Stage 2

Eligible Hospital and Critical Access Hospital Meaningful Use Core Measures Measure 16 of 16

Date issued: October, 2012

Electronic Medication Administration Record (eMAR)	
Objective	Automatically track medications from order to administration using assistive technologies in conjunction with an electronic medication administration record (eMAR).
Measure	More than 10 percent of medication orders created by authorized providers of the eligible hospital's or CAH's inpatient or emergency department (POS 21 or 23) during the EHR reporting period for which all doses are tracked using eMAR.
Exclusion	Any eligible hospital or CAH with an average daily inpatient census of fewer than 10 patients.

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Definition of Terms

electronic Medication Administration Record (eMAR) – Technology that automatically documents the administration of medication into certified EHR technology using electronic tracking sensors (for example, radio frequency identification (RFID)) or electronically readable tagging such as bar coding).

Average daily inpatient census – The total number of patients admitted during the previous calendar year divided by 365 (or 366 if the previous calendar year is a leap year).

Attestation Requirements

DENOMINATOR/ NUMERATOR/THRESHOLD/EXCLUSION

- DENOMINATOR: Number of medication orders created by authorized providers in the eligible hospital's or CAH's inpatient or emergency department (POS 21 or 23) during the EHR reporting period.
- NUMERATOR: The number of orders in the denominator for which all doses are tracked using eMAR.
- THRESHOLD: The resulting percentage must be more than 10 percent in order for an eligible hospital or CAH to meet this measure.
- EXCLUSION: Any eligible hospital or CAH with an average daily inpatient census of fewer than 10 patients.





Additional Information

- The provider is permitted, but not required, to limit the measure of this objective to those patients whose records are maintained using certified EHR technology.
- If a medication is ordered but not all doses of the medication are tracked using eMAR, then that order may not be included in the numerator of the measure.
- It is not required that eMAR is implemented in both inpatient and emergency departments in order to meet this measure, only that more than 10 percent of medication orders created by authorized providers of either the inpatient or emergency department (POS 21 or 23) during the EHR reporting period are tracked using eMAR.
- In order to meet this objective and measure, an eligible hospital or CAH must use the capabilities and standards of CEHRT at 45 CFR 170.314(a)(16), (g)(1), (g)(2).

Certification and Standards Criteria

Below is the corresponding certification and standards criteria for electronic health record technology that supports achieving the meaningful use of this objective.

Certification Criteria*

§ 170.314(a)(16) Inpatient setting only – electronic medication administration record

- (i) In combination with an assistive technology that provides automated information on the "rights" specified in paragraphs (a)(16)(i)(A) through (E) of this section, enable a user to electronically verify the following before administering medication(s):
 - (A) Right patient. The patient to whom the medication is to be administered matches the medication to be administered.
 - (B) Right medication. The medication to be administered matches the medication ordered for the patient.
 - (C) Right dose. The dose of the medication to be administered matches the dose of the medication ordered for the patient.
 - (D) Right route. The route of medication delivery matches the route specified in the medication order.
 - (E) Right time. The time that the medication was ordered to be administered compared to the current time.
- (ii) Right documentation. Electronically record the time and date in accordance with the standard specified in § 170.210(g), and user identification when a medication is administered.

Standards Criteria

§ 170.210(g) Synchronized clocks The date and time recorded utilize a system clock that has been synchronized following (RFC 1305) Network Time Protocol, (incorporated by reference in § 170.299) or (RFC 5905) Network Time Protocol Version 4, (incorporated by reference in § 170.299).





^{*}Depending on the type of certification issued to the EHR technology, it will also have been certified to the certification criterion adopted at 45 CFR 170.314 (g)(1), (g)(2), or both, in order to assist in the calculation of this meaningful use measure.