

Meaningful Use: DEMO of a Practice

Michael J. Mirro, MD, FACC

Medical Director : Parkview Research Center

Electrophysiologist : PPG-Cardiology

Michael Mirro MD : Disclosures

- Past-Chair : ACC Informatics Committee
- Member : ACC-NCDR Management Board
- Chair : HRS Informatics Work Group
- Member : HRS Health Policy and Quality Committee
- Co-Chair : CCHIT Advanced Quality Work Group-2010
- Co-Chair : CCHIT Cardiovascular Work Group-2008-09
- National Quality Forum : Member HIT Expert Panel
- National Quality Forum : Member eMeasure Initiative
- Indiana Health Informatics Corp : Board Member
- Consultant : McKesson
- MIE : past Board Member

Parkview Physicians Group - Cardiology

Established in 1979 as Fort Wayne Cardiology

23 Board-Certified Cardiologists

5 Board-Certified Electrophysiologists

10 Interventional Cardiologists

3 Nurse Practitioners

1 Internist

Full Electronic Health Record in 1999

EPIC Implementation : 10/31/12



Agenda

- Meaningful Use : What to do Now
- Clinical Decision Support
- PINNACLE : Electronic Quality Reporting
- Health Information Exchange
- Patient Engagement
- Summary

Federal Health IT Strategic Plan 2011-2015



Goal V: Achieve Rapid Learning and Technological Advancement

Goal IV: Empower Individuals with Health IT to Improve their Health and the Health Care System

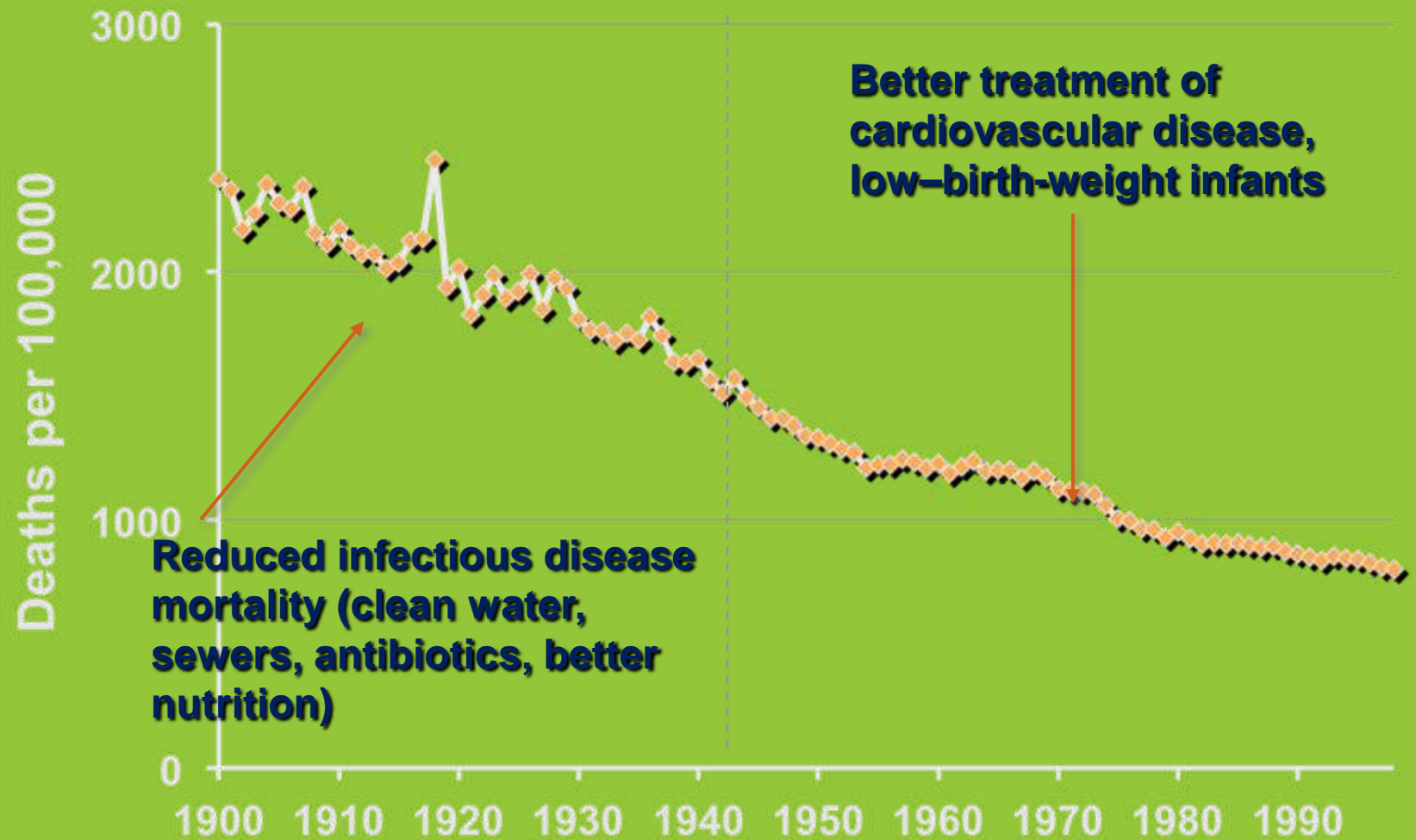
Goal III: Inspire Confidence and Trust in Health IT

Goal II: Improve Care, Improve Population Health, and Reduce Health Care Costs through the Use of Health IT

Goal I: Achieve Adoption and Information Exchange through Meaningful Use of Health IT



Mortality in the 20th Century



Achieving MU : Eligible Provider

- 1) Adopt an ATCB certified EHR and use it
- 2) Demonstrate use of Clinical Decision Support
- 3) Demonstrate Health Information Exchange
- 4) Demonstrate Electronic Quality Reporting

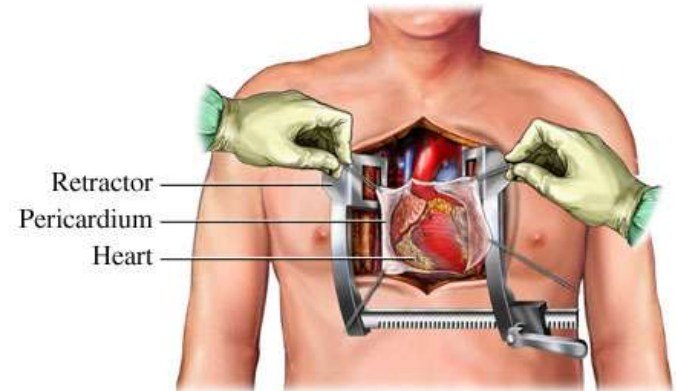
What Do I Need to Do Now?

1. Get a certified EHR (use in >80% of patients)
 - Consider Regional Extension Center (REC) assistance
2. Implement the MU requirements
 - e-Prescribe!
 - Adapt your workflow to accomplish MU
 - Select the quality metrics you plan to measure
 - Select the Menu Set objectives you plan to fulfill
 - Use your certified EHR per the MU specifications for at least 3 months (first year)
3. Register for incentives

https://www.cms.gov/EHRIncentivePrograms/20_RegistrationandAttestation.asp
4. Attest to performance
5. Deposit check in bank

Adoption Barriers

- Cost
- Inflexible EHR software
- Inflexible EHR vendors
- Practice disruption
- Invasive EHR solutions





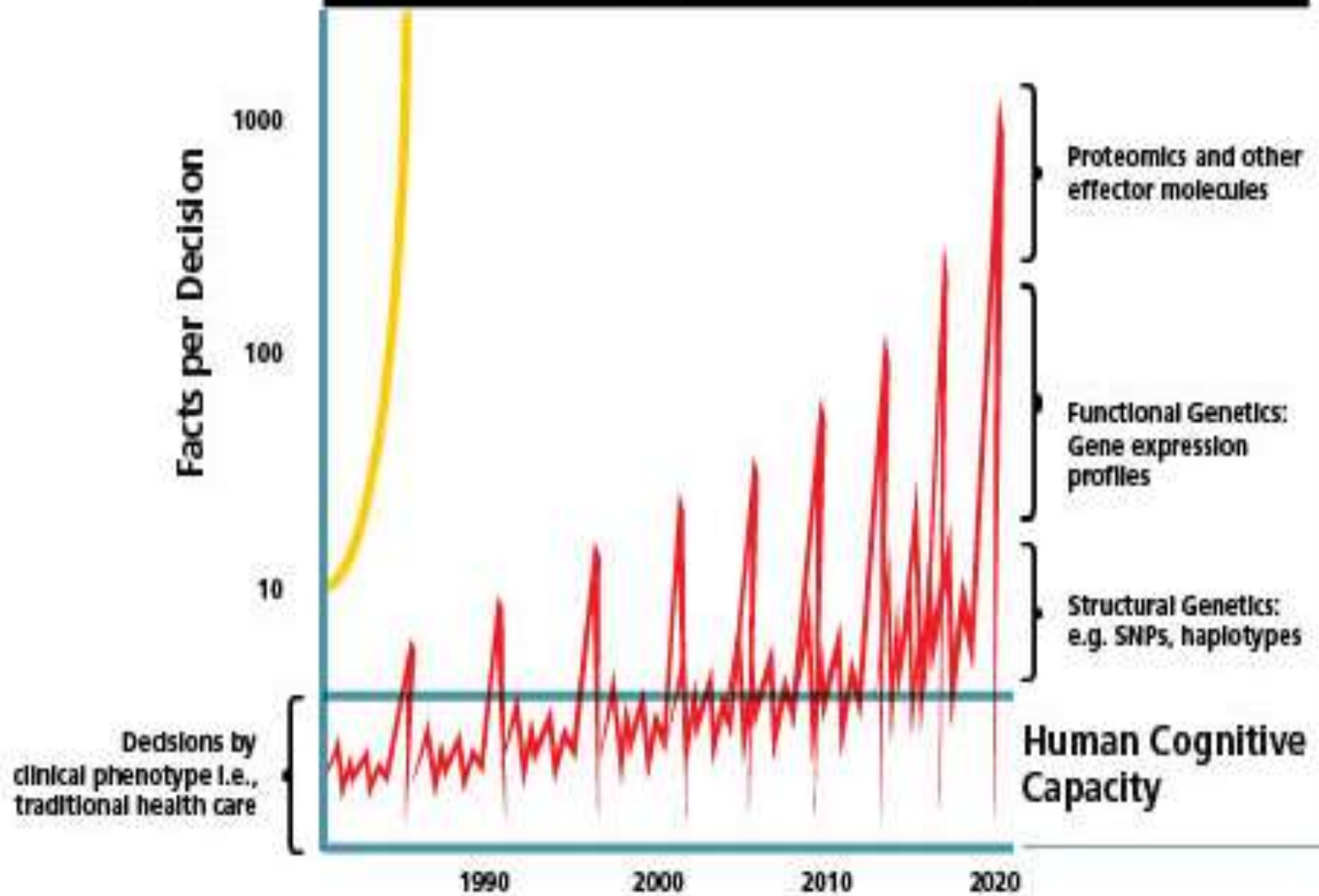
TRADITION

JUST BECAUSE YOU'VE ALWAYS DONE IT THAT WAY
DOESN'T MEAN IT'S NOT INCREDIBLY STUPID.

www.despair.com

FWC demonstrated meaningful use
before it was called meaningful use

Need for Patient-Specific Decision Support Assistance



Clinical Decision Support Evidence

75% of decision support interventions succeed when the information is provided to clinicians automatically, whereas none succeed when clinicians are required to seek out the advice

Clinical Decision Support

Information management for decision-making

- Active prompts/reminders to encourage changes in patient management, regardless of reason for visit
- Reminders drawn established care guidelines
- Pharmacy decision support draws from patient specific database, which includes age, weight, allergies and lab results
- Drug utilization review
- Rules-based triggers

MU Compliance : CDS

- Clinical Decision Support (CDS)
 - Evidence-based medicine at the point-of-care
 - Congestive Heart Failure
 - Atrial Fibrillation
 - Coronary Artery Disease
 - Hypertension

Condition/Problem list reviewed and updated.

- OmniScope
- E-Chart
- E-Sign
- Task List
- Scheduler
- Intranet
- MIE Portal
- Drug Guide
- Control
- Dictation
- Directory
- Downloads
- Orders
- Reports
- Fax Mgr
- EOB
- Logout

Conditions

- | | | |
|--|---|--|
| <input type="checkbox"/> Active <input type="checkbox"/> Hx <input checked="" type="checkbox"/> No Right Heart Failure | <input type="checkbox"/> Active <input type="checkbox"/> Hx <input checked="" type="checkbox"/> No Diastolic Heart Failure | Conclude <input type="checkbox"/> Yes COPD (Active) |
| <input type="checkbox"/> Active <input type="checkbox"/> Hx <input checked="" type="checkbox"/> No CHF Class I | <input type="checkbox"/> Active <input type="checkbox"/> Hx <input checked="" type="checkbox"/> No CHF Class II | <input type="checkbox"/> Active <input type="checkbox"/> Hx <input checked="" type="checkbox"/> No Asthma |
| <input type="checkbox"/> Active <input type="checkbox"/> Hx <input checked="" type="checkbox"/> No CHF Class III | <input type="checkbox"/> Active <input type="checkbox"/> Hx <input checked="" type="checkbox"/> No CHF Class IV | <input type="checkbox"/> Active <input type="checkbox"/> Hx <input checked="" type="checkbox"/> No Cardiac Valvular Disease |
| Conclude <input type="checkbox"/> Yes CHF Non-specified (Active) | <input type="checkbox"/> Active <input type="checkbox"/> Hx <input checked="" type="checkbox"/> No Hypertrophic Cardiomyopathy | Conclude <input type="checkbox"/> Yes Coronary Artery Disease (Active) |
| <input type="checkbox"/> Active <input type="checkbox"/> Hx <input checked="" type="checkbox"/> No Non-Ischemic Cardiomyopathy | <input type="checkbox"/> Active <input type="checkbox"/> Hx <input checked="" type="checkbox"/> No Biventricular Pacemaker | <input type="checkbox"/> Active <input type="checkbox"/> Hx <input checked="" type="checkbox"/> No Chronic Dialysis |
| <input type="checkbox"/> Active <input type="checkbox"/> Hx <input checked="" type="checkbox"/> No Monoventricular Pacemaker | <input type="checkbox"/> Active <input type="checkbox"/> Hx <input checked="" type="checkbox"/> No Implantable Cardioverter-Defib | Conclude <input type="checkbox"/> Yes Chronic Renal Insufficiency (Active) |
| <input type="checkbox"/> Active <input type="checkbox"/> Hx <input checked="" type="checkbox"/> No Hyperlipidemia/Dyslipidemia | <input type="checkbox"/> Active <input type="checkbox"/> Hx <input checked="" type="checkbox"/> No Atrial Fibrillation | Conclude <input type="checkbox"/> Yes Hypertension (Active) |
| <input type="checkbox"/> Active <input type="checkbox"/> Hx <input checked="" type="checkbox"/> No A-Fib - Chronic Permanent | <input type="checkbox"/> Active <input type="checkbox"/> Hx <input checked="" type="checkbox"/> No A-Fib - Paroxysmal Recurrent | <input type="checkbox"/> Active <input type="checkbox"/> Hx <input checked="" type="checkbox"/> No Insulin-Dependent Diabetes |
| <input type="checkbox"/> Active <input type="checkbox"/> Hx <input checked="" type="checkbox"/> No A-Fib - Paroxysmal Persistent | <input type="checkbox"/> Active <input type="checkbox"/> Hx <input checked="" type="checkbox"/> No Prior AV Node Ablation | Conclude <input type="checkbox"/> Yes Non-Insulin-Dependent Diabetes (Active) |
| <input type="checkbox"/> Active <input type="checkbox"/> Hx <input checked="" type="checkbox"/> No Prior AV Node Ablation | <input type="checkbox"/> Active <input type="checkbox"/> Hx <input checked="" type="checkbox"/> No Ventricular Fibrillation | <input type="checkbox"/> Active <input type="checkbox"/> Hx <input checked="" type="checkbox"/> No Peripheral Vascular Disease |
| <input type="checkbox"/> Active <input type="checkbox"/> Hx <input checked="" type="checkbox"/> No Ventricular Fibrillation | <input type="checkbox"/> Active <input type="checkbox"/> Hx <input checked="" type="checkbox"/> No Ventricular Tachycardia | Conclude <input type="checkbox"/> Yes Prior MI (Active since 03/01/1997) |
| <input type="checkbox"/> Active <input type="checkbox"/> Hx <input checked="" type="checkbox"/> No Ventricular Tachycardia | | Conclude <input type="checkbox"/> Yes Prior Revascularization (Active) |
| | | Conclude <input type="checkbox"/> Yes Smoking (Active) |
| | | <input type="checkbox"/> Active <input type="checkbox"/> Hx <input checked="" type="checkbox"/> No TIA |
| | | <input type="checkbox"/> Active <input type="checkbox"/> Hx <input checked="" type="checkbox"/> No Stroke |
| | | Conclude <input type="checkbox"/> Yes Conduction Disease (BBB) (Active) |
| | | <input type="checkbox"/> Active <input type="checkbox"/> Hx <input checked="" type="checkbox"/> No Active Malignancy |
| | | <input type="checkbox"/> Active <input type="checkbox"/> Hx <input checked="" type="checkbox"/> No Sinus B |

Observations are collected and entered.

CHF Observations

Observation date/time	LVEF (Echo)	LVEF (Nuclear)	LVEF (Angio)	Body Weight	Options
03-24-2004 00:00	>55			340	
06-24-1999 00:00				295	

Quality Care Guidelines are reviewed and alerts are presented.

-  My Tasks:1 Echo Tasks:30 Incoming Document Review Tasks:20
- DATE: 04/28/2004 PHYSICIAN: Daley, M.D., F.A.C.C., Patrick J. VIS.TYPE: Office
- Demo | E-Orders | Maj Diag/Allergies (1) | Apts (7) | Sum (35) | Trans (20) | Hospital (14) | Encounters | E-Meds (14) | Conds (1) | Observations (3)
- Miscellaneous (7) | Radiology (1) | DST/EKG (2) | Echo/Ultrasound (1) | Consult-D/S (21) | Nurse Notes (1) | Tasks (5) | Summary | Surgeries
- Preferred Pharmacy: Not Selected Preferred Days Supply: Not Selected
- The accuracy of this content has not yet been verified. [Verify](#) Current Library: Default
- Warning: This Congestive Heart Failure patient does not appear to be taking:**
 - [ACE Inhibitors / ARB](#): ACE Inhibitors, ARBs
 - [Beta-Blockers](#): Beta-Blockers
- Warning: This Post MI patient does not appear to be taking:**
 - [Aspirin](#): Aspirin
 - [Beta Blocker](#): Beta-Blockers
 - [Antihyperlipidemics](#): Antihyperlipidemics, Crestor
- Allergies and Intolerances** | [Show Deleted](#) | [Show Discontinued](#)
- | Allergy Name | Type | Reaction | Start Date | End Date | Entered By | Date Modified | Options |
|--------------|------|----------|------------|----------|------------|---------------|---------|
| 0 Results | | | | | | | |
- Medication History** | [Show Classes](#) | [Show Deleted](#) | [Hide Discontinued](#) | [Show Modified By](#)
- | Drug Name | Sig | Ref. | Comment | Start Date | End Date | Options |
|---|---------------------|------|--------------------------------|------------|----------|---|
| Aldactone 25mg
Spironolactone  | • 1 tablet qd | 0 | Duplicated Therapy: Lasix Oral | | | Edit Delete Discontinue
Refill |
| Aranesp 100mcg/mL
Darbepoetin Alfa-Albumin  | • 1 solution weekly | 0 | | | | Edit Delete Discontinue
Refill |
| Aspirin 325mg  | • qd | 0 | | | | Discontinued Delete |

Orders are entered to satisfy alerts.



My Tasks:1 Echo Tasks:30 Incoming Document Review Tasks:20

DATE: 04/28/2004 PHYSICIAN: Daley, M.D., F.A.C.C., Patrick J. VIS.TYPE: Office

- Demo
- E-Orders
- Maj Diag/Allergies (1)
- Appts (7)
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- OmniScope
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- Task List
- Scheduler
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- Dictation
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- Orders
- Reports
- Fax Mgr
- EOB
- Logout

Prescribe

Prescription Details

Medication	Form	Start Date
Crestor (New)	Tablet 20mg	06 -24 -2004 Today Pick Date
Sig	<ul style="list-style-type: none"> Tablet 10mg Tablet 20mg Tablet 40mg Tablet 5mg Tablet 10mg (generic) Tablet 20mg (generic) Tablet 40mg (generic) 	
Practitioner Sig	1 tablet qd	
Patient Sig	One tablet Every D	
Duration	Quantity	Indication
11m	330 Calc.	Hyperlipidemia
Managed By	Remembered Script Name	
Refills	May Substitute	Prescriber
	<input checked="" type="radio"/> Yes <input type="radio"/> No	Genetos, M.D., F.A.C.C., Basil C.
Special Instructions for Patient		
Discontinue On: (leave blank to never automatically discontinue)		
		Clear Pick Date Calc.

Prescribe

Prescription Details

Orders are entered to satisfy alerts.



My Tasks:1 Echo Tasks:30 Incoming Document Review Tasks:20
DATE: 04/28/2004 PHYSICIAN: Daley, M.D., F.A.C.C., Patrick J. VIS.TYPE: Office

Demo E-Orders Maj Diag/Allergies (1) Appts (7) Sum (35) Trans (20) Hospital (14) Encounters E-Meds (14) Conds (1) Observations (3)
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- OmniScope
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Prescribe

Prescription Details

Medication	Form	Start Date
Crestor (New)	Tablet 20mg	06 -24 -2004 Today Pick Date
Sig	Tablet 10mg Tablet 20mg Tablet 40mg Tablet 5mg Tablet 10mg (generic) Tablet 20mg (generic) Tablet 40mg (generic)	
Practitioner Sig 1 tablet qd	<input type="button" value="Build"/>	
Patient Sig One tablet Every D		
Duration	Quantity	Indication
11m	330 <input type="button" value="Calc."/>	Hyperlipidemia
Managed By	Remembered Script Name	
Refills	May Substitute	Prescriber
<input type="text"/>	<input checked="" type="radio"/> Yes <input type="radio"/> No	Genetos, M.D., F.A.C.C., Basil C.
Print		
<input checked="" type="checkbox"/>		
Special Instructions for Patient		
<input type="text"/>		
Discontinue On: (leave blank to never automatically discontinue)		
<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="button" value="Clear"/> <input type="text"/> <input type="button" value="Pick Date"/> <input type="button" value="Calc."/>

Prescribe

Prescription Details



[REDACTED]

Birth Date: 10/31/1934

[REDACTED]

Patient education is printed.

PATIENT EDUCATION

Current Medications:

Medication	Instructions	Reason for Taking
<i>Aldactone 25mg Tablet</i> (Spironolactone)	• One tablet Every Day	1 daily
<i>Aranesp 100mcg/mL Solution</i> (Darbepoetin Alfa-Albumin)	• One solution Weekly	Anemia due to Renal Failure (Decrease in Red Blood Cells due to Kidney Failure)
<i>Celexa 40mg Tablet</i> (Citalopram Hydrobromide)	• One tablet Every Day	Anxiety
<i>Docusate Sodium Oral 100mg Capsule</i> Same as Colace, Stool Softener, and others.	• One capsule Twice A Day	Constipation
<i>Iron 325 (65)mg Capsule</i> (Ferrous Fumarate-Docusate Na) Same as Siderol, Albafort, and others.	• One capsule Twice A Day	Iron Deficiency Anemia (Anemia from Inadequate Iron)
<i>Lasix Oral 20mg Tablet</i> (Furosemide Oral)	• One tablet Every Day	CHF (Congestive Heart Failure), reduce fluid retention
<i>Levothroid Oral 50mcg (0.050mg) Tablet</i> (Levothyroxine Sodium Oral) Same as Synthroid, Levoxyl, and others.	• One tablet Every Day	Hypothyroidism
<i>Milk of Magnesia 400mg/5 mL Suspension</i> (Magnesium Hydroxide) Same as Phillips Milk of Magnesia, Ex-Lax Milk of	• As Needed	Bowel Evacuation (Emptying of the Bowel)

HIT Tools Embedded in EHR

- Clinical Decision Support EF Alerts
- PINNACLE Registry EF Data Entry

MR: [Unmatched-26167](#) Name: [Tiny, Tim](#) DOB: 05-13-1942

Age: 68 Sex: M

Chart Online: No Home: (260) 615-9281

| [Prescribe](#) | [Quick Add](#) | [Simple Add](#) | [Add Document](#) |

| [Add Allergy/Intol.](#) | [Quick Allergy](#) | [List](#) | [Discontinue](#) | [Pat.Ed](#) | [Med Sheet](#) | [Refill All](#) |

| [Print Chart](#) | [Add Appt](#) | [Add Dictation](#) | [Add Task](#) | [Add Order](#) |

[Preferred Pharmacy](#): Not Selected

[Preferred Days Supply](#): Not Selected

[Mail-In Pharmacy](#): Not Selected

[Current Library](#): Default

[Drug Plan](#): Not Selected

The accuracy of this content has not yet been verified. | [Verify](#)

Last Updated On: 12-02-2010 04:26pm By [DB](#)

Warnings for Congestive Heart Failure patient

- [Aldactone for CHF : Aldactone, Aldactazide](#)

Warnings for COE patient

- [EF Required at least once every 2 years](#)

This patient has no known drug allergies (NKDA).

Undo NKDA

[ENCOUNTERS \(12\)](#)

[FACESHEET](#)

[QUICK VIEW](#)

[WARN](#)

[*PQRI*](#)

Check Heart Failure to All No's.

Heart Failure Activity Assessment(s)

HF NYHA Class: I II III IV

Kansas City Cardiomyopathy Questionnaire Completed. Chronic Heart Failure Questionnaire from Guyatt Completed.

Minnesota Living with HF Questionnaire Completed. Other Tool/Method Used to Assess Heart Failure Activity Completed.

Heart Failure Symptoms Assessment(s)

HF Dyspnea Present: No Yes Orthopnea Present: No Yes

Heart Failure Physical Assessment(s)

HF Rales Present: No Yes Peripheral Edema Present: No Yes S₃ Gallop Present: No Yes

Ascites Present: No Yes Hepatomegaly Present: No Yes S₄ Gallop Present: No Yes

Jugular Venous Distention Present: No Yes

Plan of Care

CAD Cardiac Rehabilitation Referral or Plan for Qualifying Event/Diagnosis in past 12 months: Yes-Referral/Plan Documented Yes-Referral/Plan Medical Reason No-Referral/Plan - Patient Reason No-Referral/Plan - System Reason Patient Already Participating in Rehab

HF HF Education Completed/Documented

Note: Cardiac event/diagnoses includes Myocardial Infarction, Valve surgery, Heart Transplant, CABG, PCI or new Stable Angina diagnosis.

E. Laboratory Results

Note: Enter most recent lab results and/or indicate the labs ordered during this encounter.

LVEF Data

New results are required within the last 12 months.

LVEF Assessed Date: - - Today 

LVEF(Echo): %

LVEF(Nuclear): %

LVEF(Angio): %

CAD/HF

- OR -

- LV Qualitative Assessment:
- Normal: ≥ 50
 - Mildly reduced: 40 - 49
 - Moderately reduced: 26 - 39
 - Severely reduced ≤ 25

Pinnacle Registry: EF Documentation

LVEF Data

Enter more recent values? Yes No

Hide LVEF values

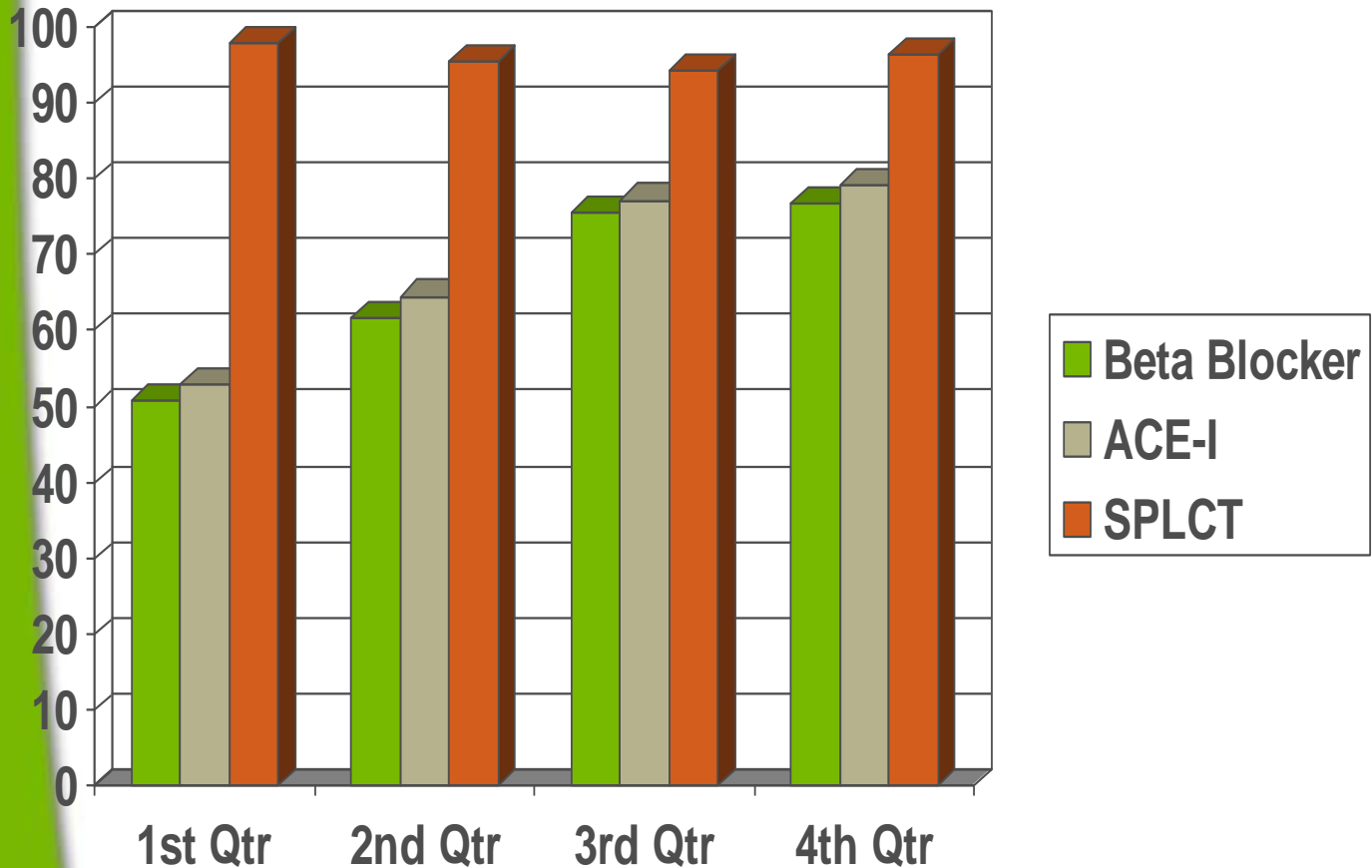
Date	LVEF (Echo)	LVEF (Nuclear)
01-19-2011 02:18pm		39
01-13-2011	40	
01-12-2009	60%	
11-12-2008	70	

CAD/HF

- *People need to be reminded more often than they need to be instructed.*

-----Samuel Johnson

Built-in clinical decision support does affect Rx behavior





To practice evidence-based medicine

We e-Prescribe



Doc Queue:30 | Physician:18

MR: M-I256594 Name: Oil, Olive A DOB: 11/01/1974

DATE: 02/01/2010 PHYSICIAN: Engineering, Inc., Medical I VIS.TYPE: IC3 Data Collection | IC3 Data Collection | View IC3DataCollection |

[DEMOs](#) | [Vein Clinic Roster \(1\)](#) | [Rounding Lists \(1\)](#) | [Orders/Lab Orders \(76\)](#) | [Nurse Notes \(231\)](#) | [E-Meds \(12\)](#) | [Med Sheet \(11\)](#) | [Vitals](#) | [Maj Diag/Alg \(15\)](#) | [Trans \(263\)](#) | [CATH/EP \(17\)](#)
[Echo/Vasc/Vein Clinic \(76\)](#) | [DST/EKG \(161\)](#) | [ADC \(31\)](#) | [Labs \(259\)](#) | [Warfarin \(30\)](#) | [Misc \(222\)](#) | [Dictation \(194\)](#) | [Old Chart \(148\)](#) | [Tasks \(749\)](#) | [Schedules \(5\)](#) | [Ins/Dis/Bill \(84\)](#) | [Discharge \(33\)](#)
[Conditions \(14\)](#) | [Appts \(55\)](#) | [Sum \(1249\)](#) | [Observations \(1469\)](#) | [Encounters \(283\)](#) | [COE Encounters \(19\)](#) | [Warnings](#) | [Instructions \(194\)](#) | [Restricted Docs \(12\)](#) | [Quick View](#) | [Forms Printed](#)
[Events \(1741\)](#) | [PQRI](#) | [Patient Log](#) | [E-History](#)

Last Updated On: 02/12/2010 at 02:53pm By DDM

Comments:	09/22/2009	Hard of Hearing
	04/25/2006	Take BP in Left Arm only -
	03/28/2006	Only speak with son John #222-2222

Allergies:	Ambien, Codeine Phosphate, IODINE-IODINE CONTAINING, PENICILLINS	Intolerances:	Morphine, Pravastatin
Current Meds:	Aspirin 81mg (ON hold x 2 days 1/26/10, 1/27/10), Aspirin 81mg (1 tablet every day), Aspirin 81mg (ON hold x 2 days 1/26/10, 1/27/10), Atenolol, Atenolol 25mg (1 tablet every day), Lasix, Lisinopril 10mg (1 tab every day), Multaq 400mg (1 tablet tid), Paroxetine HCl 20mg (1 tablet every day), Plavix 75mg (1 tablet every day), Plavix, Prasugrel 10mg (60 mg x1 dose then 10 mg/day)		
Conditions:	Angina Pectoris (other & unspecified), Atrial Fibrillation, Congenital Heart Disease, Coronary Artery Disease, Coronary Atherosclerosis of native coronary artery, Diabetes Mellitus, Diabetes, Non-insulin Dependent, Essential Hypertension, Guillain-Barre syndrome, Heart Failure, Hyperlipidemia (mixed), Hypertension, Hypertension (if unspecified), Right Heart Failure		

Prescription Details

Medication	Form	Start Date
<input type="text" value="Spironolactone (New)"/>	<input type="text"/>	03 -09 -2010 <input type="button" value="Today"/> <input type="button" value="Pick Date"/>
<input type="text" value="Spironolactone (New)"/> <input type="text" value="Spiriva with HandiHaler (New)"/> <input type="text" value="Spironolacton-Hydrochlorothiaz (New)"/> <input type="text" value="Sporanox (New)"/> <input type="text" value="Sporanox Intravenous (New)"/> <input type="text" value="Sporanox Oral (New)"/> <input type="button" value="Build"/>		
Duration	Quantity	Indication
30d	<input type="text"/>	<input type="text"/>
Refills	May Substitute	Prescriber
<input type="text"/>	<input checked="" type="radio"/> Yes <input type="radio"/> No	Engineering, Inc., Medical I
<input type="checkbox"/> Print/Fax <input type="checkbox"/> Print Drug Guide		

Special Instructions for Patient Education/Med Sheet

Office Comments

- OmniScope
- E-Chart
- Checkin
- E-Sign
- Scheduler
- Task List
- Dictation
- Coumadin
- Intranet
- Order Sets
- IN-Paging
- MIE Portal
- Control
- Reports
- EOB/Chgs
- Discharge
- Nuclear Ex.
- Echos
- TechOmni
- Fax Mgr
- WebScan
- Reference
- PKV Portal
- Logout
- TestTech

First practice to electronically collect and report PINNACLE data from *truly* integrated EHR module

- OmniScope
- E-Chart
- Checkin
- E-Sign
- Scheduler
- Task List
- Dictation
- Coumadin
- Intranet
- Order Sets
- IN-Paging
- MIE Portal
- Control
- Reports
- EOB/Chgs
- Discharge
- Nuclear Ex.
- Echos
- TechOmni
- Fax Mgr
- WebScan
- Reference
- PKV Portal
- Logout
- TestTech

[Doc Queue:30](#) [Physician:18](#) MR: M-I256594 Name: Oil, Olive A DOB: 11/01/1974
 DATE: 02/01/2010 PHYSICIAN: Engineering, Inc., Medical I VIS.TYPE: IC3 Data Collection | IC3 Data Collection | [View IC3DataCollection](#)
 DEMOs | [Vein Clinic Roster \(1\)](#) | [Rounding Lists \(1\)](#) | [Orders/Lab Orders \(76\)](#) | [Nurse Notes \(231\)](#) | [E-Meds \(12\)](#) | [Med Sheet \(11\)](#) | [Vitals](#) | [Maj Diag/Alg \(15\)](#) | [Trans \(263\)](#) | [CATH/EP \(17\)](#)
[Echo/Vasc/Vein Clinic \(76\)](#) | [DST/EKG \(161\)](#) | [ADC \(31\)](#) | [Labs \(259\)](#) | [Warfarin \(30\)](#) | [Misc \(222\)](#) | [Dictation \(194\)](#) | [Old Chart \(148\)](#) | [Tasks \(749\)](#) | [Schedules \(5\)](#) | [Ins/Dis/Bill \(84\)](#) | [Discharge \(33\)](#)
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[Events \(1741\)](#) | [PQRI](#) | [Patient Log](#) | [E-History](#)

MR: [M-I256594](#) Name: [Oil, Olive A](#) DOB: 11/01/1974 Age: 35 SSN: 302-81-4499 Sex: F Appt. Date: 03-09-2010 [Add Encounter](#) | [List All Encounters](#)
[LH-I256594](#) Chart Online: Full Home: [\(260\) 407-5523](#) Work: 000-0000 Cell: 511-5555
 Attending: [Charles F. Presti, M.D., F.A.C.C.](#) Referring: [Richard E Tielker MD](#)
 Death Date: **04/02/2009**
[Research Study](#): ACT-I [TRACER \(SCH 530348\)](#) [Vest Predicts Study](#)
[Print Chart](#) | [Add Apt.](#) | [Add Dictation](#) | [Add Task](#) | [Add Order](#) | [Prescribe](#)

[Create Preliminary Archive](#) | [Archive and Close Encounter](#)

IC³ Program

NCDR[®] IC³ Program[®] v1.0
 Data Collection Form
 Improving Continuous Cardiac Care.

MRN: M-I256594	Encounter Date: 02/01/2010	Practice ID:	Location: BLANK
Physician Name: Medical I Engineering, Inc.		Physician NPI:	

A. Patient Demographics

Patient Name (Last, First MI): Oil, Olive A		SSN: 302-81-4499	<input type="checkbox"/> Patient new to the Practice
Date of Birth: 11/01/1974		Sex: <input type="checkbox"/> Male <input checked="" type="checkbox"/> Female	Patient Zip: 46795-0000
Race:		<input type="checkbox"/> Hispanic or Latino Ethnicity	
<input checked="" type="checkbox"/> White	<input type="checkbox"/> Black/African American	<input type="checkbox"/> Asian	
<input type="checkbox"/> American Indian/Alaska Native	<input type="checkbox"/> Native Hawaiian/Pacific Islander		
Insurance Payers:		Payer ID: 12345	
<input type="checkbox"/> Private Health Insurance	<input checked="" type="checkbox"/> Medicare (fee for Service)	<input type="checkbox"/> Medicare (manage care)	<input type="checkbox"/> Medicaid <input type="checkbox"/> Military Health Care
<input type="checkbox"/> State Specific Plan (non-Medicaid)	<input type="checkbox"/> Indian Health Service	<input type="checkbox"/> Non-US Insurance	<input type="checkbox"/> None

B. Diagnoses/Conditions/Co-Morbidities

<input checked="" type="checkbox"/> Coronary Artery Disease			<input type="checkbox"/> Atrial Fibrillation/Flutter	<input checked="" type="checkbox"/> Atrial fibrillation	<input type="checkbox"/> Atrial flutter
<input checked="" type="checkbox"/> Hypertension			<input type="checkbox"/> Systemic Embolism	<input type="checkbox"/> Peripheral Arterial Disease	<input type="checkbox"/> Prior Stroke/TIA
<input type="checkbox"/> Unstable Angina			<input type="checkbox"/> Dyslipidemia	<input checked="" type="checkbox"/> Heart Failure --> (If Yes),	<input type="checkbox"/> New diagnosis (within 12 months)
			<input checked="" type="checkbox"/> Diabetes Mellitus	<input type="checkbox"/> Stable Angina --> (If Yes),	<input type="checkbox"/> New diagnosis (within 12 months)

C. Cardiac Events

<input type="checkbox"/> Myocardial Infarction		<input type="checkbox"/> PCI - Bare Metal Stent Implant			
<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> PCI - Drug Eluting Stent Implant	<input type="checkbox"/> None



GOVERNMENT

IF YOU THINK THE PROBLEMS WE CREATE ARE BAD,
JUST WAIT UNTIL YOU SEE OUR SOLUTIONS.

www.despair.com

Meaningful Use Dashboard



- Quick View
- E-Chart
- Checkin
- Scheduler
- Task List
- E-Sign
- Dictation
- Control Panel
- WebScan
- Fax Manager
- Reports
- Coumadin
- Logout

To begin tracking statistics for Meaningful Use eligible providers need to opt-in using this form by providing a "Start Date" to begin tracking measurements and choose which measures they would like to be enrolled in.

Meaningful Use Setup

User	Rachel Kuna,
Opt-In	<input type="checkbox"/>
Start Date	MM DD YYYY Today

[Learn more about Meaningful Use Measures](#)

Core Measures - All Mandatory

Allergy List ?	Med List ?
Chart Vitals ?	Meds CPOE ?
Clinical Summary ?	Problem List ?
Decision Support ?	Quality Reporting ?
Demographics ?	Security ?
Drug Interaction ?	Smoking Status ?
E-copy to Patient ?	eRx ?
Exchange ?	

Menu Measures - Choose at least 5

<input type="checkbox"/> Condition Report ?	<input type="checkbox"/> Patient Reminders ?
<input type="checkbox"/> eLab ?	<input type="checkbox"/> PHR ?
<input type="checkbox"/> Formulary ?	<input type="checkbox"/> Patient Education ?
<input type="checkbox"/> Med Rec ?	<input type="checkbox"/> Summary of Care ?
<input type="checkbox"/> Immunizations Registry ?	<input type="checkbox"/> Syndromics (Rescinded) ?

(required public health objective)

[Learn more about Quality Reporting Measures](#)

Quality Reporting - 3 Core, 3 Alternate

Core

Adult Weight Screening ?	Tobacco Use ?
Hypertension - BP Measurement ?	

Alternate Core

Childhood Immunization ?	Weight ?
Influenza 50+ ?	

Alternate

<input type="checkbox"/> Alcohol/Drug Dependence ?	<input type="checkbox"/> Diabetes - Foot Exam ?
<input type="checkbox"/> Anti-depressant ?	<input type="checkbox"/> Diabetes - LDL ?
<input type="checkbox"/> Asthma (Persistent) ?	<input type="checkbox"/> Diabetes - Urine Screen ?
<input type="checkbox"/> Asthma - Assessment ?	<input type="checkbox"/> Diabetic Retinopathy - Evaluation ?
<input type="checkbox"/> Asthma - Therapy ?	<input type="checkbox"/> Diabetic Retinopathy - Ongoing ?
<input type="checkbox"/> Blood Pressure Control ?	<input type="checkbox"/> HF - ACE/ARB ?
<input type="checkbox"/> Breast Cancer - Hormonal Therapy ?	<input type="checkbox"/> HF - Beta Blocker ?
<input type="checkbox"/> Breast Cancer Screen ?	<input type="checkbox"/> HF - Warfarin ?
<input type="checkbox"/> CAD - Antiplatelet ?	<input type="checkbox"/> IVD - Aspirin ?
<input type="checkbox"/> CAD - Beta Blocker ?	<input type="checkbox"/> IVD - BP Management ?
<input type="checkbox"/> CAD - LDL-Lowering ?	<input type="checkbox"/> IVD - Lipid Control ?

Measure Selection



To begin tracking statistics for Meaningful Use eligible providers need to opt-in using this form by providing a "Start Date" to begin tracking measurements and choose which measures they would like to be enrolled in.

- Quick View
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- Checkin
- Scheduler
- Task List
- E-Sign
- Dictation
- Control Panel
- WebScan
- Fax Manager
- Reports
- Coumadin
- Logout

Meaningful Use Setup

User	Rachel Kuna,
Opt-In	<input checked="" type="checkbox"/>
Start Date	03 / 04 / 2011 Today

[Learn more about Meaningful Use Measures](#) [Learn more about Quality Reporting Measures](#)

Core Measures - All Mandatory

Allergy List ?	Med List ?
Chart Vitals ?	Meds CPOE ?
Clinical Summary ?	Problem List ?
Decision Support ?	Quality Reporting ?
Demographics ?	Security ?
Drug Interaction ?	Smoking Status ?
E-copy to Patient ?	eRx ?
Exchange ?	

Menu Measures - Choose at least 5

<input checked="" type="checkbox"/> Condition Report ?	<input checked="" type="checkbox"/> Patient Reminders ?
<input type="checkbox"/> eLab ?	<input checked="" type="checkbox"/> PHR ?
<input type="checkbox"/> Formulary ?	<input checked="" type="checkbox"/> Patient Education ?
<input checked="" type="checkbox"/> Med Rec ?	<input type="checkbox"/> Summary of Care ?
<input type="checkbox"/> Immunizations Registry ?	<input type="checkbox"/> Syndromics (Rescinded) ?

(required public health objective)

Quality Reporting - 3 Core, 3 Alternate

Core	
Adult Weight Screening ?	Tobacco Use ?
Hypertension - BP Measurement ?	
Alternate Core	
Childhood Immunization ?	Weight ?
Influenza 50+ ?	
Alternate	
<input type="checkbox"/> Alcohol/Drug Dependence ?	<input type="checkbox"/> Diabetes - Foot Exam ?
<input type="checkbox"/> Anti-depressant ?	<input type="checkbox"/> Diabetes - LDL ?
<input type="checkbox"/> Asthma (Persistent) ?	<input type="checkbox"/> Diabetes - Urine Screen ?
<input type="checkbox"/> Asthma - Assessment ?	<input type="checkbox"/> Diabetic Retinopathy - Evaluation ?
<input type="checkbox"/> Asthma - Therapy ?	<input type="checkbox"/> Diabetic Retinopathy - Ongoing ?
<input type="checkbox"/> Blood Pressure Control ?	<input type="checkbox"/> HF - ACE/ARB ?
<input type="checkbox"/> Breast Cancer - Hormonal Therapy ?	<input type="checkbox"/> HF - Beta Blocker ?
<input type="checkbox"/> Breast Cancer Screen ?	<input type="checkbox"/> HF - Warfarin ?
<input type="checkbox"/> CAD - Antiplatelet ?	<input type="checkbox"/> IVD - Aspirin ?
<input type="checkbox"/> CAD - Beta Blocker ?	<input type="checkbox"/> IVD - BP Management ?
<input type="checkbox"/> CAD - LDL-Lowering ?	<input type="checkbox"/> IVD - Lipid Control ?
<input type="checkbox"/> Cervical Cancer Screen ?	<input type="checkbox"/> Low Back Pain - Imaging ?
<input type="checkbox"/> Chlamydia Screen ?	<input type="checkbox"/> POAG ?
<input type="checkbox"/> Colon Cancer - Chemotherapy ?	<input type="checkbox"/> Pharyngitis Testing ?
<input type="checkbox"/> Colorectal Cancer Screen ?	<input type="checkbox"/> Pneumonia Vaccination ?
<input checked="" type="checkbox"/> Diabetes - A1c Control ?	<input type="checkbox"/> Prenatal HIV Screen ?
<input type="checkbox"/> Diabetes - A1c Poor Control ?	<input type="checkbox"/> Prenatal Immune Globulin ?
<input checked="" type="checkbox"/> Diabetes - BP ?	<input type="checkbox"/> Prostate Cancer - Bone Scan Use ?
<input checked="" type="checkbox"/> Diabetes - Eye Exam ?	<input type="checkbox"/> Tobacco Cessation ?

Embedded Measure Information



To begin tracking statistics for Meaningful Use eligible providers need to opt-in using this form by providing a "Start Date" to begin tracking measurements and choose which measures they would like to be enrolled in.

- Quick View
- E-Chart
- Checkin
- Scheduler
- Task List
- E-Sign
- Dictation
- Control Panel
- WebScan
- Fax Manager
- Reports
- Coumadin
- Logout

Meaningful Use Setup

User: Rachel Kuna,
Opt-In:
Start Date: 03 -04 -2011 Today

[Learn more about Meaningful Use Measures](#)

[Learn more about Quality Reporting Measures](#)

Core Measures - All Mandatory

- Allergy List ?
- Chart Vitals ?
- Clinical Summary ?
- Decision Support ?
- Demographics ?
- Drug Interaction ?
- E-copy to Patient ?
- Exchange ?
- Med List ?
- Meds CPOE ?
- Problem List ?
- Quality Repo ?
- Security ?
- Smoking Sta ?
- eRx ?

Quality Reporting - 3 Core, 3 Alternate

MU-C05 Objectives
Maintain active medication list.

Measure:
More than 80% of all unique patients seen by the EP or admitted to the eligible hospital's or CAH's inpatient or Emergency department (PO10S 21 or 23) have at least one entry (or an indication that the patient is not currently prescribed any medication) recorded as structured data.

Menu Measures - Choose at least 5

- Condition Report ?
 - eLab ?
 - Formulary ?
 - Med Rec ?
 - Immunizations Registry ?
 - Patient Reminders ?
 - PHR ?
 - Patient Education ?
 - Summary of Care ?
 - Syndromics (Rescinded) ?*
- (required public health objective)*

- Asthma (Persistent) ?
- Asthma - Assessment ?
- Asthma - Therapy ?
- Blood Pressure Control ?
- Breast Cancer - Hormonal Therapy ?
- Breast Cancer Screen ?
- CAD - Antiplatelet ?
- CAD - Beta Blocker ?
- CAD - LDL-Lowering ?
- Cervical Cancer Screen ?
- Chlamydia Screen ?
- Diabetes - Urine Screen ?
- Diabetic Retinopathy - Evaluation ?
- Diabetic Retinopathy - Ongoing ?
- HF - ACE/ARB ?
- HF - Beta Blocker ?
- HF - Warfarin ?
- IVD - Aspirin ?
- IVD - BP Management ?
- IVD - Lipid Control ?
- Low Back Pain - Imaging ?
- POAG ?

Meaningful Use Meter

mie Esign (3) Physicians (1) DocQueue (3) User: Kuna, Rachel - Administrator

Quick View E-Chart Checkin Scheduler Task List E-Sign Dictation Control Panel WebScan Fax Manager Reports Coumadin Logout

24 Schedule Kuna, Rachel

Time	Pat Last	Pat First	Pat Middle	Appt. Type(s)	Location	Comment
09:00	Doe, John, L.			Office Visit	Established Office	Patient has had symptoms for over a week.
09:15	Doe, Jane, M			Office Visit	Established Office	
09:30	Hart, William, S.			Office Visit	Established Office	
09:45	Pregnant, Jennifer, A.			Office Visit	Established Office	

Meaningful Use

Complete	Name
0 / 0	Adult Weight Screening ? details
0 / 0	Allergy List ? details
0 / 0	Chart Vitals ? details
0 / 0	Childhood Immunization ? details
0 / 0	Clinical Summary ? details
0 / 0	Demographics ? details
0 / 0	Diabetes - A1c Control ? details
0 / 0	Diabetes - BP ? details
0 / 0	Diabetes - Eye Exam ? details
0 / 0	E-copy to Patient ? details
0 / 0	eRx ? details
0 / 0	Hypertension - BP Measurement ? details
0 / 0	Influenza 50+ ? details
0 / 0	Med List ? details
0 / 0	Med Rec ? details
0 / 0	Meds CPOE ? details
0 / 0	Patient Education ? details
0 / 0	Patient Reminders ? details
0 / 0	PHR ? details
0 / 0	Problem List ? details
0 / 0	Smoking Status ? details
0 / 0	Tobacco Use ? details
0 / 0	Weight ? details

Recalculate Measures

Meaningful Use Visit

The screenshot displays a medical software interface for a patient named Jennifer A. Pregnant. The top navigation bar includes the 'mie' logo, user information (User: Kuna, Rachel - Administrator), and patient details (MR: MIE-10021, Name Pregnant, Jennifer A., DOB: 04-10-1969). The main header shows the date (03-04-2011) and physician (Kuna, Rachel) with a 'Meaningful Use' status. Below this, a series of tabs are visible: Patient Summary, Current, Admin (2), Health Surveillance, Visits (39), Test Results (5), and Document Summary (7). A secondary navigation bar contains links for adding new physicians, printing charts, adding appointments, dictations, tasks, orders, emails, and prescriptions. On the right side, there are links for adding documents and selecting portlets.

The interface is divided into several portlets:

- Demographics:** Displays patient information for Jennifer A. Pregnant, including address (317 Norwalk Drive, Apt 1B, Angeltown, MA 02111), home phone, email (support@mieweb.com), age (41), and birthdate (04-10-1969). It also lists work information (Babies R Us, Store #43, Angeltown, MA, work phone) and emergency contact (William Hart, phone).
- Warnings & Alerts:** Features a 'Guideline Alerts' section with four items: 'This patient is past due for a MMR injection', 'This patient is past due for a Varicella injection', 'This patient is past due for an Annual Mammogram', and 'This patient is past due for an Annual Pap Exam'. Each item has a 'Dismiss' link.
- Quick Links:** A list of actions including 'Add Appt', 'Add Dictation', 'Add Task', 'Add Order', 'Email', 'Add "Meaningful Use" Visit', 'Add Office Visit - Initial', 'Add Office Visit - Follow Up', 'Prescribe', and 'Print Chart'. The 'Add "Meaningful Use" Visit' link is circled in blue.
- Allergies:** Shows a list of allergies, including 'SULFA (SULFONAMIDE ANTIBIOTICS)'.
- Medications:** Lists several medications with search links: 'Albuterol Sulfate Inhalation 90mcg/Actuation (2 puffs q4h prn)', 'Amoxicillin 500mg (1 tid)', 'aspirin Oral 325mg (one bid)', 'Lipitor 40mg (1 qd)', and 'Vitamin B-6 50mg (1/2 tab qd)'.
- Labs:** A table with columns for 'Service Date', 'Doc Type', and 'By'.
- Documents:** A section for managing patient documents.
- Patient Portal:** A message stating 'A NoMoreClipboard.com account is not linked to this patient.' with a 'Post Summary' button and a link to 'Post a Summary to NoMoreClipboard.com'.

MU Meter Updates in Real Time

mie Esign (3) Physicians (1) DocQueue (3) User: Kuna, Rachel - Administrator

Quick View 24 Schedule Meaningful Use

Kuna, Rachel

Time	Pat Last	Pat First	Pat Middle	Appt. Type(s)	Location	Comment
09:00	Doe, John, L.			Office Visit	Established Office	Patient has had symptoms for over a week.
09:15	Doe, Jane, M			Office Visit	Established Office	
09:30	Hart, William, S.			Office Visit	Established Office	
09:45	Pregnant, Jennifer, A.			Office Visit	Established Office	

Complete **Name**

- 0 / 0 Adult Weight Screening [details](#)
- 1 / 1 (100%) Allergy List [details](#)
- 1 / 1 (100%) Chart Vitals [details](#)
- 0 / 0 Childhood Immunization [details](#)
- 0 / 0 Clinical Summary [details](#)
- 1 / 1 (100%) Demographics [details](#)
- 0 / 1 (0%) Diabetes - A1c Control [details](#)
- 0 / 0 Diabetes - BP [details](#)
- 0 / 0 Diabetes - Eye Exam [details](#)
- 0 / 1 (0%) E-copy to Patient [details](#)
- 1 / 1 (100%) eRx [details](#)
- 0 / 0 Hypertension - BP Measurement [details](#)
- 0 / 0 Influenza 50+ [details](#)
- 1 / 1 (100%) Med List [details](#)
- 1 / 1 (100%) Med Rec [details](#)
- 0 / 1 (0%) Meds CPOE [details](#)
- 1 / 1 (100%) Patient Education [details](#)
- 1 / 1 (100%) Patient Reminders [details](#)
- 0 / 1 (0%) PHR [details](#)
- 1 / 1 (100%) Problem List [details](#)
- 0 / 0 Smoking Status [details](#)
- 0 / 0 Tobacco Use [details](#)
- 0 / 0 Weight [details](#)

[Recalculate Measures](#)

Address Deficiencies In-Line



- Quick View
- E-Chart
- Checkin
- Scheduler
- Task List
- E-Sign
- Dictation
- Control Panel
- WebScan
- Fax Manager
- Reports
- Coumadin
- Logout

Filter Criteria

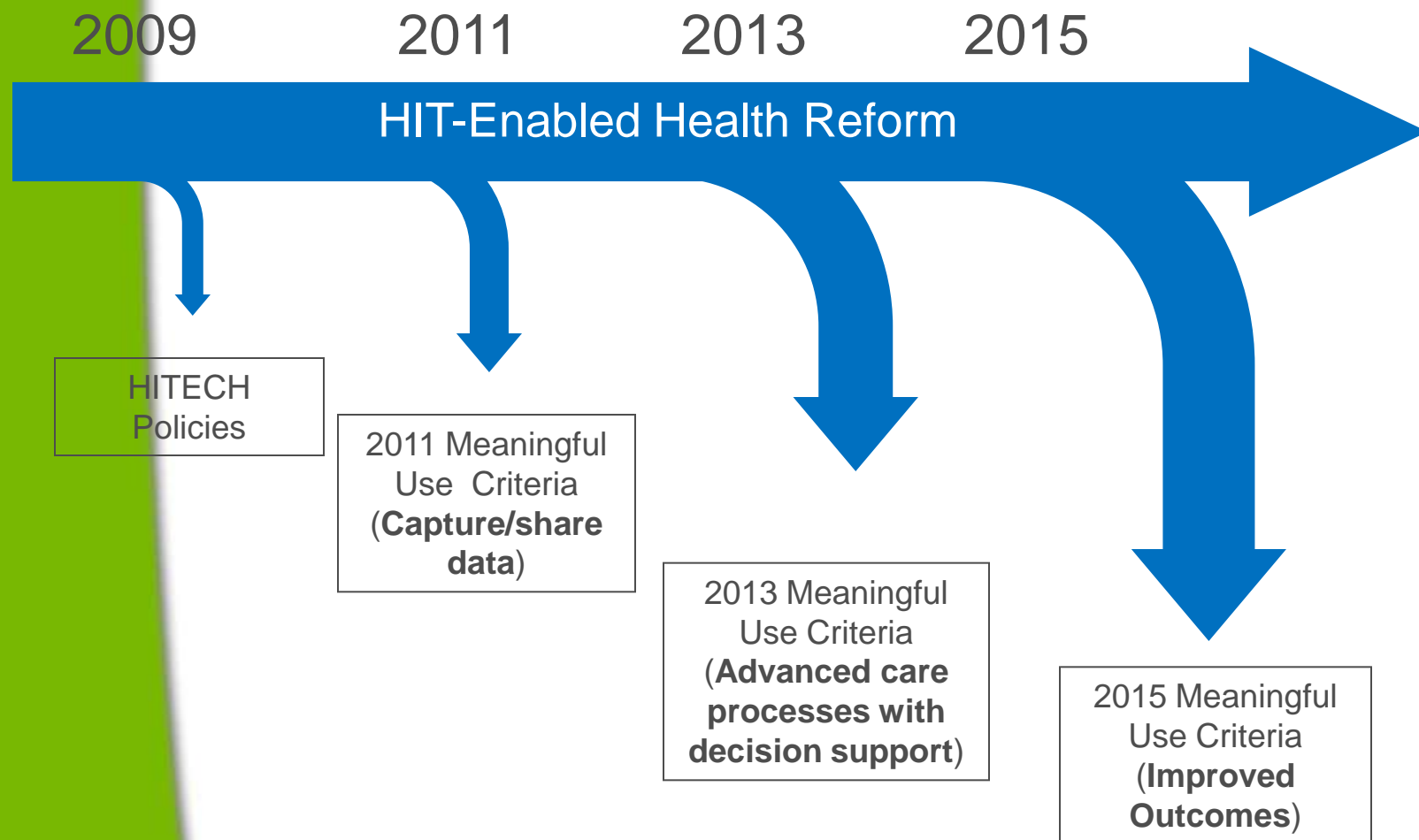
Measure	MU-M05
Performing Doctor	Kuna, Rachel
Pass/Fail	Show All
<input type="button" value="Search"/>	

[Hide Measures Report](#) | [Show CSV](#) | [View Printable](#) | [Perform](#)

MR Number	Patient	Measure	Pass/Fail	Encounter	Performing User	Encounter Type	Service Date
MIE - 10021	Pregnant, Jennifer	M05	Fail	58	Kuna, Rachel	MEANUSE	03-04-2011 10:33:48

Displaying 1-1
[Show All](#)

Meaningful Use is Being Defined and Will Follow an “Ascension Path” Over Time



Even prepared for patient and family engagement meaningful use requirements



The image shows a screenshot of the Fort Wayne Cardiology website. The header features a photograph of the Indiana State Capitol building and the Fort Wayne skyline, with the logo and name 'FORT WAYNE CARDIOLOGY' to the right. Below the header is a large yellow banner with the text 'ABOUT US'. On the left side, there is a vertical navigation menu with the following items: Home, About Us, Our Services, Our Physicians, Our Locations, Wellness & Nutrition, Patient Education, Our Research, Patient Forms, Billing & Insurance, and Employment Opportunities. At the bottom of the menu is a blue button for 'Online Patient Registration' with the text 'NoMoreClipboard.com' above it. The main content area is titled 'ABOUT US' and contains three sections: 'A History of Growth', 'A Culture of Care and Innovation', and a partially visible section at the bottom. The 'A History of Growth' section describes the organization's establishment in 1978 and its growth to 22 physicians and 175 staff members. The 'A Culture of Care and Innovation' section highlights the organization's commitment to cutting-edge care and its annual volume of 30,000 office visits and 73,000 tests/procedures. A photograph of a doctor and a nurse reviewing a laptop is shown on the right side of the page.

FORT WAYNE CARDIOLOGY

ABOUT US

- Home
- About Us
- Our Services
- Our Physicians
- Our Locations
- Wellness & Nutrition
- Patient Education
- Our Research
- Patient Forms
- Billing & Insurance
- Employment Opportunities

A History of Growth

Fort Wayne Cardiology was established in 1978 with two cardiologists, one secretary, and one small office. Today we have a much larger, highly trained staff of 22 physicians and more than 175 nurses, medical assistants, technicians, and administrative professionals.

Our growth over the last 30 years, while remarkable, has been controlled and deliberate. We refuse to let a single-minded focus on growth compromise our mission or the quality of care we provide.

In addition to our two Fort Wayne office locations, we provide 24-hour coverage at Lutheran and Parkview hospitals and provide services at 11 clinics in surrounding communities.


A Culture of Care and Innovation

We are proud to offer our patients a combination of cutting-edge thinking, skillful care, and extensive experience. Each year, we average nearly 30,000 office visits and consultations outside the hospital as well as some 30,000 daily hospital visits and consultations. In addition, we average approximately 73,000 tests and procedures annually, from electrocardiograms and stress tests to angiograms and pacemaker implants.

Fort Wayne Cardiology leads the way in local coronary care, combining an impressive track record of innovation with a case volume that continually enhances our expertise.



Branded PHR/patient portal




Account Summary **Member Summary** **Mailbox: 1** **E-Clipboard: 4** **Log Out**


Logged in as: jeffycool Viewing Member: Donnell, Sean Age: 47, Sex: M **Help**

Member Access Center [Edit]

- Edit Member Summary Layout**
Change what sections appear on this members summary screen.
- Member Review**
Go through a step by step medical review for Sean.
- Access Privileges**
Manage access to your PHR information.
- Print Summary**
View and print a summary of this member.
- Share my PHR information with others**
Share your PHR information with your physicians and other providers.
- Print NMC911 Card**
View and print an NMC911.com card for this member.

Sean's Registration Information [Edit]

 Sean Donnell
920 Southview
Indianapolis, IN 46227
Home #: (317) 787-1010
Email: jdonnell@nomoreclipboard.com
Age: 47, Birthdate: 10-19-1962

 [Update Photo](#)

Employment:
Consultant
Self-employed
Work #: (317) 111-1111

Emergency Contact:
Susan Donnell
Spouse


Insurance [Edit]

- ANTHEM BCBS (Holder: Sean Donnell - Policy#: 1212 - Group#: 1234567)

Fort Wayne Cardiology

[Send a registration form to one of our Physicians](#)

My Medicare [View]



New My Medicare content will be imported into your PHR records nightly when available from Medicare.
[Click here to opt-in or opt-out of having your My Medicare data import into NoMoreClipboard.](#)





Microsoft HealthVault [Preferences]

* - Currently, NoMoreClipboard.com syncs the following information between accounts:
Basic demographic information, medications, allergies, conditions, procedures, weight, height, blood pressure, blood glucose . . .
[Create a connection with an MS HealthVault Account](#)

Google Health [Preferences]

Google Health account last updated: February 17, 2010.
[Send Data to Google Health Profile](#)
[Get Data from Google Health Profile](#)

Current Medications [Edit]

- Abbokinase 
- Advair Diskus 100-50mcg/Dose (As needed) 
- Allegra 30mg (By mouth) 
- Aspirin Oral 81mg (Oral once daily) 
- Aspirin Oral 81mg (Oral once daily) 

The Core Idea

Adoption



Meaningful Use



Outcomes

EHR Selection

Functionality and Usability

Benefits of HIT Adoption

- Improved Quality
- Reduction in Medical Errors (e-Prescribe)
- Mitigation of Medical-Legal Risk

Hospital Based Penalties for Failure to Meet Meaningful Use



- Beginning in 2015, if hospitals fail to demonstrate the Meaningful Use of HIT they will see a significant reduction in their annual market-basket update
 - 2015 → 33.3 % reduction in market-basket update
 - 2016 → 66.7 % reduction in market-basket update
 - 2017 → Market basket update eliminated

Penalties for Eligible Providers



- Physicians failing to demonstrate Meaningful Use by 2015 will have their (Medicare) fee schedules reduced to:
 - 99 % in 2015
 - 98 % in 2016
 - 97 % in 2017
 - ARRA authorizes HHS Secretary to further reduce physician payments by 2% in or after 2018

Comments?

- MichaelMirro@gmail.com