



Program Year 2014 Meaningful Use Guidance for Kentucky Public Health Reporting and Attestation: Stage 2

Revised per CMS Flexibility Rule

On September 4, 2014, CMS published a final rule that permits 2014 EHR Incentive Program participants more options in the use of certified EHR technology (CEHRT) for the 2014 EHR reporting period. This rule, referred to as the CEHRT Flexibility Rule, becomes effective on October 1, 2014. As such, the Kentucky Medicaid Program has revised their policies to align with this rule.

Using the CEHRT Flexibility Rule, program participants who have not fully implemented 2014 CEHRT will have the option to attest to Program Year 2014 using 2013 or 2014 EHR Incentive Program objectives and measures.

2011 CEHRT

If you are scheduled to report Stage 1 or Stage 2:

- [2013 Stage 1 objectives](#) and [2013 CQMs](#)

Combination of 2011 & 2014 CEHRT

If you are scheduled to report Stage 1:

- [2013 Stage 1 objectives](#) and [2013 CQMs](#); or
- [2014 Stage 1 objectives](#) and [2014 CQMs](#)

If you are scheduled to report Stage 2:

- 2013 Stage 1 objectives and 2013 CQMs; or
- 2014 Stage 1 objectives and 2014 CQMs; or
- [Stage 2 objectives](#) and [2014 CQMs](#)

2014 CEHRT

If you are scheduled to report Stage 1:

- [2014 Stage 1 objectives](#) and [2014 CQMs](#)

If you are scheduled to report Stage 2:

- [Stage 2 objectives](#) and [2014 CQMs](#); or
- 2014 Stage 1 objectives and 2014 CQMs

Source: EHR Incentive Programs 2014 CEHRT Rule: Quick Guide

The Kentucky Health Information Exchange (KHIE) is the designated public health authority (PHA) for the state of Kentucky. KHIE provides support for the following Stage 2 meaningful use public health objectives:

- Capability to submit electronic data to the Kentucky Immunization Registry
- Capability to submit electronic data on reportable lab results to the Kentucky Department of Public Health (DPH)
- Capability to submit electronic syndromic surveillance data to CDC's cloud-based model, BioSense 2.0
- Capability to submit electronic cancer reports to the Kentucky Cancer Registry

In conjunction with the CMS CEHRT Flexibility Rule, Kentucky Medicaid has modified their EHR Incentive Program Rules to enable program participants to attest in 2014 while giving EHR vendors additional time



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to develop the requisite interfaces for public health reporting. The attestation guidance outlined below supersedes all previous guidance issued by Kentucky.

General Attestation Guidance

All Eligible Professionals (EPs), eligible hospitals (EHs), and critical access hospitals (CAHs) must have a signed Participation Agreement and signed addendum(s) on file with KHIE for each public health objective selected for attestation. This includes providers that attest YES to a public health measure and claim an exclusion. The addendums include: Immunization Registry Authorization, Syndromic Surveillance Authorization, Disease Surveillance Authorization, and Participating Provider Authorization Kentucky Cancer Registry.

2014 EHR Incentive Program participants that attest using 2011 CEHRT or a combination of 2011 and 2014 CEHRT and/or claim an exclusion for public health reporting are responsible for ensuring they meet the qualifications and retain documentation that fully supports their attestation choice.

CMS EHR Incentive Program policies require participants to attest to all public health objectives in the Meaningful Use core set. EPs that claim an exclusion for a core public health objective are not required to select a public health objective from the menu set.

Attestations using 2011 or a combination of 2011 and 2014 CEHRT

Program participants that attest using 2013 or 2014 Stage 1 objectives and measures must abide by the attestation guidance published in “Program Year 2014 Meaningful Use Guidance for Kentucky Public Health Reporting and Attestation: Stage 1, Revised per CMS Flexibility Rule.”

Attestations using 2014 CEHRT

Participants who are live on KHIE for a selected public health measure will receive a signed Go-Live Approval form when their data feed transitions from test to production. The form itself indicates the type of feed (immunizations, syndromic surveillance, reportable diseases, cancer registry) that is live with ongoing submission. At the time of attestation, participants must select YES to the public health measure and upload the Go-Live Approval form as proof of status. Note that if you attest to more than one public health objective and the data feeds go live on different dates, you will receive more than one Go-Live approval form from KHIE. Each form will need to be uploaded to the attestation as proof for status. Do not claim any exclusions associated with the objective.



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Participants who are not yet live for a selected public health objective can request a Meaningful Use Confirmation form provided they meet the following criteria:

- i) Signed Participation Agreement and associated addendum(s) on file with KHIE
- ii) Completed intake call with the KHIE team
- iii) Confirmation that the participant's EHR vendor is 2014 certified for the selected public health objective
- iv) Confirmation that the participant's EHR vendor has established connectivity with KHIE for the selected public health objective

At the time of attestation, participants who receive a Meaningful Use Confirmation form must select YES to the public health objective and upload the form as proof for status.