The Electronic Health Record (EHR) Incentive Programs in 2015 through 2017 include a consolidated public health reporting objective for eligible professionals (EPs). Below is an overview of the public health reporting objective, measures, and alternate exclusions for EPs. Details on how to successfully demonstrate “active engagement” for public health reporting are also provided.

Public Health Reporting Objective and Measures

**Objective:** The EP is in active engagement with a public health agency to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.

**Measures:** The public health reporting objective for EPs includes three measures. EPs must attest to any combination of two measures—this includes EPs scheduled to be in Stage 2 in 2015 and all EPs in 2016 and 2017. An EP scheduled to be in Stage 1 may meet one measure in 2015.

### Public Health Reporting Measures for EPs in 2015 Through 2017

<table>
<thead>
<tr>
<th>Measure Name and Number</th>
<th>Measure Specification</th>
<th>Maximum Times Measure Can Count Towards the Objective</th>
</tr>
</thead>
<tbody>
<tr>
<td>Measure 1—Immunization Registry Reporting</td>
<td>The EP is in active engagement with a public health agency to submit immunization data</td>
<td>1</td>
</tr>
<tr>
<td>Measure 2—Syndromic Surveillance Reporting</td>
<td>The EP is in active engagement with a public health agency to submit syndromic surveillance data</td>
<td>1</td>
</tr>
<tr>
<td>Measure 3—Specialized Registry Reporting</td>
<td>The EP is in active engagement to submit data to a specialized registry</td>
<td>2 for EPs*</td>
</tr>
</tbody>
</table>

* EPs may report to more than one specialized registry and may count specialized registry reporting more than once to meet the required number of measures for the objective.

**Public Health Reporting Exclusions**

There are multiple exclusions for each of the public health reporting measures. See the [Eligible Professional Public Health Reporting specification sheet](#) for a complete list.

An exclusion for a measure does not count toward the total of two measures. Instead, an EP who selects an exclusion must select another measure to meet if an exclusion is claimed. If the EP qualifies for multiple exclusions and the remaining number of measures available to the EP is less than two, the EP can meet the objective by meeting the one remaining measure available to them and claiming the applicable exclusions.
If no measures remain available, the EP can meet the objective by claiming applicable exclusions for all measures.

An EP who is scheduled to be in Stage 1 in 2015 must report at least one measure unless they can exclude from all available measures. (Available measures include ones for which the EP does not qualify for an exclusion.)

**Public Health Reporting Alternate Exclusions in 2015**
The final rule for the EHR Incentive Programs in 2015 through 2017 includes alternate exclusions and specifications to assist providers seeking to demonstrate meaningful use in 2015.

### Alternate Exclusions for Public Health Reporting in 2015

#### EPs scheduled to be in Stage 1:
- Must attest to at least 1 measure from the Public Health Reporting Objective Measures 1-3.
  - May claim an Alternate Exclusion for Measure 1, Measure 2, or Measure 3.
  - An Alternate Exclusion may only be claimed for up to two measures, then the provider must either attest to or meet the exclusion requirements for the remaining measure described in 495.22(e)(10)(i)(C).

#### EPs scheduled to be in Stage 2:
- Must attest to at least 2 measures from the Public Health Reporting Objective Measures 1-3.
  - May claim an alternate exclusion for Measure 2 or Measure 3 (Syndromic Surveillance Measure or Specialized Registry Reporting Measure) or both.
  - There is no alternate exclusion for Stage 2 providers for measure 1; however, the provider may still claim the exclusion described in 495.22(e)(10)(i)(C)(1) if it is applicable to them.

### Demonstrating “Active Engagement” for Public Health Reporting

EPs are required to demonstrate “active engagement” with a public health agency (PHA) or clinical data registry (CDR). Active engagement means that the provider is in the process of moving toward sending “production data” to a PHA and CDR. The term “production data” refers to data generated through clinical processes involving patient care, and it is used to distinguish between this data and “test data,” which may be submitted for the purposes of enrolling in and testing electronic data transfers.

**Note:** The active engagement options included in the EHR Incentive Program for 2015 to 2017 replace the “ongoing submission” requirement included in the Stage 2 final rule; however, they should not be considered mutually exclusive. For providers who have already planned for and/or acted toward meeting any of the Stage 1 or Stage 2 public health reporting objectives, those actions would count toward meeting the active engagement options.

Active engagement may be demonstrated through the following ways:

- **Active Engagement Option 1—Completed Registration to Submit Data:** The EP registered to submit data with the PHA or, where applicable, the CDR to which the information is being submitted; registration was completed within 60 days after the start of the EHR reporting period; and the EP is awaiting an invitation from the PHA or CDR to begin testing and validation. This option allows providers to meet the measure when the PHA or the CDR has limited resources to initiate the testing and validation process. Providers who have registered in previous years do not need to submit an additional registration to meet this requirement for each EHR reporting period.
• **Active Engagement Option 2—Testing and Validation:** The EP is in the process of testing and validation of the electronic submission of data. Providers must respond to requests from the PHA or, where applicable, the CDR within 30 days; failure to respond twice within an EHR reporting period would result in that provider not meeting the measure.

• **Active Engagement Option 3—Production:** The EP has completed testing and validation of the electronic submission and is electronically submitting production data to the PHA or CDR.

**Clarification on Active Engagement**

• **Registration:** Providers only need to register once with a PHA or CDR and can register before the reporting period begins. Previous registrations with a PHA or CDR that occurred in a previous stages of meaningful use could count toward Active Engagement Option 1 for any of the EHR reporting periods in 2015, 2016, or 2017. To meet Active Engagement Option 1, registration with the applicable PHA or CDR is required where a provider seeks to meet meaningful use using a measure they have not successfully attested to in a previous EHR reporting period.

• **Reporting on Public Health Reporting Objective in 2015:** Providers are not required to engage in new activities in 2015 in order to successfully demonstrate meaningful use in 2015. Since providers in Stage 1 in 2015 were not previously required to submit a registration of intent to submit data to meet Objective 10 measures, providers may meet the measures by having sent a test message or by being in production. Providers who have sent a test message can be considered to have met Option 2 of Active Engagement - Test and Validation; providers who are in production can be considered to have met Option 3 of Active Engagement - Production.

• **Demonstrating Meaningful Use:** Providers can demonstrate meaningful use by using communications and information provided by a PHA or CDR to the provider directly. A provider also may demonstrate meaningful use by using communications and information provided by a PHA or CDR to the practice or organization of the provider as long as the provider shares the same CEHRT as the practice or organization.

• **Active Engagement – Option 3:** To meet any of the measures using Active Engagement—Option 3 (production), a provider only may successfully attest to meaningful use when the receiving PHA or CDR moves the provider into a production phase. Live data may be sent during the Testing and Validation phase of Active Engagement—Option 2, but in such a case, the data received in Option 2 is insufficient for purposes of meeting Option 3 unless the PHA and CDR is actively accepting the production data from the provider for purpose of reporting.

**For More Information**

For more information on:

• What counts as a specialized registry, see FAQ #13653.
• Whether there is a specialized registry available or if an exclusion should be claimed, see FAQ #13657.
• Whether to report as part of a group or claim an exclusion, see FAQ # 3369.