

Promoting Interoperability

PROGRAMS

MEDICAID PROMOTING INTEROPERABILITY PROGRAM ELIGIBLE HOSPITAL AND CRITICAL ACCESS HOSPITALS OBJECTIVES AND MEASURES FOR 2019 OBJECTIVE 8 of 8

Public Health and Clinical Data Registry Reporting	
Objective	The eligible hospital or critical access hospital (CAH) is in active engagement with a public health agency (PHA) or clinical data registry (CDR) to submit electronic public health data in a meaningful way using certified electronic health record technology (CEHRT), except where prohibited, and in accordance with applicable law and practice.
Measure	A hospital must satisfy four measures for this objective. If the hospital cannot satisfy at least four measures, they may take exclusions from all measures they cannot meet. Measure 1: Immunization Registry Reporting - The eligible hospital or CAH is in active engagement with a PHA to submit immunization data and receive immunization forecasts and histories from the public health immunization registry/immunization information system (IIS). Measure 2: Syndromic Surveillance Reporting - The eligible hospital or CAH is in active engagement with a PHA to submit syndromic surveillance data from an urgent care setting. Measure 3: Electronic Case Reporting - The eligible hospital or CAH is in active engagement with a PHA to submit case reporting of reportable conditions. Measure 4: Public Health Registry Reporting - The eligible hospital or CAH is in active engagement with a PHA to submit data to public health registries. Measure 5: Clinical Data Registry Reporting - The eligible hospital or CAH is in active engagement to submit data to a CDR. Measure 6: Electronic Reportable Laboratory Result Reporting - The eligible hospital or CAH is in active engagement with a PHA to submit electronic reportable laboratory (ELR) results.
Exclusions	Measure 1: A hospital may take an exclusion if any of the following apply: 1. It does not administer any immunizations to any of the populations for which data is collected by their jurisdiction's immunization registry or IIS during the EHR reporting period;



	<p>2. It operates in a jurisdiction for which no immunization registry or IIS is capable of accepting the specific standards required to meet the CEHRT definition at the start of the EHR reporting period; or</p> <p>3. It operates in a jurisdiction where no immunization registry or IIS has declared readiness to receive immunization data as of six months prior to the start of the EHR reporting period.</p>
	<p>Measure 2: A hospital may take an exclusion if any of the following apply:</p> <ol style="list-style-type: none"> 1. It does not have an emergency or urgent care department; 2. It 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 EHR reporting period; or 3. It operates in a jurisdiction where no PHA has declared readiness to receive syndromic surveillance data from eligible hospitals or CAHs as of 6 months prior to the start of the EHR reporting period.
	<p>Measure 3: A hospital may take an exclusion if any of the following apply:</p> <ol style="list-style-type: none"> 1. It does not treat or diagnose any reportable diseases for which data is collected by their jurisdiction's reportable disease system during the EHR reporting period; 2. It operates in a jurisdiction for which no PHA is capable of receiving electronic case reporting data in the specific standards required to meet the CEHRT definition at the start of the EHR reporting period; or 3. It operates in a jurisdiction where no PHA has declared readiness to receive electronic case reporting data as of 6 months prior to the start of the EHR reporting period.
	<p>Measure 4: A hospital may take an exclusion if any of the following apply:</p> <ol style="list-style-type: none"> 1. It does not diagnose or directly treat any disease or condition associated with a public health registry in their jurisdiction during the EHR reporting period; 2. It operates in a jurisdiction for which no PHA is capable of accepting electronic registry transactions in the specific standards required to meet the CEHRT definition at the start of the EHR reporting period; or 3. It operates in a jurisdiction where no public health registry for which the eligible hospital or CAH is eligible has declared readiness

	<p>to receive electronic registry transactions as of 6 months prior to the start of the EHR reporting period.</p>
	<p>Measure 5: A hospital may take an exclusion if any of the following apply:</p> <ol style="list-style-type: none"> 1. It does not diagnose or directly treat any disease or condition associated with a CDR in their jurisdiction during the EHR reporting period; 2. It operates in a jurisdiction for which no CDR is capable of accepting electronic registry transactions in the specific standards required to meet the CEHRT definition at the start of the EHR reporting period; or 3. It operates in a jurisdiction where no CDR for which the eligible hospital or CAH is eligible has declared readiness to receive electronic registry transactions as of 6 months prior to the start of the EHR reporting period.
	<p>Measure 6: A hospital may take an exclusion if any of the following apply:</p> <ol style="list-style-type: none"> 1. It does not perform or order laboratory tests that are reportable in their jurisdiction during the EHR reporting period; 2. It 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 EHR reporting period; or 3. It operates in a jurisdiction where no PHA has declared readiness to receive electronic reportable laboratory results from an eligible hospital or CAH as of 6 months prior to the start of the EHR reporting period.

Table of Contents

- Definition of Terms
- Attestation Requirements
- Additional Information
- 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 public health agency or clinical data registry, or is sending production data to a public health agency or clinical data registry.

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 EHR 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 EHR 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 EHR 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.

Additional Information

- Eligible hospitals must use [2015 Edition CEHRT](#) to meet Stage 3 meaningful use.
- Eligible hospitals must attest to *at least four measures* from the Public Health Reporting Objective, Measures 1 through 6.
- If PHAs have not declared 6 months before the start of the EHR reporting period whether the registry they are offering will be ready on January 1 of the upcoming year for use by hospitals, a hospital can claim an exclusion.
- An exclusion for a measure does not count toward the total of four measures. Instead, in order to meet this objective, a hospital needs to meet four of the total number of measures available to it. If the hospital qualifies for multiple exclusions and the total number of remaining measures available to the eligible hospital is less than four, the hospital can meet the objective by meeting all of the remaining measures available to them and claiming the applicable exclusions. Available measures are ones for which the hospital does not qualify for an exclusion.
- For Measure 1, an exclusion does not apply if an entity designated by the immunization registry or IIS 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 has designated a Health Information Exchange (HIE) to do so on its behalf and the HIE is capable of accepting the information in the standards required by CEHRT, the hospital could not claim the second exclusion.

- For Measure 1, the hospital's health IT system may layer additional information on the immunization history, forecast, and still successfully meet this measure.
- Bi-directionality provides that certified health IT must be able to receive and display a consolidated immunization history and forecast in addition to sending the immunization record.
- 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 has designated a HIE to do so on its behalf and the HIE is capable of accepting the information in the standards required by CEHRT, the hospital could not claim the second exclusion.
- For Measure 4, eligible hospitals may choose to report to more than one public health registry to meet the number of measures required to meet the objective.
- For Measure 4, a hospital may count a specialized registry (such as prescription drug monitoring) if the hospital achieved the phase of active engagement defined under Active Engagement Option 3: Production, including production data submission with the specialized registry in a prior year under the applicable requirements of PI programs in that year.
- For Measure 5, eligible hospitals may choose to report to more than one clinical data registry to meet the number of measures required to meet the objective.
- For Measure 5, the definition of jurisdiction is general, and the scope may be at the local, state, regional or national level. The definition will be dependent on the type of registry to which the hospital is reporting. A registry that is "borderless" would be considered a registry at the national level and is included for purposes of this measure.
- Hospitals 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 hospital may simply attest to the active engagement option which most closely reflects their current status.
- If a hospital is part of a group which submits data to a registry, but the hospital does not contribute to that data (for example they do not administer immunizations), the hospital should not attest to meeting the measure, but instead should select the exclusion. The hospital may then select a different more relevant measure to meet.
- If a hospital 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 hospital is not required to take the exclusion and may attest to meeting the measure.

Regulatory References

This objective may be found at [42 C.F.R. § 495.24 \(d\)\(8\)\(ii\)\(A\) and \(B\)](#). For further discussion please see [80 FR 62870](#).

Certification Standards and Criteria

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

Certification Criteria

Information about certification for 2015 Edition CEHRT can be found at:

[§170.315\(f\)\(1\) Transmission to immunization registries](#)

[§170.315\(f\)\(2\) Transmission to public health agencies – syndromic surveillance](#)

[§170.315\(f\)\(3\) Transmission to public health agencies – reportable laboratory tests](#)

[§170.315\(f\)\(5\) Transmission to public health agencies – electronic case reporting](#)

[§170.315\(f\)\(6\) Transmission to public health agencies – antimicrobial use and resistance reporting](#)

[§170.315\(f\)\(7\) Transmission to public health agencies – health care surveys](#)

Standards Criteria

Standards for 2015 Edition CEHRT can be found at the ONC's 2015 Standards Hub:

<https://www.healthit.gov/topic/certification/2015-standards-hub>