

## Adoption/Use of Electronic Health Records (EHR)

### Physician Quality Reporting System Data Collection Sheet

Patient's Name	Practice Medical Record Number (MRN)	Birth Date (mm/dd/yyyy) / /	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
National Provider Identifier (NPI)		Date of Service	

#### Clinical Information

#### Billing Information

Step 1 Is patient eligible for this measure?			Code Required on Claim Form
	Yes	No	
Any patient regardless of age.	<input type="checkbox"/>	<input type="checkbox"/>	Verify date of birth on claim form.  Refer to coding specifications document for list of applicable codes. Codes determining a patient's eligibility must be reported on the same claim as the quality code(s) identified below.
There is a CPT Code, D-code, or G-code for this visit.	<input type="checkbox"/>	<input type="checkbox"/>	
If <b>No</b> is checked for any of the above, STOP. Do not report a G-code.			
Step 2 Does patient meet or have an acceptable reason for not meeting the measure?			Code to be Reported on Line 24D of Paper Claim Form, if Yes (or Service Line 24 of Electronic Claim Form)
Patient Encounter Using an EHR	Yes	No	
Documented <sup>1</sup> — an EHR system that has been certified by an Authorized Testing and Certification Body (ATCB) <sup>2</sup> used	<input type="checkbox"/>	<input type="checkbox"/>	G8447

<sup>1</sup>Encounter Documentation — Eligible professional has utilized a system certified by an authorized testing and certification body to record/verify a patient encounter.

<sup>2</sup>Authorized Testing and Certification Bodies (ATCB) — Review bodies that have been authorized to test and certify electronic health record (EHR) systems for compliance with the standards and certification criteria that were issued by the U.S. Department of Health and Human Services.