

# **lowa Department of Public Health Promoting and Protecting the Health of Iowans**

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### **PUBLIC HEALTH MEANINGFUL USE MEASURES**

**UPDATE TO LETTER ISSUED May 1, 2013** 

October 29, 2013

**Iowa Providers:** 

For healthcare providers and laboratories NOT pursuing achievement of the federal meaningful use requirements, methods of submitting data to IDPH still exist which will NOT require enrollment in the lowa Health Information Network (IHIN). Data can be submitted to Iowa's Immunization Registry Information System (IRIS, a voluntary data collection system which captures immunization data) and the Iowa Disease Surveillance System (IDSS, to which healthcare providers and laboratories must submit data) without the need to enroll in the IHIN.

For healthcare providers who ARE pursuing achievement of the federal Meaningful Use requirements, the Iowa Department of Public Health (IDPH) is committed to helping Iowa providers achieve meaningful use of health information technology. As part of successful completion of Stage One Meaningful Use, providers or hospitals must select one of the three public health measures. IDPH is ready to receive Stage One test messages for both immunizations and laboratory reporting.

During Stage 2 Meaningful Use, all three public health measures from Stage 1 become core objectives and ongoing electronic submission of data in all three areas is required where supported. Only two of the three are supported in Iowa as indicated below. The state cancer reporting is new to Stage 2. While the Department believes that Stage 2 Meaningful Use can be met through batch file upload of data to the IRIS system, thereby avoiding enrollment in the IHIN in the immediate term, achieving the connection to the IDSS system – an additional requirement of Stage 2 Meaningful Use - will require facilities to enroll in the IHIN. To begin the process providers/hospitals must sign a participation agreement with the IHIN. The agreement can be obtained on our website at <a href="http://www.iowaehealth.org/provider">http://www.iowaehealth.org/provider</a> or by emailing <a href="http://www.iowaehealth.org/provider">health@idph.iowa.gov</a>.

#### Current Public Health measure status:

- ✓ Immunizations lowa's Immunization Registry Information System (IRIS) has the capacity to receive immunization data electronically from electronic health records. The IDPH is in the process of transitioning health care providers to the Iowa Health Information Network (IHIN) for ongoing data exchange. Initially, health care providers are being prioritized based upon the volume of immunizations administered to patients. Upon successful submission of HL7 messages health care providers will be placed in queue for ongoing data transmission as IDPH resources are available. IRIS Data Exchange file specifications are posted on the IRIS website, under the Forms tab. Immunization meaningful use documents are available on the IDPH IRIS website.
- ✓ <u>Electronic Lab Reporting</u> IDPH is capable to assist facilities achieve Stage One and Stage Two Meaningful Use for electronic laboratory reporting (ELR). The IDPH SmartLab™, a component of the IHIN, is required to implement ongoing submission of laboratory reports and achieve the Meaningful Use Stage Two objective. The implementation guide for electronic laboratory reporting and testing is available at <a href="http://www.idph.state.ia.us/adper/idss.asp">http://www.idph.state.ia.us/adper/idss.asp</a>.
- X <u>Syndromic Surveillance</u> IDPH does not maintain a syndromic surveillance data registry at present and therefore cannot accept syndromic data electronically from electronic health records. The IDPH is conducting an assessment to determine if syndromic data will be electronically collected in the future; however there has not been any decision made at this time.
- ✓ Cancer Reporting The State Health Registry of Iowa/Iowa Cancer Registry is working with IDPH and the IHIN to move forward with the objectives of Stage 2 MU in Iowa. A timeframe has not yet been determined. Information about the reporting file layout can be found at <a href="http://www.cdc.gov/ehrmeaningfuluse/cancer.html">http://www.cdc.gov/ehrmeaningfuluse/cancer.html</a> If you are interested in testing with the Iowa Cancer Registry please email Registry Director, Kathleen McKeen at <a href="https://www.edu.gov/ehrmeaningfuluse/cancer.html">kathleen-mckeen@uiowa.edu</a>

Sincerely,

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Iowa Department of Public Health

## FAQ for Meaningful Use and Public Health May 1, 2013

### Q: Does my facility have to enroll with the Iowa Health Information Network (IHIN) to achieve the Meaningful Use public health objectives?

A: Yes in Stage Two

The Stage One Meaningful Use objectives require that test messages in the appropriate format be submitted to the Iowa Department of Public Health (IDPH). The key element in Stage 1 is the structure and content of the message. The message itself does not need to be submitted to IDPH via the IHIN; in fact, IDPH requests that the test messages be submitted by e-mail.

The Stage Two Meaningful Use objectives require on-going electronic submission of data. IDPH is using the IHIN in order to minimize the number of connections that must be maintained with data sharing partners. Any facility pursuing the Meaningful Use public health objectives must enroll with the IHIN.

### Q: If my facility does not intend to pursue the achievement of Meaningful Use Stage 2, will I still be required to enroll in the IHIN in order to maintain my legal reporting requirements?

A: Healthcare providers NOT pursuing Meaningful Use Stage 2 will be able to meet their legal requirements of reporting to the Iowa Disease Surveillance System (IDSS) through existing methods of direct data entry of information into IDSS. While not legally required, providers will also be able to submit data to Iowa's Immunization Registry Information System (IRIS) either through a batch upload or direct web-based entry into this system, not requiring use of the IHIN.

### Q: What costs are associated with enrolling for IHIN services?

A: Costs for IHIN connectivity are dependent upon organization size and type. More information is available on the website at http://www.iowaehealth.org.

#### Q: When will the IDPH be ready to accept Syndromic surveillance data?

A: The Iowa Department of Public Health is exploring the possibility of adopting the latest PHIN specification, currently the *PHIN Messaging Guide for Syndromic Surveillance: Emergency Department and Urgent Care Data, Release 1.9 (April 2013)* and using the CDC-sponsored BioSense 2.0 application for syndromic surveillance. It is unlikely that IDPH will begin a project related to syndromic surveillance before federal fiscal year 2015.

### Q: How do I report to the Iowa Cancer Registry?

A: Cancer data can be reported by via Direct Secure Messaging via the IHIN. Since 1982 cancer has been a reportable disease in Iowa and the State Health Registry of Iowa/Iowa Cancer Registry at the University of Iowa has been delegated the responsibility for collecting data on cancer. Since the Iowa Cancer Registry database is used for research, chapter 135.40 of the Iowa Administrative Code protects persons and hospitals from liability of any kind or character by reason of having provided such information.

### **Program Contact Information**

IDSS - elr@idph.iowa.gov

IHIN - ehealth@idph.iowa.gov

IRIS - imm.meaningfuluse@idph.iowa.gov

Iowa Cancer Registry - Kathleen-mckeen@uiowa.edu