

The Summary of Care Objective changed from a Menu Objective in Meaningful Use Stage 1 to a Core Objective in Meaningful Use Stage 2. It still includes three transitions of care (TOC) measures for providers that transition or refer patients to another provider or setting of care. This document provides an overview of those measures and options for achieving them for eligible providers (EP), eligible hospitals (EH) and critical access hospitals (CAH).

Calculating the Percentages:

- The **numerators** differ for Measure #1 and #2 with the criteria outlined to the right.
- The **denominator** is consistent across Measures #1 and #2. In its simplest form, the denominator includes all TOC during the EHR reporting period in which the provider transferred or referred a patient. This number does not always correlate with patient volume. Some patients are never transitioned or referred and some have multiple transitions/referrals.

Eligible professionals who have less than 100 transitions of care and referrals in the reporting period do not have to meet these measures.

Three Transitions of Care Measures:

1

Measure 1: Requires providers to send a summary care record for more than 50% of transitions of care and referrals.

Calculation:

More than 50%

Any tool in which a summary care record is provided

All TOC in which the provider transferred or referred

2

Measure 2: Requires providers to electronically transmit a summary care record for more than 10% of transitions of care and referrals, using CEHRT or eHealth Exchange participant.

Calculation:

More than 100%

The number of transitions/referrals where a summary of care was electronically transmitted using CEHRT or an eHealth exchange participant (HIO/HIE)

All TOC in which the provider transferred or referred

Providers working with an HIO/HIE that is not certified or an eHealth Exchange participant, can still count transactions in their numerator if the following criteria are met:

- The TOC is in their denominator
- The CCDA is generated by CEHRT and sent to the HIO/HIE via CEHRT
- Receipt of the summary is confirmed
- A methodology exists for counting the TOC and matching with those in the denominator

Calculating the numerator for TOC measures with a query-based HIE or eHealth Exchange participant can be challenging, but it is possible. If you are currently working with an HIE or plan to, discuss options for calculating your TOC measures with the HIE and your REC.

3

Measure 3: Requires providers to electronically transmit at least one summary care record to a recipient with a different EHR vendor OR conduct one or more successful tests with the CMS-designated test EHR.

Transitions of Care Measure Requirements:

1

Measure 1 Requirements:

- The summary care record must contain required data elements and must be created by CEHRT.
- The delivery of the summary of care record does not have to be electronic; it may be delivered via fax, mail or even via the patient

2

Measure 2 Requirements:

- The summary care record must be received by the accepting provider to count in the numerator. “Received” means the care summary has been delivered to the accepting provider (whether or not they read it) or the accepting provider has accessed the care summary if posted to a central system for querying.
- Transferring providers must use their CEHRT’s electronic transmission capability to send summary records, unless they use the transmission services of an eHealth Exchange participant.
- In addition to Direct, they can certify to optional transports, including SOAP.
- The recipient is not required to have certified EHR technology.



Summary of Care Contents:

Patient name; Sex; Date of birth; Race; Ethnicity; Preferred language; Smoking status; Problems; Medications; Medication allergies; Laboratory test(s) and value(s)/result(s); Vital signs (height, weight, blood pressure, BMI); Care plan field(s), including goals and instructions; Procedures; Care team member(s) and other ambulatory and inpatient specific data

For more information or assistance, contact your local REC

- Our practical expertise in health care and health IT allows us to offer you functional solutions that are right for you and your circumstances.
- We understand the 2014 Edition Certification and its impact on TOC.
- We can help you count numerator contributions for TOC measure 2 when using query based exchange.