notice (open item for details)

**Meaningful Use Checklist**

In order to demonstrate meaningful use all of the sections below must be successfully completed. Successful completion is denoted by a green checkmark. Clicking on any of the sections below will take you to that section.

- Reporting Period
- EHR Certification
- Core Objectives
- Menu Objectives
- Clinical Quality Measures

View Summary Report

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This provider is completing the 2014 Stage 1 MU survey. This is evident because in 2014 there is only one set of Clinical Quality Measures (CQMs)

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Program Year 4

**Meaningful Use Stage 2**

- Reporting Period
- EHR Certification
- Core Objectives
  - CPOE - Medication
  - CPOE - Laboratory
  - CPOE - Radiology
  - E-Prescribing
  - Demographics
  - Vital Signs
  - Smoking Status
  - Clinical Decision Support
    - Health Conditions
    - Clinical Decision Support
      - Drug-Drug and Drug-Allergy
      - Lab-Test Results
    - Patient Lists
    - Patient Reminders
    - On-Line Health Information-Access
    - On-Line Health Information-Use
    - Patient Clinical Summaries
    - Patient Education Resources
    - Medication Reconciliation
    - Summary Of Care Record- Provision
    - Summary Of Care Record- Electronic
    - Summary Of Care Record- Exchange
    - Immunization Registries
    - Protect Health Information
    - Electronic Messaging
  - Menu Objectives
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Completed  
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**Meaningful Use Checklist**

In order to demonstrate meaningful use all of the sections below must be successfully completed. Successful completion is denoted by a green checkmark. Clicking on any of the sections below will take you to that section.

- Reporting Period
- EHR Certification
- Core Objectives
- Menu Objectives
- Clinical Quality Measures

View Summary Report

This provider is completing the 2014 Stage 2 MU survey.

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## **Additional Resources**

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If you have any questions, please refer to the [\*Provider Quick Start Guide\*](#) ([\*http://www.dhcs.ca.gov/provgovpart/Documents/OHIT/Provider\\_SLR\\_Quick\\_Start\\_Guide.pdf\*](http://www.dhcs.ca.gov/provgovpart/Documents/OHIT/Provider_SLR_Quick_Start_Guide.pdf)) or contact the SLR Help Desk at 866-879-0109.