

# Medicare Promoting Interoperability PROGRAM

## 2022 MEDICARE PROMOTING INTEROPERABILITY PROGRAM FOR ELIGIBLE HOSPITALS AND CRITICAL ACCESS HOSPITALS

### Public Health and Clinical Data Exchange Objective Fact Sheet

On August 13, 2021, the Centers for Medicare & Medicaid Services (CMS) published the [Fiscal Year 2022 Medicare Hospital Inpatient Prospective Payment System for Acute Care Hospitals and Long-term Care Hospital Prospective Payment System Final Rule](#). In the rule, CMS continued its focus on the advancement of certified electronic health record technology (CEHRT) utilization, and improving interoperability and patient access to health information for the Medicare Promoting Interoperability Program for eligible hospitals and critical access hospitals (CAHs). We finalized changes to the Public Health and Clinical Data Exchange objective.

The information included in this fact sheet pertains to the Public Health and Clinical Data Exchange objective for the Medicare Promoting Interoperability Program in calendar year (CY) 2022.

**Public Health and Clinical Data Exchange Objective:** Measures that an eligible hospital or CAH attests yes to being 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 CEHRT except where prohibited, and in accordance with applicable law and practice.

Please refer to the 2022 Medicare Promoting Interoperability Program [Specification Sheets](#) for more information.

### Required Measures

#### Measure 1: Immunization Registry Reporting

- **Measure description:** 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).
- **Exclusion:** 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:
  - (i) Does not administer any immunizations to any of the populations for which data are collected by their jurisdiction's immunization registry or IIS during the electronic health record (EHR) reporting period;



- (ii) 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
- (iii) 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.
- **Maximum points available for this measure:** 10 points (for reporting on the four required measures).

### **Measure 2: Syndromic Surveillance Reporting**

- **Measure description:** The eligible hospital or CAH is in active engagement with a PHA to submit syndromic surveillance data from an emergency department.
- **Exclusion:** 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:
  - (i) Does not have an emergency department;
  - (ii) 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
  - (iii) Operates in a jurisdiction where no PHA has declared readiness to receive syndromic surveillance data from eligible hospitals or CAHs as of six months prior to the start of the EHR reporting period.
- **Maximum points available for this measure:** 10 points (for reporting on the four required measures).

### **Measure 3: Electronic Case Reporting**

- **Measure description:** The eligible hospital or CAH is in active engagement with a PHA to submit case reporting of reportable conditions.
- **Exclusion:** Any eligible hospital or CAH meeting one or more of the following criteria may be excluded from the case reporting measure if the eligible hospital or CAH:
  - (i) Does not treat or diagnose any reportable diseases for which data are collected by their jurisdiction's reportable disease system during the EHR reporting period;
  - (ii) 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
  - (iii) Operates in a jurisdiction where no PHA has declared readiness to receive electronic case reporting data as of six months prior to the start of the EHR reporting period.
- **Maximum points available for this measure:** 10 points (for reporting on the four required measures).

## Measure 4: Electronic Reportable Laboratory Result Reporting

- **Measure description:** The eligible hospital or CAH is in active engagement with a PHA to submit electronic reportable laboratory (ELR) results.
- **Exclusion:** 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:
  - (i) Does not perform or order laboratory tests that are reportable in their jurisdiction during the EHR reporting period;
  - (ii) 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
  - (iii) Operates in a jurisdiction where no PHA has declared readiness to receive ELR results from an eligible hospital or CAH as of six months prior to the start of the EHR reporting period.
- **Maximum points available for this measure:** 10 points (for reporting on the four required measures).

## Bonus Measures

### Bonus Measure: Public Health Registry Reporting

- **Measure description:** The eligible hospital or CAH is in active engagement with a PHA to submit data to public health registries.
- **Maximum points available for this measure:** 5 bonus points (for reporting on one of the two Public Health and Clinical Data Exchange objective bonus measures).

### Bonus Measure: Clinical Data Registry Reporting

- **Measure description:** The eligible hospital or CAH is in active engagement to submit data to a clinical data registry.
- **Maximum points available for this measure:** 5 bonus points (for reporting on one of the two Public Health and Clinical Data Exchange objective bonus measures).

## Scoring

Eligible hospitals and CAHs are required to report on the **four measures** under the Public Health and Clinical Data Exchange objective. Reporting a “yes” response for the four measures will result in 10 points for the objective. If an eligible hospital or CAH is able to claim an exclusion for three or fewer of the four required measures, 10 points will be granted for the Public Health and Clinical Data Exchange objective if they report “yes” for one or more of the measures and claim applicable exclusions for which they qualify for the remaining measures. If an eligible hospital or CAH claims exclusions for all four required measures, the 10 points would be

redistributed to the Provide Patients Electronic Access to Their Health Information measure under the Provider to Patient Exchange objective.

Objective	Measures	Maximum Points Available in CY 2022	CY 2022 Exclusions Available
<b>Public Health and Clinical Data Exchange</b>	Immunization Registry Reporting	10 points	Yes
	Syndromic Surveillance Reporting		
	Electronic Case Reporting		
	Electronic Reportable Laboratory Result Reporting		
	<b>Bonus:</b> Public Health Registry Reporting <u>OR</u> Clinical Data Registry Reporting	5 bonus points	No

### Additional Resources

For more information on the Public Health and Clinical Data Exchange objective and other Medicare program requirements for 2022, visit:

- [Promoting Interoperability Programs Landing page](#)
- [Scoring, Payment Adjustment, and Hardship Information webpage](#)
- [2022 Medicare Promoting Interoperability Program Specification Sheets](#)