Merge and Meaningful Use
Since 2011, Merge has been actively involved in the Meaningful Use (MU) program, helping our radiology and orthopedic business clients use our certified EHR technologies (Merge RIS™ and Merge OrthoEMR™) to attest to MU. Many clients have successfully gone through the attestation process and received their incentive checks.

As we continue to help clients attest to Stage 1, Merge is also looking ahead to Meaningful Use Stage 2 requirements and how they will impact our products and more importantly, our clients. One significant change for Merge in Stage 2 is that our MU focus will expand beyond our radiology and orthopedic clients as the image interoperability requirements for hospitals as well as imaging centers will make products such as iConnect® Access a valuable part of a MU solution.

Meaningful Use Stage 2 Overview
As a staggered program, MU Stage 1 is very much about data collection – ensuring participants are using certified EHR technology (or CEHRT) to collect patient data in a standardized way. Stage 2 of the program moves participants into more advanced clinical processes where they have to use the data being collected in a more meaningful way and also be able to exchange it with other providers.

Depending on when participants attested to Stage 1, they can start on Stage 2 as early as 2014 or wait as long as 2016. Because participants can start in 2014, all vendors must have certified technology available by the end of 2013.

When comparing Stage 1 and Stage 2 requirements (Core and Menu measures), while the overall number of measures is consistent between stages, MU participants will notice the need for advanced clinical workflows and or processes to successfully to meet increased thresholds for most measures, meaning there will be more consistency in data being collected and stored. Merge provides numerous resources on our website that detail all the Core and Menu changes from Stage 1 to Stage 2.

In addition to the more robust measures, there are several new measures that will affect the many Merge clients who work in image-intensive specialties – specifically that the measures will require integration between imaging systems and EHRs. In the Core measure area, a new requirement has been added that more than 30% of radiology orders must be recorded using computerized physician order entry (CPOE). For imaging results, there is a new Menu measure that states that more than 10% of results and images must be available through CEHRT. These requirements apply to both Eligible Providers (EPs) and hospitals, and in many cases will force EPs and hospitals to work more closely together and with imaging centers to share orders and results electronically.

Merge and Meaningful Use Stage 2
Merge plans to meet 2014 standards for CEHRT for several solutions that will help Meaningful Use participants attest to Stage 2.

Merge RIS and Merge OrthoEMR
For our clients who use Merge RIS and Merge OrthoEMR in their radiology and orthopedic businesses, Merge will update and fully certify these solutions. Because
the updates will include new fields to store new data and new capabilities, clients will need to upgrade to the certified versions.

It should be noted that participants are only required to report on 90 days of data during 2014, irrespective of what stage of Meaningful Use they are reporting for. This flexibility in reporting will make the process of upgrading CEHRT much easier than if a full year of reporting was required.

**Image to EHR Integration: iConnect Access**

To address the requirements of accessing images and associated reports through CEHRT, Merge will make available through modular certification its iConnect Access, Merge’s technology that allows for image viewing from any web browser.

As independently certified (modularly) for image and report access, iConnect Access can be utilized to access images and reports, even when not interfaced with an EHR. Attesters simply will need to generate combined certification IDs by adding iConnect Access to the main CEHRT that they use to achieve other objectives.

iConnect Access technology is unique in several ways... the viewer is absolutely zero-download (no ActiveX, Java or any other controls are required to access and view images), it can work with any EHR and any PACS system, including multiple PACS systems, can image enable an HIE, and can federate a query across multiple PACS systems (different departments or institutions) to provide a complete longitudinal image record.

**Next Steps**

For many healthcare providers and hospitals, successfully attesting to Stage 1 is still the next step. Attesting to Stage 1 as soon as possible will help in several ways – incentive payments can still be maximized and more time in Stage 1 will help with preparation for Stage 2.

For those providers and hospitals that have attested to Stage 1, review the Stage 2 requirements and learn about the changes involving electronic exchange of image results. Ensure that your current vendor(s) will enable you to meet these requirements in 2014 and have a solid long-term strategy for image and data interoperability. Providers and hospitals need to assess ongoing costs of maintaining multiple interfaces versus advantages of what systems such as iConnect Access offers. As Meaningful Use progresses to stage 3, thresholds most likely will rise, and therefore a long-term solution must be considered during early stages of adoption.

You can learn more about Meaningful Use, Merge clients who have successfully attested to Stage 1, changes in Stage 2, and the benefits to image-enabling the EHR at [www.merge.com/mu](http://www.merge.com/mu)