

**Medicaid Promoting Interoperability Program Modified Stage 2  
Eligible Hospitals and Critical Access Hospitals  
Objectives and Measures for 2018**

**Objective 9 of 9  
Updated: July 2018**

<b>Public Health Reporting</b>	
<b>Objective</b>	The eligible hospital or critical access hospital (CAH) is in active engagement with a public health agency (PHA) to submit electronic public health data from certified electronic health record technology (CEHRT) except where prohibited and in accordance with applicable law and practice.
<b>Measures</b>	<p><b>Measure 1</b> – Immunization Registry Reporting: The eligible hospital or CAH is in active engagement with a PHA to submit immunization data.</p> <p><b>Measure 2</b> – Syndromic Surveillance Reporting: The eligible hospital or CAH is in active engagement with a PHA to submit syndromic surveillance data.</p> <p><b>Measure 3</b> – Specialized Registry Reporting: The eligible hospital or CAH is in active engagement to submit data to a specialized registry.</p> <p><b>Measure 4</b> – Electronic Reportable Laboratory Result Reporting: The eligible hospital or CAH is in active engagement with a PHA to submit electronic reportable laboratory (ELR) results.</p>
<b>Exclusions</b>	<p><b>Measure 1 Exclusions</b> – Any eligible hospital or CAH meeting one or more of the following criteria may be excluded from the immunization registry reporting measure if the eligible hospital or CAH—</p> <p>(A) Does not administer any immunizations to any of the populations for which data is collected by its jurisdiction's immunization registry or immunization information system during the Promoting Interoperability (PI) reporting period;</p> <p>(B) Operates in a jurisdiction for which no immunization registry or immunization information system is capable of accepting the specific standards required to meet the CEHRT definition at the start of the PI reporting period; or</p> <p>(C) Operates in a jurisdiction where no immunization registry or immunization information system has declared readiness to receive immunization data from the eligible hospital or CAH at the start of the PI reporting period.</p> <p><b>Measure 2 Exclusions</b> – Any eligible hospital or CAH meeting one or more of the following criteria may be excluded from the</p>



# Medicaid Promoting Interoperability Program Modified Stage 2 Eligible Hospitals and Critical Access Hospitals Objectives and Measures for 2018

## Objective 9 of 9 *Updated: July 2018*

syndromic surveillance reporting measure if the eligible hospital or CAH—

- (A) Does not have an emergency or urgent care department;
- (B) Operates in a jurisdiction for which no PHA is capable of receiving electronic syndromic surveillance data from eligible hospitals or CAHs in the specific standards required to meet the CEHRT definition at the start of the PI reporting period; or
- (C) Operates in a jurisdiction where no PHA has declared readiness to receive syndromic surveillance data from eligible hospitals or CAHs at the start of the PI reporting period.

**Measure 3 Exclusions** – Any eligible hospital or CAH meeting at least one of the following criteria may be excluded from the specialized registry reporting measure if the eligible hospital or CAH:

- (A) Does not diagnose or treat any disease or condition associated with or collect relevant data that is required by a specialized registry in their jurisdiction during the PI reporting period;
- (B) Operates in a jurisdiction for which no specialized registry is capable of accepting electronic registry transactions in the specific standards required to meet the CEHRT definition at the start of the PI reporting period; or
- (C) Operates in a jurisdiction where no specialized registry for which the eligible hospital or CAH is eligible has declared readiness to receive electronic registry transactions at the beginning of the PI reporting period.

**Measure 4 Exclusions** – Any eligible hospital or CAH meeting one or more of the following criteria may be excluded from the ELR result reporting measure if the eligible hospital or CAH—

- (A) Does not perform or order laboratory tests that are reportable in their jurisdiction during the PI reporting period;
- (B) Operates in a jurisdiction for which no PHA is capable of accepting the specific ELR standards required to meet the CEHRT definition at the start of the PI reporting period; or
- (C) Operates in a jurisdiction where no PHA has declared readiness to receive ELR results from eligible hospitals or CAHs at the start of the PI reporting period.

## Table of Contents

- Definition of Terms
- Attestation Requirements
- Additional Information



# Medicaid Promoting Interoperability Program Modified Stage 2 Eligible Hospitals and Critical Access Hospitals Objectives and Measures for 2018

## Objective 9 of 9 *Updated: July 2018*

- Regulatory References
- Certification and Standards Criteria

### Definition of Terms

**Active engagement** – Means that the provider is in the process of moving towards sending "production data" to a PHA or clinical data registry (CDR), or is sending production data to a PHA or CDR.

**Active Engagement Option 1 – Completed Registration to Submit Data** – The eligible hospital or CAH 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 PI reporting period; and the eligible hospital or CAH 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 that have registered in previous years do not need to submit an additional registration to meet this requirement for each PI reporting period.

**Active Engagement Option 2 – Testing and Validation** – The eligible hospital or CAH 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 PI reporting period would result in that provider not meeting the measure.

**Active Engagement Option 3 – Production** – The eligible hospital or CAH has completed testing and validation of the electronic submission and is electronically submitting production data to the PHA or CDR.

**Production data** – Refers to data generated through clinical processes involving patient care, and it is used to distinguish between data and "test data" which may be submitted for the purposes of enrolling in and testing electronic data transfers.

### Attestation Requirements

YES/NO/EXCLUSIONS

#### MEASURE 1:

- YES/NO: The eligible hospital or CAH must attest YES to being in active engagement with a PHA to submit immunization data.
- EXCLUSIONS: Any eligible hospital or CAH meeting one or more of the following criteria may be excluded from the immunization registry reporting measure if the eligible hospital or CAH—
  - Does not administer any immunizations to any of the populations for which data is collected by their jurisdiction's immunization registry or immunization information system during the PI reporting period;



# Medicaid Promoting Interoperability Program Modified Stage 2 Eligible Hospitals and Critical Access Hospitals Objectives and Measures for 2018

## Objective 9 of 9 *Updated: July 2018*

- Operates in a jurisdiction for which no immunization registry or immunization information system is capable of accepting the specific standards required to meet the CEHRT definition at the start of the PI reporting period; or
- Operates in a jurisdiction where no immunization registry or immunization information system has declared readiness to receive immunization data from the eligible hospital or CAHs at the start of the PI reporting period.

### **MEASURE 2:**

- YES/NO: The eligible hospital or CAH is in active engagement with a PHA to submit syndromic surveillance data.
- EXCLUSIONS: Any eligible hospital or CAH meeting one or more of the following criteria may be excluded from the syndromic surveillance reporting measure if the eligible hospital or CAH—
  - Does not have an emergency or urgent care department;
  - Operates in a jurisdiction for which no PHA is capable of receiving electronic syndromic surveillance data from eligible hospitals or CAHs in the specific standards required to meet the CEHRT definition at the start of the PI reporting period; or
  - Operates in a jurisdiction where no PHA has declared readiness to receive syndromic surveillance data from eligible hospitals or CAHs at the start of the PI reporting period.

### **MEASURE 3:**

- YES/NO: The eligible hospital or CAH must attest YES to being in active engagement to submit data to a specialized registry.
- EXCLUSIONS: Any eligible hospital or CAH meeting at least one of the following criteria may be excluded from the specialized registry reporting measure if the eligible hospital or CAH—
  - Does not diagnose or treat any disease or condition associated with or collect relevant data that is required by a specialized registry in their jurisdiction during the PI reporting period;
  - Operates in a jurisdiction for which no specialized registry is capable of accepting electronic registry transactions in the specific standards required to meet the CEHRT definition at the start of the PI reporting period; or
  - Operates in a jurisdiction where no specialized registry for which the eligible hospital or CAH is eligible has declared readiness to receive electronic registry transactions at the beginning of the PI reporting period.

### **MEASURE 4:**

- YES/NO: The eligible hospital or CAH must attest YES to being in active engagement with a PHA to submit ELR results.
- EXCLUSIONS: Any eligible hospital or CAH meeting one or more of the following criteria may be excluded from the ELR result reporting measure if the eligible hospital or CAH—
  - Does not perform or order laboratory tests that are reportable in their jurisdiction during the PI reporting period;
  - Operates in a jurisdiction for which no PHA is capable of accepting the specific ELR standards required to meet the CEHRT definition at the start of the PI reporting period; or

# Medicaid Promoting Interoperability Program Modified Stage 2 Eligible Hospitals and Critical Access Hospitals Objectives and Measures for 2018

## Objective 9 of 9 *Updated: July 2018*

- Operates in a jurisdiction where no PHA has declared readiness to receive ELR results from eligible hospitals or CAHs at the start of the PI reporting period.

### Additional Information

- Eligible hospitals must attest to at least three measures from the Public Health Reporting measures 1 through 4.
- An exclusion for a measure does not count toward the total of three measures. Instead, in order to meet this objective, an eligible hospital would need to meet three of the total number of measures available them. If the eligible hospital qualifies for multiple exclusions and the total number of remaining measures available to the eligible hospital is less than three, the eligible hospital can meet the objective by meeting the all the remaining measures available to them and claiming the applicable exclusions. If no measures remain available, the eligible hospital can meet the objective by claiming applicable exclusions for all measures.
- For Measure 1, an exclusion does not apply if an entity designated by the immunization registry or immunization information system can receive electronic immunization data submissions. For example, if the immunization registry cannot accept the data directly or in the standards required by CEHRT, but if it has designated a Health Information Exchange (HIE) to do so on their behalf and the HIE is capable of accepting the information in the standards required by CEHRT, the provider could not claim the second exclusion.
- For Measure 2, an exclusion does not apply if an entity designated by PHA can receive electronic syndromic surveillance data submissions. For example, if the PHA cannot accept the data directly or in the standards required by CEHRT, but if it has designated a HIE to do so on their behalf and the HIE is capable of accepting the information in the standards required by CEHRT, the provider could not claim the second exclusion.
- For Measure 3, a provider may report to more than one specialized registry and may count specialized registry reporting more than once (up to three times) to meet the required number of measures for the objective.
- Providers who have previously registered, tested, or begun ongoing submission of data to registry do not need to “restart” the process beginning at active engagement option 1. The provider may simply attest to the active engagement option which most closely reflects their current status.
- We continue to allow registries such as Prescription Drug Monitoring Program reporting and electronic case reporting registries to be considered specialized registries for purposes of this measure.
- Providers may use electronic submission methods beyond the functions of CEHRT to meet the requirements for the Specialized Registry Reporting measure.
- A specialized registry cannot be duplicative of any of the other registries or reporting included in other PI requirements.
- If a provider is part of a group which submits data to a registry, but the provider does not contribute to that data (for example they do not administer immunizations), the provider should not attest to meeting the measure but instead should select the exclusion. The provider may then select a different more relevant measure to meet.



# Medicaid Promoting Interoperability Program Modified Stage 2 Eligible Hospitals and Critical Access Hospitals Objectives and Measures for 2018

## Objective 9 of 9 *Updated: July 2018*

- If a provider does the action that results in a data element for a registry in the normal course of their practice and is in active engagement to submit to a registry, but simply has no cases for the reporting period, the provider is not required to take the exclusion and may attest to meeting the measure.

### Regulatory References

- This objective may be found in Section 42 of the code of the federal register at 495.22 (e)(9)(ii)(A)(B). For further discussion please see [80 FR 62824](#).
- In order to meet this objective and measure, an eligible hospital or CAH must use the capabilities and standards of CEHRT at 45 CFR 170.314 (f)(1), (f)(2) and (f)(3).

### Certification Standards and Criteria

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

Certification Criteria	
<b>§ 170.314(f)(1) Immunization information</b>	Enable a user to electronically record, change and access immunization information.
<b>§ 170.314(f)(2) Transmission to immunization registries</b>	EHR technology must be able to electronically create immunization information for electronic transmission in accordance with: (i) The standard and applicable implementation specifications specified in § 170.205(e)(3); and (ii) At a minimum, the version of the standard specified in § 170.207(e)(2).
<b>§ 170.314(f)(3) Transmission to public health agencies- syndromic surveillance</b>	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).
<b>§ 170.314(f)(4) Transmission of Reportable Laboratory Tests and Values/Results</b>	EHR technology must be able to electronically create reportable laboratory tests and values/results for electronic transmission in accordance with: (i) The standard (and applicable implementation specifications) specified in 170.205(g); and (ii) At a minimum, the versions of the standards specified in 170.207 (a)(3) and(c)(2).

**Medicaid Promoting Interoperability Program Modified Stage 2  
Eligible Hospitals and Critical Access Hospitals  
Objectives and Measures for 2018**

**Objective 9 of 9  
Updated: July 2018**

<b>Standards Criteria</b>	
<b>§ 170.205(e)(3)</b>	HL7 2.5.1 (incorporated by reference in § 170.299). Implementation specifications. HL7 2.5.1 Implementation Guide for Immunization Messaging, Release 1.4, (incorporated by reference in § 170.299).
<b>§ 170.207(e)(2) Immunizations</b>	HL7 Standard Code Set CVX -- Vaccines Administered, updates through July 11, 2012 (incorporated by reference in § 170.299).
<b>§ 170.205(d)(2)</b>	HL7 2.5.1.
<b>§ 170.205(d)(3)</b>	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).
<b>§ 170.205(g) Electronic transmission of lab results to public health agencies</b>	HL7 2.5.1 (incorporated by reference in § 170.299). Implementation specifications. HL7 Version 2.5.1 Implementation Guide: Electronic Laboratory Reporting to Public Health, Release 1 (US Realm) (incorporated by reference in § 170.299) with Errata and Clarifications, (incorporated by reference in § 170.299) and ELR 2.5.1 Clarification Document for EHR Technology Certification, (incorporated by reference in § 170.299)
<b>§ 170.207(a)(3)</b>	IHTSDO SNOMED CT® International Release July 2012 (incorporated by reference in § 170.299) and US Extension to SNOMED CT® March 2012 Release (incorporated by reference in § 170.299).
<b>§ 170.207(c)(2)</b>	Logical Observation Identifiers Names and Codes (LOINC®) Database version 2.40, a universal code system for identifying laboratory and clinical observations produced by the Regenstrief Institute, Inc. (incorporated by reference in § 170.299).

