

# Meaningful Use

## CQM Progress Checklist



This progress checklist is designed to assist the Eligible Professional (EP) in tracking CQM measures during a reporting period. Tracking your progress on a weekly basis is important so that you can clearly see how your practice compares to the threshold of each measure and where improvement is needed. You could also use this checklist to track your progress in anticipation of your reporting period to monitor which areas of measurement indicate a weakness.

To track your progress, you will run a weekly CQM report, as outlined below, and enter the results in the checklist on Page 2.

### How to Use the Checklist

1. Print the checklist on Page 2.
2. Complete the information at the top of the checklist, including “Reporting Period.”
3. Indicate which CQMs you plan to attest to by checking the box by each.
4. At the end of the week, print the CQM Report:
  - a. In the Kareo EHR, hover over Menu in the top left and click **Reports**.
  - b. Select CQM from the drop-down menu.
  - c. Select a date range (your attestation goal).
  - d. Select a provider from the User drop-down list.
  - e. Click **Configure Report**.
  - f. The report will be generated at 12:00am and will be available for review the next morning.
5. Transfer the results in the report to your checklist.
6. Repeat each week for the duration of your reporting period to track improvements or weaknesses, and ensure that all selected measures have been satisfied.



Provider: \_\_\_\_\_

- Yes I am an Eligible Professional.
- Yes I have completed the CMS Registration.

- Stage 1, Year 1
- Stage 1, Year 2
- Stage 2, Year 1

Reporting Period: \_\_\_\_\_

- April - June 2014
- July - September 2014
- October - December 2014

				Week (Enter Dates Above Numbers)													
Attest	Requirement #	MU Requirement	Threshold	1	2	3	4	5	6	7	8	9	10	11	12	13	Final
<b>2014 CQMS Adult Recommended Core Measures</b>																	
<input type="checkbox"/> Yes	CMS 2	Preventive Care & Screening: Screening for Clinical Depression & Follow-up Plan	None														
<input type="checkbox"/> Yes	CMS 50	Closing the referral loop: Receipt of Specialist Report	None														
<input type="checkbox"/> Yes	CMS 68	Documentation of Current Medications in the Medical Record	None														
<input type="checkbox"/> Yes	CMS 69*	Preventive Care & Screening: BMI Screening & follow-up	None														
<input type="checkbox"/> Yes	CMS 90	Assessment for complex Chronic Conditions	None														
<input type="checkbox"/> Yes	CMS 138*	Preventive Care & Screening: Tobacco Use: Screening & Cessation Intervention	None														
<input type="checkbox"/> Yes	CMS 156	Use of High-Risk Medication in the Elderly	None														
<input type="checkbox"/> Yes	CMS 165*	Controlling High Blood Pressure	None														
<input type="checkbox"/> Yes	CMS 166	Use of Imaging Studies for Low Back Pain	None														
<b>2014 CQMS Pediatric Recommended Core Measures</b>																	
<input type="checkbox"/> Yes	CMS 2	Preventive Care & Screening: Screening for Clinical Depression & Follow-up Plan	None														
<input type="checkbox"/> Yes	CMS 75	Children who have Dental Decay or Cavities	None														
<input type="checkbox"/> Yes	CMS 117*	Childhood Immunization Status	None														
<input type="checkbox"/> Yes	CMS 126	Use of Appropriate Medications for Asthma	None														
<input type="checkbox"/> Yes	CMS 136	ADHD: Follow-up Care for Children Prescribed ADHD Medication	None														
<input type="checkbox"/> Yes	CMS 146	Appropriate Testing for Children with Pharyngitis	None														
<input type="checkbox"/> Yes	CMS 153	Chlamydia Screening for Women	None														
<input type="checkbox"/> Yes	CMS 154	Appropriate Treatment for Children with Upper Respiratory Infection	None														
<input type="checkbox"/> Yes	CMS 155*	Nutrition & Physical Activity for Children and Adolescents	None														
<b>2014 CQMS Alternate Core Measures</b>																	
<input type="checkbox"/> Yes	CMS 127*	Pneumonia Vaccination Status for Older Adults	None														
<input type="checkbox"/> Yes	CMS 147*	Preventive Care & Screening: Influenza Immunization	None														

\* Indicates that this measures was carried over from the 2011 Edition.