Disclaimer:

These materials are licensed under the axiUm software and maintenance agreement. You may not use these materials except in compliance with the license. The information contained in these materials is proprietary and confidential to the Exan Group and/or its subsidiaries or affiliates, and is provided for the sole use of the individual or entity to whom it is addressed. These materials must be kept in the strictest confidence.

The contents of these materials are protected by federal and international intellectual property laws. The Exan logo is a registered trademark and is the sole and exclusive property of the Exan Group.

These materials may contain third-party copyright and/or trademark materials, the use of which has not always been specifically authorized by the intellectual property owner. All copyrights and/or trademarks contained in these materials are the sole and exclusive property of their respective owners.

Information in this document is subject to change without notice. No portion of these materials may be reprinted, republished, modified, reproduced, sold, disseminated, disclosed, or distributed in any form to any other party without the express written consent of the Exan Group.

All names used in axiUm (whether online, in print, or any other media) are fictitious and are used herein for the purposes of example and demonstration on how to use axiUm. Any similarity to real people is a coincidence.

Copyright © 2014 Exan Group. All rights reserved.
# Contents

CHAPTER 1 About the Dashboard ................................................................. 1
User Interface Elements ........................................................................ 1

CHAPTER 2 Setting up Eligible Providers ................................................. 3
Set Up an Eligible Provider (EP) in axiUm ............................................ 3

CHAPTER 3 Logging in and Logging out .................................................... 7
Log In ........................................................................................................ 7
Log Out .................................................................................................... 8
Check the Version ................................................................................... 9

CHAPTER 4 Using the Dashboard .............................................................. 11
Change the Provider ................................................................................ 11
Change the Reporting Year ..................................................................... 14
Change the Reporting Period for a Reporting Year ................................. 16
View the Summary .................................................................................. 18
Print the Report ...................................................................................... 20
View Measure Information ....................................................................... 21
View Measure Details ............................................................................. 23
Attest to a Measure ................................................................................ 25
Claim an Exclusion for a Measure .................................................................................. 26
View Patient Information .................................................................................................. 27
View Prescription Information .......................................................................................... 28
View Appointment Information ......................................................................................... 29
View Clinical Quality Measures ......................................................................................... 30
Export CQMs in QRDA XML Type III Format ................................................................. 32
View CQM Details ............................................................................................................. 32
Export CQMs in QRDA XML Type I Format ................................................................. 34
Submit a Reporting Year .................................................................................................... 35
Retract a Reporting Year .................................................................................................. 36

Glossary .............................................................................................................................. 39
Index ................................................................................................................................. 41
CHAPTER 1 About the Dashboard

Exan Meaningful Use Dashboard is a web-based application which gives eligible provider (EPs) and coordinators quick access to meaningful use (MU) metrics.

User Interface Elements

<table>
<thead>
<tr>
<th>Icons and Buttons</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>✓</td>
<td>Indicates a measure that’s been excluded or attested to, or has passed.</td>
</tr>
<tr>
<td>✗</td>
<td>Indicates a measure that hasn’t been attested to, or has failed.</td>
</tr>
<tr>
<td>📅</td>
<td>Displays a calendar pop-up window to select the date.</td>
</tr>
<tr>
<td>☞ Print</td>
<td>Displays a preview before print.</td>
</tr>
<tr>
<td>☞ Export</td>
<td>Exports a file.</td>
</tr>
<tr>
<td>✉️</td>
<td>Takes you to the next page.</td>
</tr>
<tr>
<td>⏯️</td>
<td>Takes you to the last page.</td>
</tr>
</tbody>
</table>
Icons and Buttons

Takes you to the previous page.

Takes you to the first page.
CHAPTER 2 Setting up Eligible Providers

Eligible providers (EPs) must be set up in axiUm before you start using Meaningful Use Dashboard.

Set Up an Eligible Provider (EP) in axiUm

To set up an eligible provider (EP) in axiUm:

1. From the Maintenance module, click the Office tab.
2. Double-click Users.

The Users List window is displayed.

3. Search for a user.
4. From the Users List window, select the provider.
5. Click [image].

The Users window is displayed.

6. From the Users window, click the **Provider** tab.
7. In the Controls section, select the **Eligible for Meaningful Use** check box.

8. Click **Save**.
CHAPTER 3 Logging in and Logging out

Before you can access Meaningful Use Dashboard, you'll need the following:

- Meaningful Use Dashboard web address
- Your axiUm username and password, or PIN

This chapter provides the steps to:

- Log in
- Log out
- Check the version

Log In

Contact your administrator if you can't log in.

To log in to Meaningful Use Dashboard:

1. Open your web browser, and in the address bar, type the web address for Meaningful Use Dashboard.

   The login page is displayed.
2. Depending on the login authentication method, either:
   - type your axiUm username and password, or
   - type your axiUm username and PIN.

3. Click Log in.

**Log Out**

Depending on your Meaningful Use Dashboard setup, you may be logged out after several minutes of continuous inactivity. This auto-logout time is set up during the installation of Meaningful Use Dashboard. Contact your administrator to change the auto-logout time.

**To log out of Meaningful Use Dashboard:**

In the upper right, click Logout.
Check the Version

To check the version:

Scroll down to the bottom of the login page.
CHAPTER 4 Using the Dashboard

This chapter provides the steps to:

- Change the provider
- Change the reporting year
- Change the reporting period for a reporting year
- View the summary
- Print the report
- View measure information
- View measure details
- Attest to a measure
- Claim an exclusion for a measure
- View patient information
- View prescription information
- View appointment information
- View clinical quality measures
- Export CQMs in QRDA XML Type III format
- View CQM details
- Export CQMs in QRDA XML Type I format
- Submit a reporting year
- Retract a reporting year

Change the Provider

**Important:** You must be logged in as a coordinator to change the provider.
To change the provider:

1. From the Reporting Year Selection page, click **Select Provider**.

For information on the Reporting Year Selection page, see "Change the Reporting Year" on page 14.

The Select Provider page is displayed.
2. Select a provider from the list.

**Tip:** You can also click **Select Provider** from the Summary page or Clinical Quality Measures page.

For information on the Summary page, see "View the Summary" on page 18.

For information on the Clinical Quality Measures page, see "View Clinical Quality Measures" on page 30.

**Tip:** Use the search filter to narrow down your list.
Change the Reporting Year

Providers and coordinators can select Year 2 (Stage 1), Year 3 (Stage 2), or Year 4 (Stage 2) reporting years for meaningful use (MU).

To change the reporting year:

1. From the Summary page, click Reporting Year.

For information on the Summary page, see “View the Summary” on page 18.

The Reporting Year Selection page is displayed.
2. Select a reporting year from the list.

**Note:** If you select a reporting year that has already been submitted, a print preview of the report is displayed.

For information on printing the report, see "Print the Report" on page 20.

**Tip:** You can also click Reporting Year from the Clinical Quality Measures page.

For information on the Clinical Quality Measures page, see "View Clinical Quality Measures" on page 30.
Change the Reporting Period for a Reporting Year

Providers and coordinators can select the reporting period for a reporting year.

To change the reporting period for a reporting year:

1. From the Summary page, click.

   For information on the Summary page, see "View the Summary" on page 18.

2. Select the starting date.

3. Click.
The calendar pop-up window is displayed.

4. Select the ending date.

**Note:** You can’t select a date in the future.

5. Click OK.
Tip: You can also click from the Measure Information page, Measure Details page, or Clinical Quality Measures page.

For information on the Measure Information page, see "View Measure Information" on page 21.

For information on the Measure Details page, see "View Measure Details" on page 23.

For information on the Clinical Quality Measures page, see "View Clinical Quality Measures" on page 30.

View the Summary

The Summary page shows meaningful use (MU) metrics for the selected provider.

To view the summary:

Depending on whether you are viewing the Reporting Year Selection page or Measure Information page, either:

- select a reporting year from the list, or

- click Back to Summary.
The Summary page is displayed.
For information on the Reporting Year Selection page, see “Change the Reporting Year” on page 14.

For information on the Measure Information page, see "View Measure Information" on page 21.

**Tip:** You can also click **Back to Summary** from the Measure Details page, Clinical Quality Measures page, or CQM Details page.

For information on the Measure Details page, see "View Measure Details" on page 23.

For information on the Clinical Quality Measures page, see "View Clinical Quality Measures" on page 30.

For information on the CQM Details page, see "View CQM Details" on page 32.

**Print the Report**

A report showing a summary of meaningful use (MU) metrics can be printed.

**To print the report:**

1. Depending on whether you are viewing the Summary page or Reporting Year Selection page, either:
   - click **Print**, or

![Meaningful Use Dashboard](image)

<table>
<thead>
<tr>
<th>Core Measures</th>
<th>MU Self Measures</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. CPOE for Medication Orders</td>
<td>1. Drug Formulary Checks</td>
</tr>
<tr>
<td>2. Drug Interaction Checks</td>
<td>2. Patient Lists</td>
</tr>
<tr>
<td>4. ePrescribing</td>
<td>4. Patient-specific Education Resources</td>
</tr>
<tr>
<td>5. Active Medication List</td>
<td>5. Transition of Care Summary</td>
</tr>
</tbody>
</table>

**Summary:** Year 2, Stage 1  
Oct 2, 2013 - Dec 31, 2013  
D151  
CWP: D151  
Select Provider Reporting Year  
From: Oct 2, 2013 to Dec 31, 2013  
OK  
Print
• select a reporting year that has been submitted.

The print preview is displayed.

For information on the Summary page, see "View the Summary" on page 18.

For information on the Reporting Year Selection page, see "Change the Reporting Year" on page 14.

2. Click the print icon (this differs in each web browser), or save as a Portable Document Format (PDF) file for a digital copy.

Tip: You can also click Print from the Clinical Quality Measures page.

For information on the Clinical Quality Measures page, see "View Clinical Quality Measures" on page 30.

View Measure Information

To view measure information:

Depending on whether you are viewing the Summary page or Measure Details page, either:

• click a link, or
- click **Measure Info**.

  The Measure Information page is displayed.
For information on the Summary page, see "View the Summary" on page 18.

For information on the Measure Details page, see "View Measure Details" on page 23.

**View Measure Details**

To view measure details:

From the Measure Information page, click **Details**.

For information on the Measure Information page, see "View Measure Information" on page 21.
The Measures Details page is displayed.

**Measure Details:** Year 2, Stage 1
Oct 2, 2013 - Dec 31, 2013

**Core 7: Record Demographics**

1/1 **100.0%**

**Objective:**
Record all of the following demographics:
- Preferred language
- Gender
- Race
- Ethnicity
- Date of birth

**Measure:**
More than 50 percent of all unique patients seen by the EP have demographics recorded as structured data.

**Denominator:**
Number of unique patients seen by the EP during the EHR reporting period.

**Numerator:**
Number of patients in the denominator who have all of the elements of demographics (or a specific exclusion if the patient declined to provide one or more elements or if recording an element is contrary to state law) recorded as structured data.
**Note:** Selecting a patient from the list displays the Patient Information pop-up window, Prescription Information pop-up window, or Appointment Information pop-up window.

For information on the Patient Information pop-up window, see "View Patient Information" on page 27.

For information on the Prescription Information pop-up window, see "View Prescription Information" on page 28.

For information on the Appointment Information pop-up window, see "View Appointment Information" on page 29.

**Attest to a Measure**

**To attest to a measure:**

1. From the Measure Information page, select **Yes**.

   For information on the Measure Information page, see "View Measure Information" on page 21.

2. Click **Save**.

   The status is changed to attested.
**Claim an Exclusion for a Measure**

**To claim an exclusion for a measure:**

1. From the Measure Information page, select a reason for the exclusion.

   For information on the Measure Information page, see "View Measure Information" on page 21.

2. Click **Save**.

   The status is changed to excluded.
Note: Only some measures have exclusions available.

View Patient Information

To view patient information:

From the Measure Details page, select a patient from the list.

For information on the Measure Details page, see "View Measure Details" on page 23.

The Patient Information pop-up window is displayed.
Tip: You can also select a patient from the CQM Details page.

For information on the CQM Details page, see "View CQM Details" on page 32.

View Prescription Information

To view prescription information:

From the Measure Details page, select a prescription from the list.

For information on the Measure Details page, see "View Measure Details" on page 23.

The Prescription Information pop-up window is displayed.
View Appointment Information

To view appointment information:

From the Measure Details page, select an appointment from the list.

For information on the Measure Details page, see "View Measure Details" on page 23.

The Appointment Information pop-up window is displayed.
View Clinical Quality Measures

To view Clinical Quality Measures:

From the Summary page, click Clinical Quality Measures.

For information on the Summary page, see "View the Summary" on page 18.

The Clinical Quality Measures page is displayed.
### Tip:
You can also click **Clinical Quality Measures** from the CQM Details page.

For information on the CQM Details page, see "View CQM Details" on page 32.
Export CQMs in QRDA XML Type III Format

CQMs can be exported and downloaded in QRDA XML Type III format. This file is then manually uploaded to the Centers for Medicare and Medicaid Services (CMS).

To export CQMs in QRDA XML Type III format:

From the Clinical Quality Measures page, click **Select All**, and then in the lower left.

For information on the Clinical Quality Measures page, see “View Clinical Quality Measures” on page 30.

The QRDA XML Type III file is downloaded.

**Tip:** You can also select individual CQMs.

View CQM Details

To view CQM details:

From the Clinical Quality Measures page, click a link.

For information the Clinical Quality Measures page, see “View Clinical Quality Measures” on page 30.
The CQM Details page is displayed.
Export CQM in QRDA XML Type I Format

CQMs can be exported and downloaded for selected patients in QRDA XML Type I format.

**Important**: These files are manually uploaded to the Centers for Medicare and Medicaid Services (CMS) only if requested.

To export CQMs in QRDA XML Type I format:

From the CQM Details page, click Select All, and then Export.
CHAPTER 4 Using the Dashboard

For information on the CQM Details page, see "View CQM Details" on page 32.

The QRDA XML Type I files are downloaded.

Tip: You can also select individual patients.

Submit a Reporting Year

Important: You must be logged in as a coordinator to submit a reporting year.

To submit a reporting year:

1. From the Reporting Year Selection page, select the **Submitted** check box next to ✓.

For information on the Reporting Year Selection page, see "Change the Reporting Year" on page 14.

A warning message is displayed at the top of the page.
2. Click Yes.

Important: Clicking Submit doesn't send your report to the Centers for Medicare and Medicaid Services (CMS). You must still submit your report to CMS directly.

Retract a Reporting Year

Important: You must be logged in as a coordinator to retract a reporting year.

Retract lets you change the status to not submitted.

To retract a reporting year:

1. From the Reporting Year Selection page, clear the Submitted check box next to 

   For information on the Reporting Year Selection page, see "Change the Reporting Year" on page 14.
   
   A warning message is displayed at the top of the page.
2. **Click Yes.**

**Important:** Clicking **Retract** doesn’t change your report status at the Centers for Medicare and Medicaid Services (CMS).
Glossary

A

Attest
The process of declaring that a measure has been met by the eligible provider.

C

CMS
The Centers for Medicare and Medicaid Services is a U.S. federal agency responsible for the administration of the Medicare and Medicaid programs.

CQM
A clinical quality measure helps track the quality of health care provided by a qualified professional (i.e. eligible provider).

E

EP
An eligible provider is a qualified professional registered in the meaningful use incentive program.

Exclusion
A measure that isn't applicable to the eligible provider.

M

MU
Meaningful use is an incentive program administered by the Centers for Medicare and Medicaid (CMS), which requires eligible providers to demonstrate "meaningful use" of a certified EHR (electronic health record) technology.

Q

QRDA
Quality Reporting Document Architecture is a document format used to report data (esp. patient information).
XML

Extensible Markup Language is a text-based format used to share data (esp. on the web).
# Index

<table>
<thead>
<tr>
<th>A</th>
<th>E</th>
</tr>
</thead>
<tbody>
<tr>
<td>appointment information 29</td>
<td>eligible provider (EP) set up 3</td>
</tr>
<tr>
<td>auto-logout 8</td>
<td>eligible providers (EPs) 1 set up 3</td>
</tr>
<tr>
<td>axiUUm</td>
<td>export 32, 34</td>
</tr>
<tr>
<td>PIN 7</td>
<td></td>
</tr>
<tr>
<td>set up 3</td>
<td></td>
</tr>
<tr>
<td>username 7</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B</th>
<th>I</th>
</tr>
</thead>
<tbody>
<tr>
<td>buttons</td>
<td>icons</td>
</tr>
<tr>
<td>description 1</td>
<td>description 1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C</th>
<th>L</th>
</tr>
</thead>
<tbody>
<tr>
<td>Centers for Medicare and Medicaid Services (CMS) 32, 34-36</td>
<td>log in with password 7</td>
</tr>
<tr>
<td>clinical quality measures 30</td>
<td>log in with PIN 7</td>
</tr>
<tr>
<td>coordinator 11, 35-36</td>
<td>log out 8</td>
</tr>
<tr>
<td>coordinators 1, 14, 16</td>
<td></td>
</tr>
<tr>
<td>CQM details 32</td>
<td></td>
</tr>
<tr>
<td>CQMs (clinical quality measures) 32, 34</td>
<td></td>
</tr>
<tr>
<td>meaningful use (MU) 14</td>
<td>metrics 1, 18, 20</td>
</tr>
</tbody>
</table>
measure
  attestation 25
  exclusion 26
measure details 23
measure information 21
P
patient information 27
prescription information 28
provider 18, See also eligible provider
  (EP)
  change 11
providers 14, 16, See also eligible
  providers (EPs)
Q
QRDA (Quality Reporting Document
  Architecture) 32, 34
R
report
  print 20
reporting period
  change 16
reporting year 16
  change 14
  retract 36
  submit 35
  reporting years 14
S
summary 18