The Electronic Health Record (EHR) Incentive Programs for Stage 3 includes a consolidated public health reporting objective for Medicaid-only eligible hospitals. Below is an overview of the public health reporting objective, measures, and exclusions for Medicaid-only eligible hospitals. Details on how to successfully demonstrate “active engagement” for public health reporting are also provided.

**Note:** The Calendar Year (CY) 2017 Changes to the Hospital Outpatient Prospective Payment System (OPPS) and Ambulatory Surgical Center (ASC) rule includes changes to the Medicare EHR Incentive Program for eligible hospitals and dual-eligible hospitals under Medicaid. The OPPS rule does not affect eligible hospitals only participating in the Medicaid EHR Incentive Program.

**Public Health Reporting Objective and Measures**

**Objective:** The eligible hospital or CAH is in active engagement with a public health agency or clinical data registry to submit electronic public health data in a meaningful way using certified EHR technology (CEHRT), except where prohibited, and in accordance with applicable law and practice.

**Measures:** The Stage 3 public health reporting objective for eligible hospitals and CAHs includes six measures. Eligible hospitals and CAHs must attest to any four measures under a State’s Medicaid EHR Incentive Program.

<table>
<thead>
<tr>
<th>Measure Name and Number</th>
<th>Measure Specification</th>
<th>Maximum Times Measure Can Count Towards the Objective Under the Medicaid EHR Incentive Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>Measure 1—Immunization Registry Reporting</td>
<td>The eligible hospital or CAH is in active engagement with a public health agency to submit immunization data receive immunization forecasts and histories from the public health immunization registry/immunization information system (IIS)</td>
<td>1</td>
</tr>
<tr>
<td>Measure 2—Syndromic Surveillance Reporting</td>
<td>The eligible hospital or CAH is in active engagement with a public health agency to submit syndromic surveillance data from and urgent care setting</td>
<td>1</td>
</tr>
<tr>
<td>Measure 3—Electronic Case Reporting</td>
<td>The eligible hospital or CAH is in active engagement with a public health agency to submit case reporting of reportable conditions</td>
<td>1</td>
</tr>
<tr>
<td>Measure 4—Public Health Registry Reporting</td>
<td>The eligible hospital or CAH is in active engagement with a public health agency to submit data to public health registries</td>
<td>4 for eligible hospitals *</td>
</tr>
<tr>
<td>Measure 5—Clinical Data Registry Reporting</td>
<td>The eligible hospital or CAH is in active engagement to submit data to a clinical data registry</td>
<td>4 for eligible hospitals *</td>
</tr>
<tr>
<td>Measure 6—Electronic Reportable Laboratory Result Reporting</td>
<td>The eligible hospital or CAH is in active engagement with a public health agency to submit electronic reportable laboratory results</td>
<td>1</td>
</tr>
</tbody>
</table>

*An eligible hospital or CAH may choose to report to more than one public health registry to meet the number of measures required to meet the objective.

**Eligible hospitals and CAHs may choose to report to more than one clinical data registry to meet the number of measures required to meet the objective.

Public Health Reporting Exclusions
There are multiple exclusions for each of the public health reporting measures. For a complete list, see the [Stage 3 specification sheets for Medicaid Eligible Hospitals](#).

For eligible hospitals, an exclusion for a measure does not count toward the total of number of required measures. Instead, in order to meet this objective, an eligible hospital participating in the Medicaid EHR Incentive Program would need to meet four of the total number of measures available to them. (Available measures include ones for which the eligible hospital does not qualify for an exclusion.)

If the eligible hospital qualifies for multiple exclusions and the total number of remaining measures available to the eligible hospital is less than four, the eligible hospital can meet the objective by meeting all of 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.
Demonstrating “Active Engagement” for Public Health Reporting

Eligible hospitals 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.

Active engagement may be demonstrated through the following ways:

- **Active Engagement Option 1—Completed Registration to Submit Data**: The eligible hospital 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 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 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 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 previous stages of meaningful use can count toward option 1 of the active engagement requirement for purposes of attesting to Stage 3. Providers must register with a public health agency or clinical data registry for each measure they intend to use to meet meaningful use. 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.

If a registry declares readiness at any point in the calendar year after the initial 60 days, a provider may still register their intent to report with that registry to meet the measure under Active Engagement Option 1. However, a provider who could report to that registry may still exclude for that calendar year if they had already planned to exclude based on the registry not being ready to allow for registrations of intent within the first 60 days of the reporting period. (see FAQ 14393: [https://questions.cms.gov/faq.php?id=5005&faqld=14393](https://questions.cms.gov/faq.php?id=5005&faqld=14393))

If public health agencies 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 providers seeking to meet EHR reporting periods in that upcoming year, a provider can claim an exclusion.
• **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, if the organization reports at the group level, as long as the provider is contributing to the data reported by the group. If the provider does not contribute to the data, they must claim the exclusion if applicable and/or meet another public health reporting measure.

• **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**
- Visit the CMS [EHR Incentive Programs website](https://www.cms.gov/).