**Implementation Workgroup**

**Dates**

Location

Washington, DC

**Instructions and Questions for Panelists**

**Purpose: The Eligible Hospital Panel will help to inform recommendations prepared by the HIT SC and HIT PC on how to enable EHs to be more successful in their efforts to meet Stage 2 meaningful use, and provide input on proposed Stage 3 requirements of the program. Results should include suggestions specifically related to identification of the most critical areas for focus with Stage 3 measures.**

**THEMES/QUESTIONS FOR PANELISTS**

 (Please answer as many or as few of the questions as your experience and/or the time allows.)

* What innovative approaches have you employed to meet the new requirements for stage 2? How would you improve the design of the meaningful use incentive program for your facility? What are your suggestions for addressing any implementation barriers to enable greater levels of participation (e.g. measure definition, quality measures related to population health, attestation timelines)
* What meaningful use objectives do you believe will prove most challenging for you to meet in Stage 2 and why? How would you modify those objectives to reduce the challenge, and why would those modifications seem an improvement?
* What guidance or actions by ONC and CMS may be most conducive to increased adoption of the public health reporting standards? Should ONC or CMS develop resources for identifying specialty registries able to accept electronic submission or cancer registries able to support the required Stage 2 standard for cancer case reporting?
* What meaningful use objectives do you believe should be given highest priority for their inclusion in Stage 3 and why?
* What kinds of resources do you believe most important and useful for ONC and CMS to provide or to support so as to improve the ability of hospitals to effectively and economically achieve Stage 2 and 3?
* What have you found to be the most effective means for provider/consumer engagement in support of enabling consumers to be active participants in their own healthcare related to meaningful use?
* What barriers to effective engagement are most significant to reduce in order for consumers to be able to have a voice in their own healthcare as enabled by meaningful use?
* Have you established sending and receiving electronic transitions of care with skilled nursing facilities (SNF) and home care agencies (HC) caring for your patients and if so:
	+ What actions have you taken or believe should be taken to handle barriers to interoperability?
	+ Do you have suggesting for achieving meaningful use with SNF and HC?
* Stage 2 indirectly includes long term and post-acute care (LTPAC) by requiring exchange between providers such as may occur between hospitals or EPs with LTPAC providers. For Stage 3, to more directly address the interests of EHs focused on practice in LTPAC, Home Health and Behavioral Health, do you have suggestions for criteria appropriate for those care venues?
* What are the most important things vendors can do to make attestation easier and more likely?”
* Should CMS take additional steps to provide EHs guidance on how to prepare for audit of meaningful use attestation? If so, what suggestions do you have as to what those steps should be?