

Meaningful Use (Stage 2)

• What is RevolutionEHR's EHR certification number?

The proper certification number for anyone using RevolutionEHR version 6.2 with RxNT/EHR 7.1 is **A014E01OS90NEAR**.

Selected Attestation : **2014 Edition**

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CMS EHR CERTIFICATION ID

Certified Health IT Product List

Your CMS EHR Certification ID is: A014E01OS90NEAR

An Eligible Professional (EP) or Eligible Hospital (EH) that chooses to participate in the Centers for Medicare and Medicaid (CMS) EHR Incentive Programs must obtain a CMS EHR Certification ID. You may submit this CMS EHR Certification ID at the time of registration, but must submit it as part of the attestation process for Medicare and Medicaid (CMS) EHR Incentive Programs.

Please return to the [Medicare and Medicaid EHR Incentive Program](#) and enter this CMS EHR Certification ID when prompted for an "EHR Certification Number" on the appropriate registration or attestation screen.

Please do not refresh this page. Refreshing the page may remove EHR products from your certification cart and result in an incorrect CMS EHR Certification ID. Click on the "Return to CHPL Home" link above to access the CHPL homepage.

YOUR CERTIFIED EHR PRODUCT(S)

The following products were used to obtain your CMS EHR Certification ID:

Certifying Body	Original Practice Type	Vendor	Product	Product Version #	Product Classification	Additional Software Required
CCHIT	Ambulatory	Networking Technology dba RxNT	RxNT EHR	V7.1	Complete EHR	American Association for Clinical Chemistry, http://labtestsonline.org/ , 2013; First Databank, NDDF Plus, 3.0; Radiology Associates of North America, http://www.radiologyinfo.org , 2013
CCHIT	Ambulatory	Health Innovation Technologies, Inc.	RevolutionEHR	6.2	Modular EHR	RxNT, RxNT/EHR, 7.1

If an alternate certified ePrescribing system is used, the certification number can be built on ONC's CHPL: <http://goo.gl/5PsHd> by placing the bottom instance RevolutionEHR version 6.2 AND the ePrescribing system to the "Cart" before clicking "Get CMS EHR Certification ID".

• What is the deadline to complete attestation for 2014 reporting periods?

Eligible professionals now have until 11:59 pm ET on March 20, 2015, to attest to meaningful use for the Medicare Electronic Health Record (EHR) Incentive Program 2014 reporting year. The call center is experiencing longer wait times than usual. For help, consider contacting the Help Desk (888-734-6433) at non-peak hours such as early mornings and evenings.

• How many objectives do I need to report on to achieve Meaningful Use?

Eligible professionals must report on all 17 core objectives (through success and/or exclusions where applicable) and 3 menu objectives (through success). Excluding from menu objectives does not count toward the three that must be achieved.

- **A number of objectives during attestation ask if my data “was extracted from ALL patient records not just those maintained in certified EHR technology” or “only extracted from patient records maintained using certified EHR technology”. What do I choose?**

If all care during the reporting period was documented in RevolutionEHR, you should select “only extracted from patient records maintained in certified EHR technology”. If care was also provided in non-2014 certified software and/or paper and those stats are included in your attestation, you should select “was extracted from ALL patient records not just those maintained in certified EHR technology”.

- **My scorecard shows passing measures for CPOE and E-Prescribing but I didn’t write 100 prescriptions or orders. Should I enter my data or exclude?**

Enter your data whenever passing data is available as it looks better for you and the profession.

- **How do I run my Clinical Quality Measure scorecard?**

The clinical quality measure scorecard is located right above the MU scorecards in RevolutionEHR. For MU purposes, select “eQCM Primary” for type, set the date range to your 90 day MU reporting period and click “Search”. No attention needs to be paid to the QRDA dropdown lists when manually reporting your clinical quality measure data during attestation.

- **My Clinical Quality Measure scorecard shows a lot of 0%. What did I do wrong? Will this stop me from achieving Meaningful Use?**

There are no Clinical Quality Measure scoring requirements to achieve Meaningful Use. Report the scores shown on your eQCM Primary scorecard over your 90 day reporting period and you’ll satisfy the requirement. If you’d like to learn more about how they are scored, this document can help: <http://goo.gl/qmzVNq>

- **During attestation, the system asks me how I’d like to submit my Clinical Quality Measure data. Which option should I choose?**

Given the limited amount of time remaining until the deadline, you should choose Option 2 to report during attestation. You’ll then be presented with a list of all 64 measures and be asked to select the 9 you’d like to report on. Locate and select the 9 that are present on the eQCM Primary scorecard in Revolution.

- I used phone calls, postcards or a 3rd party system (i.e. DemandForce, SolutionReach, WS3, etc.) to remind my patients of the need for care. Can I count these for the Preventative Care objective? If yes, how?

Yes, all forms of reminders can be counted but the key consideration needs to be reminders that are sent during the reporting period to patients that were seen 2+ times in the 24 months preceding the start date of the reporting period who don't have appointments scheduled. More detailed information about this objective is available here: http://youtu.be/Fy_SC1xr7MI?t=4m36s Once the manually tracked numerator has been counted, the scorecard can be edited prior capturing/printing for attestation.

- I completed entering all my data, submitted the attestation, but it was reported as rejected. What did I do wrong?

Make sure that your RevolutionEHR scorecard shows passing stats for all the measures you reported on. If it does, a typographical error likely occurred when you entered your data in the attestation system. To proceed, return to the Attestation tab and click the "Resubmit" button next to the 2014 Payment Year. You'll then be able to review your data, edit the error(s), and resubmit the attestation.

Name	Tax Identifier	National Provider Identifier (NPI)	CMS Certification Number (CCN)	Medicare Attestation Status	Program Year	Payment Year	Action
						2014	Not Available Resubmit View View View

Stage 2 presents two objectives where many ODs will have 0/0 scores: CPOE for Radiology Orders and Incorporate Clinical Lab-Test Results. Entering a score of 0/0 will result in the attestation being rejected. Instead, an exclusion needs to be claimed for each of these when the score is 0/0.

- My attestation was accepted. How long until I receive my incentive payment?

Payment can be typically be expected within 8 weeks.