Northern Light Health | **Optum**

From the Office of Health Informatics

Age Friendly Health System
Clinical EHR Flash Flyer

Wednesday, December 10, 2025

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What Matters

Frequently Asked Questions

Why is What Matters required documentation?

➢ Maine has the oldest population in the nation. Older adults bring experience, complexity, and deeply personal definitions of quality of life.

➢ Age Friendly care starts with understanding what matters to each patient, then aligning our clinical decisions around that. It is about making care personalized to each older adult.

➢ CMS now recognized Age Friendly Health Systems as part of the Hospital Inpatient Quality Reporting (IQR) Program. This means that our hospitals commitment to safe, high quality, patient centered care for adults aged 65 and older will be assessed using four evidence-based domains as the 4M's in the framework.

➢ Documentation of What Matters is part of the 4M framework of being an Age Friendly Health Care System.

- The 4M's are What Matters, Mentation, Mobility, and Medication.

When does What Matters have to be documented?

➢ What Matters is documented at the following times throughout the hospital stay:

- On Admission in the Admission History Adult PowerForm on all patients aged 65 and older.
- Prior to a surgical procedure in the Preprocedure Checklist.
- Prior to a major procedure using the stand-alone form available in the **Clinical Entry Workspace or Age-Friendly component** on the **Nurse Handoff MPage**.
    - **Major Procedure** is considered any procedure **requiring anesthesia**.
    - Example: Surgical cases requiring general anesthesia or moderate sedation anesthesia.
- Prior to an Inpatient going to a procedural area.
    - Examples:
        - Endoscopy
        - Cardiac Catheterization
- Significant change in clinical condition
    - Examples:
        - New Cancer or life changing diagnosis
        - Change in level of care

Known Issues & Updates

NEW: What Matters and What Matters Comment made Last Charted Value (LCV)

➤ The documentation of What Matters and the What Matters Comment have been made LCV. This was requested by the NICC (Nursing Informatics Clinical Champions) and approved prior to go-live and that portion of the build was overlooked at the time of go-live.

Why doesn't the age filter stay on the Age-Friendly Worklist?

➤ When applying filters – such as age – on the Age-Friendly Worklist or similar worklists, please note that these filters will reset if you switch to a different patient list or log out and back in. This is working as designed, as filters are not saved as user preferences.

Duration of High-Risk Medications on Worklist

➤ High-risk medication orders will remain visible on the worklist for 7 days, including one-time dose medications. This ensures providers have awareness that the patient has received these medications.

Age-Friendly Worklist: High-Risk Medication Column Performance

➤ Some staff have reported intermittent slowness when loading the details pane after clicking the pill icon. IS and Oracle teams are actively investigating the issue to identify and resolve the root cause.

Age Friendly Worklist

➤ The Age Friendly Worklist has been added to the Provider Handoff for Ambulatory NP/PA positions to ensure providers in specialty practices, who care for patients in both ambulatory and inpatient settings, have access to the worklist.

ASC Preprocedure Checklist Form

➤ **What Matters** section has been added to the ASC Preprocedure Checklist Form.

Important Reminders

Age Friendly Health System Elements

➤ The implementation and measurement of the Age-Friendly Health System are now required under the CMS Age-Friendly Structural Measures as part of the Hospital Inpatient Quality Reporting (IQR) Program. More importantly, embracing these measures reflects our commitment to delivering the best possible care for our patients.

➤ While documenting What Matters is a key component of the new CMS requirements, many elements of the Age-Friendly Health System are already embedded in our current processes. To ensure full compliance and maintain high-quality care, the following actions must be consistently completed:

- Documenting What Matters
- Advance Directives

- Code Status /Treatment Restrictions
- Medication Reconciliations completed by Providers
- bCAM and CAM ICU Delirium Assessments
- BMAT (Bed Mobility Assessment Test)
- Nutrition Screening
- Social Determinants of Health (PRAPARE)
- Fall Risk Assessments

By integrating these practices into our workflows, we not only meet regulatory requirements but also advance our mission to provide safe, personalized, and age-friendly care.

Questions or Assistance?

➢ For assistance with workflow-related questions—such as where and how to document required items—please contact **Health Informatics**.

➢ For inquiries specific to **Age-Friendly Health Systems** or **CMS regulatory requirements,** reach out to your **clinical educator** or contact **Lindsay Robinson at:** lindsayrobinson@northernlight.org

Campfire Post – Age Friendly Health Systems

➢ For more information on Age Friendly Health Systems, please see the link to the November 12 Campfire post: **Campfire Post – Age Friendly Health Systems**

Education Flyers

➢ Please refer to the flyers on the HI Education Portal for detailed workflows related to the Age-Friendly Health System and Age-Friendly Worklist.

For questions regarding process and/or policies, please contact your unit's Clinical Educator. For questions regarding workflow, please place a ticket to Health Informatics. For any other questions please contact the Customer Support Center at: 207-973-7728 or 1-888-827-7728.