

PCMH Recognition Checklist

Standard	Requirement	Technology Level
PCMH1: Enhance Access and Continuity		
Element A-Access During Office Hours—MUST PASS		
1. Providing same-day appointments	<input type="checkbox"/> Policy AND <input type="checkbox"/> 1 week call log	Basic
2. Providing timely clinical advice by telephone during office hours.	<input type="checkbox"/> Policy AND <input type="checkbox"/> 1 week call log	Basic
3. Providing timely clinical advice by secure electronic messages during office hours.	<input type="checkbox"/> Policy AND <input type="checkbox"/> 1 week call log	
4. Documenting clinical advice in the medical record.	<input type="checkbox"/> Policy AND <input type="checkbox"/> 1 month report OR <input type="checkbox"/> 3 examples	
Element B-After Hours Access		
1. Providing access to routine and urgent-care appointments outside regular business hours.	<input type="checkbox"/> Policy AND <input type="checkbox"/> Proof of Hours (website, brochure, etc.)	
2. Providing continuity of medical record information for care and advice when the office is not open.	<input type="checkbox"/> Policy	
3. Providing timely clinical advice by telephone when the office is not open.	<input type="checkbox"/> Policy AND <input type="checkbox"/> 1 week report	
4. Providing timely clinical advice using a secure, interactive Electronic system when the office is not open.	<input type="checkbox"/> Policy AND <input type="checkbox"/> 1 week report	
5. Documenting after-hours clinical advice in patient records.	<input type="checkbox"/> Policy AND <input type="checkbox"/> 1 month report (N/D) OR <input type="checkbox"/> 3 examples	
Element C-Electronic Access		
1. More than 50 percent of patients who request an electronic copy of their health information (including problem list, diagnoses, diagnostic test results, medication lists, allergies) received it within three business days.	<input type="checkbox"/> 3 month report (N/D)	Advanced
2. At least 10 percent of patients have electronic access to their current health information (including lab results, problem list, medication lists, and allergies) within four business days from when the information is available to practice.	<input type="checkbox"/> 3 month report (N/D)	Advanced
3. Clinical summaries are provided to patients for more than 50 percent of office visits within three business days.	<input type="checkbox"/> 3 month report (N/D)	Advanced
4. Two-way communication between patients/families and the practice.	<input type="checkbox"/> Screen shot demonstrating capability	Advanced
5. Request for appointments or prescription refills.	<input type="checkbox"/> Screen shot demonstrating capability	Advanced
6. Request for referrals or test results.	<input type="checkbox"/> Screen shot demonstrating capability	Advanced

Standard	Requirement	Technology Level
Element D-Continuity		
1. Expecting patients/families to select a personal clinician.	<input type="checkbox"/> Policy	
2. Documenting the patient's/family's choice of clinician.	<input type="checkbox"/> Screen shot demonstrating capability	
3. Monitoring the percentage of patient visits with a selected clinician or team.	<input type="checkbox"/> 1 week report	
Element E-Medical Home Responsibilities		
1. The practice is responsible for coordinating patient care across multiple settings.	<input type="checkbox"/> Policy AND	<input type="checkbox"/> Has materials it provides to patients such as: <ul style="list-style-type: none"> -- patient brochure -- written statement -- link to online video -- website -- patient compact
2. Instructions on obtaining care and clinical advice during office hours and when the office is closed.	<input type="checkbox"/> Policy AND	<input type="checkbox"/> Has materials it provides to patients such as: <ul style="list-style-type: none"> -- patient brochure -- written statement -- link to online video -- website -- patient compact
3. The practice functions most effectively as a medical home if patients/families provide a complete medical history and information of care obtained outside the practice.	<input type="checkbox"/> Policy AND	<input type="checkbox"/> Has materials it provides to patients such as: <ul style="list-style-type: none"> -- patient brochure -- written statement -- link to online video -- website -- patient compact
4. The care team gives the patient/family access to evidence-based care and self-management support.	<input type="checkbox"/> Policy AND	<input type="checkbox"/> Has materials it provides to patients such as: <ul style="list-style-type: none"> -- patient brochure -- written statement -- link to online video -- website -- patient compact

Standard	Requirement	Technology Level
Element F-Culturally and Linguistically Appropriate Services		
1. Assessing the racial and ethnic diversity of its population	<input type="checkbox"/> Policy AND <input type="checkbox"/> Overall Report	Basic
2. Assessing the language needs of its population	<input type="checkbox"/> Policy AND <input type="checkbox"/> Overall Report	Basic
3. Providing interpretation or bilingual services to meet the language needs of its population.	<input type="checkbox"/> Policy AND <input type="checkbox"/> Example of Service	Basic
4. Providing printed materials in the languages of its population.	<input type="checkbox"/> Screen Shot or Supporting Documentation	Basic
Element G-Practice Team		
1. Defining roles for clinical and nonclinical team members.	<input type="checkbox"/> Job Descriptions	Basic
2. Having regular team meetings or a structured communication process	<input type="checkbox"/> Policy AND <input type="checkbox"/> Minutes from meeting, agenda, etc.	Basic
3. Using standing orders for services	<input type="checkbox"/> Example of written standing orders	Basic
4. Training and assigning care teams to coordinate care for individual patients.	<input type="checkbox"/> Policy AND <input type="checkbox"/> Description of training schedule	Basic
5. Training and assigning care teams to support patients and families in self-management, self-efficacy and behavior change.	<input type="checkbox"/> Policy AND <input type="checkbox"/> Description of training schedule	Basic
6. Training and assigning care teams for patient population management.	<input type="checkbox"/> Policy AND <input type="checkbox"/> Description of training schedule	Basic
7. Training and designating care team members in communications skills.	<input type="checkbox"/> Policy AND <input type="checkbox"/> Description of training schedule	Basic
8. Involving Care team staff in the practice's performance evaluation and quality improvement activities.	<input type="checkbox"/> Policy AND <input type="checkbox"/> Proof of staff roles OR <input type="checkbox"/> Minutes from meeting	Basic

Standard	Requirement	Technology Level
PCMH2: Identify and Manage Patient Populations		
Element A-Patient Information		
1. Date of birth	<input type="checkbox"/> 3 month report (N/D)	Basic
2. Gender	<input type="checkbox"/> 3 month report (N/D)	Basic
3. Race	<input type="checkbox"/> 3 month report (N/D)	Basic
4. Ethnicity	<input type="checkbox"/> 3 month report (N/D)	Basic
5. Preferred Language	<input type="checkbox"/> 3 month report (N/D)	Basic
6. Telephone Numbers	<input type="checkbox"/> 3 month report (N/D)	Basic
7. E-mail address	<input type="checkbox"/> 3 month report (N/D)	Basic
8. Dates of previous clinical visits	<input type="checkbox"/> 3 month report (N/D)	Basic
9. Legal guardian/health care proxy	<input type="checkbox"/> 3 month report (N/D)	Basic
10. Primary caregiver	<input type="checkbox"/> 3 month report (N/D)	Basic
11. Presence of advance directives (N/A for pediatric practices)	<input type="checkbox"/> 3 month report (N/D)	Basic
12. Health insurance information	<input type="checkbox"/> 3 month report (N/D)	Basic
Element B-Clinical Data		
1. An up-to-date list with current and active diagnoses for more than 80 percent of patients.	<input type="checkbox"/> 3 month report (N/D)	Intermediate
2. Allergies, including medication allergies and adverse reactions, for more than 80 percent of patients.	<input type="checkbox"/> 3 month report (N/D)	Intermediate
3. Blood pressure, with date of update for more than 50 percent of patients 2 years and older.	<input type="checkbox"/> 3 month report (N/D)	Intermediate
4. Height for more than 50 percent of patients 2 years and older.	<input type="checkbox"/> 3 month report (N/D)	Intermediate
5. Weight for more than 50 percent of patients 2 years and older.	<input type="checkbox"/> 3 month report (N/D)	Intermediate
6. System calculates and displays BMI. (N/A for pediatric practices)	<input type="checkbox"/> Screen shot demonstrating capability	Intermediate
7. System can plot and display growth charts (length/height, weight and head circumference [less than 2 years of age] and BMI percentile [2-20 years]). (N/A for adult practices)	<input type="checkbox"/> Screen shot demonstrating capability	Intermediate
8. Status of tobacco use for patients 13 years and older for more than 50 percent of patients. (N/A for pediatric practices if all patients <13 years)	<input type="checkbox"/> 3 month report (N/D)	Intermediate
9. List of prescription medication with the date of updates for more than 80 percent of patients.	<input type="checkbox"/> 3 month report (N/D)	Intermediate

Standard	Requirement	Technology Level
Element C-Comprehensive Health Assessment		
1. Documentation of age-and gender-appropriate immunizations and screenings.	<input type="checkbox"/> Policy demonstrating how the information is consistently collected	OR <input type="checkbox"/> Completed Patient Assessment Intermediate
2. Family/social/cultural characteristics.	<input type="checkbox"/> Policy demonstrating how the information is consistently collected	OR <input type="checkbox"/> Completed Patient Assessment Intermediate
3. Communication needs.	<input type="checkbox"/> Policy demonstrating how the information is consistently collected	OR <input type="checkbox"/> Completed Patient Assessment Intermediate
4. Medical history of patient and family.	<input type="checkbox"/> Policy demonstrating how the information is consistently collected	OR <input type="checkbox"/> Completed Patient Assessment Intermediate
5. Advance care planning (N/A for pediatric practices)	<input type="checkbox"/> Policy demonstrating how the information is consistently collected	OR <input type="checkbox"/> Completed Patient Assessment Intermediate
6. Behaviors affecting health.	<input type="checkbox"/> Policy demonstrating how the information is consistently collected	OR <input type="checkbox"/> Completed Patient Assessment Intermediate
7. Patient and family mental health/substance abuse.	<input type="checkbox"/> Policy demonstrating how the information is consistently collected	OR <input type="checkbox"/> Completed Patient Assessment Intermediate
8. Developmental screening using a standardized tool. (N/A for practices with no pediatric patients)	<input type="checkbox"/> Policy demonstrating how the information is consistently collected	OR <input type="checkbox"/> Completed Patient Assessment Intermediate
9. Depression screening for adults and adolescents using a standardized tool.	<input type="checkbox"/> Policy demonstrating how the information is consistently collected	OR <input type="checkbox"/> Completed Patient Assessment Intermediate
Element D-Use Data for Population Management--MUST PASS		
1. At least three different preventive care services	<input type="checkbox"/> Reports showing need for services	AND <input type="checkbox"/> Materials showing how patients are notified. Intermediate
2. At least three different chronic care services	<input type="checkbox"/> Reports showing need for services	AND <input type="checkbox"/> Materials showing how patients are notified Intermediate
3. Patients not recently seen by the practice	<input type="checkbox"/> Reports showing need for services	AND <input type="checkbox"/> Materials showing how patients are notified Intermediate
4. Specific medications	<input type="checkbox"/> Reports showing need for services	AND <input type="checkbox"/> Materials showing how patients are notified Intermediate

Standard	Requirement	Technology Level
PCMH3: Plan and Manage Care		
Element A-Implement Evidence-Based Guidelines		
1. The first important condition.	<input type="checkbox"/> Supporting documentation showing evidence based guidelines and implementation for each condition	Basic
2. The second important condition.	<input type="checkbox"/> Supporting documentation showing evidence based guidelines and implementation for each condition	Basic
3. The third condition, related to unhealthy behaviors or mental health or substance abuse.	<input type="checkbox"/> Supporting documentation showing evidence based guidelines and implementation for each condition	Basic
Element B-Identify High-Risk Patients		
1. Establishes criteria and a systematic process to identify high-risk or complex patients.	<input type="checkbox"/> Policy	Intermediate
2. Determines the percentage of high-risk or complex patients in its population.	<input type="checkbox"/> Non-descript report (N/D)	Intermediate
Element C-Care Management—MUST PASS		
1. Conducts pre-visit preparations.	<input type="checkbox"/> 3 month report (N/D) OR <input type="checkbox"/> Record Review Workbook	Basic
2. Collaborates with the patient/family to develop an individual care plan, including treatment goals that are reviewed and updated at each relevant visit.	<input type="checkbox"/> 3 month report (N/D) OR <input type="checkbox"/> Record Review Workbook	Basic
3. Gives the patient/family a written plan of care.	<input type="checkbox"/> 3 month report (N/D) OR <input type="checkbox"/> Record Review Workbook	Basic
4. Assesses and addresses barriers when the patient has not met treatment goals.	<input type="checkbox"/> 3 month report (N/D) OR <input type="checkbox"/> Record Review Workbook	Basic
5. Gives the patient/family a clinical summary at each relevant visit.	<input type="checkbox"/> 3 month report (N/D) OR <input type="checkbox"/> Record Review Workbook	Basic
6. Identifies the patients/families who might benefit from additional care management support.	<input type="checkbox"/> 3 month report (N/D) OR <input type="checkbox"/> Record Review Workbook	Basic
7. Follows up with patients/families who have not kept important appointments.	<input type="checkbox"/> 3 month report (N/D) OR <input type="checkbox"/> Record Review Workbook	Basic
Element D-Medication Management		
1. Reviews and reconciles medications with patients/families for more than 50 percent of care transitions.	<input type="checkbox"/> 3 month report (N/D) OR <input type="checkbox"/> Record Review Workbook	Basic
2. Reviews and reconciles medications with patients/families for more than 80 percent of care transitions.	<input type="checkbox"/> 3 month report (N/D) OR <input type="checkbox"/> Record Review Workbook	Basic
3. Provides information about new prescriptions to more than 80 percent of patients/families	<input type="checkbox"/> 3 month report (N/D) OR <input type="checkbox"/> Record Review Workbook	Basic
4. Assesses patient/family understanding of medications for more than 50 percent of patients with date of assessment	<input type="checkbox"/> 3 month report (N/D) OR <input type="checkbox"/> Record Review Workbook	Basic
5. Assesses patient response to medications and barriers to adherence for more than 50 percent of patients with date of assessment	<input type="checkbox"/> 3 month report (N/D) OR <input type="checkbox"/> Record Review Workbook	Basic
6. Documents over-the-counter-medications, herbal therapies and supplements for more than 50 percent of patients/families with the date of updates	<input type="checkbox"/> 3 month report (N/D) OR <input type="checkbox"/> Record Review Workbook	Basic

Standard	Requirement	Technology Level
Element E-Use Electronic Prescribing		
1. Generates and transmits at least 40 percent of eligible prescriptions to pharmacies.	<input type="checkbox"/> 3 month report (N/D)	Intermediate
2. Generates at least 75 percent of eligible prescriptions.	<input type="checkbox"/> 3 month report (N/D)	Intermediate
3. Enters electronic medication orders into the medical record for more than 30 percent of patients with at least one medication in their medication list.	<input type="checkbox"/> 3 month report (N/D)	Intermediate
4. Performs patient-specific checks for drug-drug and drug-allergy interactions	<input type="checkbox"/> Screen shot demonstrating capability	Intermediate
5. Alerts prescribers to generic alternatives.	<input type="checkbox"/> Screen shot demonstrating capability	Intermediate
6. Alerts prescribers to formulary status.	<input type="checkbox"/> Screen shot demonstrating capability	Intermediate
PCMH4: Provide Self-Care Support and Community Resources		
Element A-Support Self-Care Support Process—MUST PASS		
1. Provides educational resources or refers at least 50 percent of patients/families to educational resources to assist in self-management.	<input type="checkbox"/> 3 month report (N/D) OR <input type="checkbox"/> Record Review Workbook	Basic
2. Uses an EHR to identify patient-specific education resources and provide them to more than 10 percent of patients, if appropriate.	<input type="checkbox"/> 3 month report (N/D) OR <input type="checkbox"/> Record Review Workbook	Basic
3. Develops and documents self-management plans and goals in collaboration with at least 50 percent of patients/families.	<input type="checkbox"/> 3 month report (N/D) OR <input type="checkbox"/> Record Review Workbook	Basic
4. Documents self-management abilities for at least 50 percent of parents/families.	<input type="checkbox"/> 3 month report (N/D) OR <input type="checkbox"/> Record Review Workbook	Basic
5. Provides self-management tools to record self-care results for at least 50 percent of patients/families.	<input type="checkbox"/> 3 month report (N/D) OR <input type="checkbox"/> Record Review Workbook	Basic
6. Counsels at least 50 percent of patients/families to adopt health behaviors.	<input type="checkbox"/> 3 month report (N/D) OR <input type="checkbox"/> Record Review Workbook	Basic
Element B-Provide Referrals to Community Resources		
1. Maintains a current resource list on five topics or key community service areas of importance to the patient population.	<input type="checkbox"/> Sample list of resources	Basic
2. Tracks referrals provided to patients/families	<input type="checkbox"/> One month tracking report	Basic
3. Arranges or provides treatment for mental health and substance abuse disorders.	<input type="checkbox"/> Policy	Basic
4. Offers opportunities for health education programs (such as group classes and peer support).	<input type="checkbox"/> Policy	Basic

Standard	Requirement	Technology Level
PCMH5: Track and Coordinate Care		
Element A-Test Tracking and Follow-Up		
1. Tracks lab tests until results are available, flagging and following up on overdue results.	<input type="checkbox"/> Policy AND	<input type="checkbox"/> Examples of how the process is met
2. Tracks imaging tests until results are available, flagging and following up on overdue results.	<input type="checkbox"/> Policy AND	<input type="checkbox"/> Examples of how the process is met
3. Flags abnormal lab results, bringing them to the attention of the clinician.	<input type="checkbox"/> Policy AND	<input type="checkbox"/> Examples of how the process is met
4. Flags abnormal imaging results, bringing them to the attention of the clinician.	<input type="checkbox"/> Policy AND	<input type="checkbox"/> Examples of how the process is met
5. Notifies patients/families of normal and abnormal lab and imaging test results.	<input type="checkbox"/> Policy AND	<input type="checkbox"/> Examples of how the process is met
6. Follows up with inpatient facilities on newborn hearing and blood-spot screening. (N/A for adults)	<input type="checkbox"/> Policy AND	<input type="checkbox"/> Examples of how the process is met
7. Electronically communicates with labs to order tests and retrieve results.	<input type="checkbox"/> Policy AND	<input type="checkbox"/> Examples of how the process is met
8. Electronically communicates with facilities to order and retrieve imaging results.	<input type="checkbox"/> Policy AND	<input type="checkbox"/> Examples of how the process is met
9. Electronically incorporates at least 40 percent of all clinical lab test results into structured fields in medical records.	<input type="checkbox"/> 3 month report (N/D)	
10. Electronically incorporates imaging test results into medical records.	<input type="checkbox"/> Policy AND	<input type="checkbox"/> Examples of how the process is met
Element B-Referral Tracking and Follow-Up—MUST PASS		
1. Giving the consultant or specialist the clinical reason for the referral and pertinent clinical information.	<input type="checkbox"/> 1 week report	
2. Tracking the status of referrals, including required timing for receiving a specialist's reports.	<input type="checkbox"/> 1 week report	
3. Following up to obtain a specialist's report	<input type="checkbox"/> 1 week report	
4. Establishing and documenting agreements with specialists in the medical record if co-management is needed.	<input type="checkbox"/> Policy AND	<input type="checkbox"/> 3 examples
5. Asking patients/families about self-referrals and requesting reports from clinicians.	<input type="checkbox"/> Policy AND	<input type="checkbox"/> 3 examples
6. Demonstrating the capability for electronic exchange of key clinical information (e.g. problem list, allergies, diagnostic test results) between clinicians.	<input type="checkbox"/> Screen shot demonstrating capability	
7. Providing an electric summary of the care record to another provider for more than 50 percent of referrals.	<input type="checkbox"/> 3 month report (N/D)	

Standard	Requirement	Technology Level
Element C-Coordinate With Facilities and Care Transitions		
1. Demonstrates its process for identifying patients with a hospital admission and/or patients with an emergency department visit.	<input type="checkbox"/> Policy	Advanced
2. Demonstrates its process for sharing clinical information with the admitting hospitals and/or emergency departments.	<input type="checkbox"/> Policy AND <input type="checkbox"/> 3 examples	Advanced
3. Demonstrates its process for consistently obtaining patient discharge summaries from the hospital and other facilities.	<input type="checkbox"/> Policy AND <input type="checkbox"/> 3 examples	Advanced
4. Demonstrates its process for contacting patients/families for appropriate follow-up care within an appropriate period following a hospital admission or emergency department visit.	<input type="checkbox"/> Policy AND <input type="checkbox"/> 1 month report (N/D) OR <input type="checkbox"/> 3 examples	Advanced
5. Demonstrates its process for exchanging patient information with the hospital during a patient's hospitalization.	<input type="checkbox"/> Policy AND <input type="checkbox"/> 1 example	Advanced
6. Collaborates with the patient/family to develop a written care plan for patients transitioning from pediatric care to adult care. (N/A for adult-only practices)	<input type="checkbox"/> Copy of written transition of care	Advanced
7. Demonstrates the capability for electronic exchange of key clinical information with the clinicians in facilities.	<input type="checkbox"/> Screen shot demonstrating capability	Advanced
8. Provides an electronic summary-of-care record to another care facility for more than 50 percent of transitions of care.	<input type="checkbox"/> 3 month report (N/D)	Advanced

PCMH6: Measure and Improve Performance

Element A-Measure Performance		
1. At least three preventive care measures.	<input type="checkbox"/> Report showing measurement and improvement ___ Preventative Care Measure 1 ___ Preventative Care Measure 2 ___ Preventative Care Measure 3	Basic
2. At least three chronic or acute care clinical measures.	<input type="checkbox"/> Report showing measurement and improvement ___ Chronic Care Measure 1 ___ Chronic Care Measure 2 ___ Chronic Care Measure 3	Basic
3. At least two utilization measures affecting health care costs.	<input type="checkbox"/> Report showing measurement and improvement ___ Utilization Measure Affecting Health Care Costs 1 ___ Utilization Measure Affecting Health Care Costs 2	Basic
4. Performance data stratified for vulnerable populations	<input type="checkbox"/> Report showing measurement and improvement	Basic

Standard	Requirement	Technology Level
Element B-Measure Patient/Family Experience		
1. The practice conducts a survey (using any instrument) to evaluate patient/family experiences on at least three categories	<input type="checkbox"/> Reports with summarized results	Basic
2. The practice uses the CAHPS PCMH survey tool.	<input type="checkbox"/> Reports with summarized results	Basic
3. The practice obtains feedback on the experiences of vulnerable patient groups.	<input type="checkbox"/> Reports with summarized results	Basic
4. The practice obtains feedback from patients/families through qualitative means.	<input type="checkbox"/> Reports with summarized results	Basic
Element C-Implement Continuous Quality Improvement- MUST PASS		
1. Set goal and act to improve performance on at least three measures from Element A.	<input type="checkbox"/> Reports on Performance Improvement Measures OR <input type="checkbox"/> Completed PCMH Quality Improvement Worksheet	
2. Set goals and act to improve performance on at least one measure from Element B.	<input type="checkbox"/> Reports on Performance Improvement Measures OR <input type="checkbox"/> Completed PCMH Quality Improvement Worksheet	
3. Set goals and address at least one identified disparity in care or service for vulnerable populations.	<input type="checkbox"/> Reports on Performance Improvement Measures OR <input type="checkbox"/> Completed PCMH Quality Improvement Worksheet	
4. Involve patients/families in quality improvement teams or on the practice's advisory council.	<input type="checkbox"/> Policy AND <input type="checkbox"/> Example of how the process is met	
Element D-Demonstrate Continuous Quality Improvement		
1. Tracking results over time.	<input type="checkbox"/> Reports on Performance Improvement Measures OR <input type="checkbox"/> Completed PCMH Quality Improvement Worksheet	Basic
2. Assessing the effect of its actions.	<input type="checkbox"/> Reports on Performance Improvement Measures OR <input type="checkbox"/> Completed PCMH Quality Improvement Worksheet	Basic
3. Achieving improved performance on one measure.	<input type="checkbox"/> Reports on Performance Improvement Measures OR <input type="checkbox"/> Completed PCMH Quality Improvement Worksheet	Basic
4. Achieving improved performance on a second measure.	<input type="checkbox"/> Reports on Performance Improvement Measures OR <input type="checkbox"/> Completed PCMH Quality Improvement Worksheet	Basic

Standard	Requirement	Technology Level
Element E-Report Performance		
1. Within the practice, results by individual clinician.	<input type="checkbox"/> Policy AND <input type="checkbox"/> Blinded results reports	Intermediate
2. Within the practice, results across the practice.	<input type="checkbox"/> Policy AND <input type="checkbox"/> Blinded results reports	Intermediate
3. Outside the practice to patients or publicly, results across the practice or the by clinician.	<input type="checkbox"/> Policy AND <input type="checkbox"/> Example of how patients are told.	Intermediate
Element F-Report Data Externally		
1. Ambulatory clinical quality measures to CMS or states.	<input type="checkbox"/> Report showing exchange of data	Intermediate
2. Ambulatory clinical quality measures to other external entities.	<input type="checkbox"/> Report showing exchange of data	Intermediate
3. Data to immunization registries or systems.	<input type="checkbox"/> Report showing exchange of data	Intermediate
4. Syndromic surveillance data to public health agencies.	<input type="checkbox"/> Report showing exchange of data	Intermediate
Element G-Use Certified EHR Technology		