

Eligible Hospital and Critical Access Hospital

Meaningful Use Core Measures

Measure 15 of 16

Stage 2

Date issued: November, 2014

Syndromic Surveillance Data Submission	
Objective	Capability to submit electronic syndromic surveillance data to public health agencies, except where prohibited, and in accordance with applicable law and practice.
Measure	Successful ongoing submission of electronic syndromic surveillance data from Certified EHR Technology to a public health agency for the entire EHR reporting period.
Exclusion	<p>Any eligible hospital or CAH that meets one or more of the following criteria may be excluded from this objective:</p> <ul style="list-style-type: none">(1) Does not have an emergency or urgent care department;(2) Operates in a jurisdiction for which no public health agency is capable of receiving electronic syndromic surveillance data in the specific standards required by Certified EHR Technology at the start of their EHR reporting period;(3) Operates in a jurisdiction where no public health agency provides information timely on capability to receive syndromic surveillance data; or(4) Operates in a jurisdiction for which no public health agency that is capable of accepting the specific standards required by Certified EHR Technology at the start of their EHR reporting period can enroll additional eligible hospitals or CAHs.

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Definition of Terms

Public Health Agency – An entity under the jurisdiction of the U.S. Department of Health and Human Services, tribal organization, State level and/or city/county level administration that serves a public health function.

Attestation Requirements

YES/NO

Eligible hospitals or CAHS must attest YES to meeting one of the following criteria under the umbrella of ongoing submission:

- Ongoing submission was already achieved for an EHR reporting period in a prior year and continues throughout the current EHR reporting period.

- Registration with the public health agency or other body to whom the information is being submitted of intent to initiate ongoing submission was made by the deadline (within 60 days of the start of the EHR reporting period) and ongoing submission was achieved.
- Registration of intent to initiate ongoing submission was made by the deadline and the EP or hospital is still engaged in testing and validation of ongoing electronic submission.
- Registration of intent to initiate ongoing submission was made by the deadline and the EP or hospital is awaiting invitation to begin testing and validation

EXCLUSION:

Any eligible hospital or CAH that meets one or more of the following criteria may be excluded from this objective:

- (1) Does not have an emergency or urgent care department;
- (2) Operates in a jurisdiction for which no public health agency is capable of receiving electronic syndromic surveillance data in the specific standards required by Certified EHR Technology at the start of their EHR reporting period;
- (3) Operates in a jurisdiction where no public health agency provides information timely on capability to receive syndromic surveillance data; or
- (4) Operates in a jurisdiction for which no public health agency that is capable of accepting the specific standards required by Certified EHR Technology at the start of their EHR reporting period can enroll additional eligible hospitals or CAHs.

Additional Information

- In determining whether the PHA has the capacity, CMS anticipates developing a centralized repository for this information, including a deadline for the PHA to submit information. If the PHA fails to provide information to this centralized repository by the deadline, the provider could claim the exclusion. In the event, that we are unable to develop a centralized repository, providers will make the determination of PHA capacity by working directly with the PHA as is currently the case for Stage 1 of meaningful use.
- The second exclusion does not apply if an entity designated by the public health agency can receive electronic immunization data submissions. For example, if the immunization registry cannot accept the data directly or in the standards required by Certified EHR Technology, but if it has designated a Health Information Exchange to do so on their behalf and the Health Information Exchange is capable of accepting the information in the standards required by Certified EHR Technology, the provider could not claim the second exclusion.
- Certified EHR Technology in order to meet this objective and measure, eligible hospitals or CAHs must use the capabilities and standards of Certified EHR Technology at 45 CFR 170.314(f)(3). However, if EPs prior to CY 2014 and eligible hospitals and CAHs prior to FY 2014 have achieved successful ongoing submission using EHR technology certified to the 2011 Edition EHR certification criteria (HL7 2.3.1 only), it is acceptable to continue this ongoing submission and meet the Stage 2 measure for as long as HL7 2.3.1 continues to be accepted by the PHA in that jurisdiction.

Certification and Standards

Below is the corresponding certification and standards criteria for electronic health record technology that supports achieving the meaningful use of this objective.

Certification Criteria

§170.314(f)(3) Transmission to public health agencies – syndromic surveillance

EHR technology must be able to electronically create syndrome-based public health surveillance information for electronic transmission in accordance with:

i) Ambulatory setting only.

A) The standard specified in § 170.205(d)(2).

B) Optional. The standard (and applicable implementation specifications) specified in § 170.205(d)(3).

(ii) Inpatient setting only. The standard (and applicable implementation specifications specified in § 170.205(d)(3).

Standards Criteria

§ 170.205(d)(2)

HL7 2.5.1.

§ 170.205(d)(3)

HL7 2.5.1 (incorporated by reference in § 170.299). Implementation specifications. PHIN Messaging Guide for Syndromic Surveillance (incorporated by reference in § 170.299) and Conformance Clarification for EHR Certification of Electronic Syndromic Surveillance, Addendum to PHIN Messaging Guide for Syndromic Surveillance (incorporated by reference in § 170.299).