Iowa Department of Public Health
Promoting and Protecting the Health of Iowans

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PUBLIC HEALTH MEANINGFUL USE MEASURES
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Iowa Providers:

For healthcare providers and laboratories NOT pursuing the federal meaningful use requirements, there are methods of submitting data to IDPH which will NOT require enrollment in the Iowa Health Information Network (IHIN). Data can be submitted to Iowa's Immunization Registry Information System (IRIS, a voluntary data collection system for immunization data) and the Iowa Disease Surveillance System (IDSS, to which healthcare providers and laboratories must submit data) without enrolling 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 1 Meaningful Use, providers or hospitals must select one of the three public health measures. IDPH is ready to receive Stage 1 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 areas is required where supported. Only three of the four measures are supported in Iowa as indicated below with a check mark. The state cancer reporting is new to Stage 2. Achieving the connection to IDSS is an additional requirement of Stage 2 Meaningful Use and requires 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 http://www.iowaehealth.org/provider or by emailing ehealth@idph.iowa.gov.

Current Public Health measure status:

- ✓ **Immunizations** - Iowa's Immunization Registry Information System (IRIS) has the capacity to receive immunization data electronically from electronic health records. Upon successful submission of HL7 messages, health care providers can transition to ongoing data exchange. IRIS Data Exchange file specifications are posted on the IRIS website, under the Forms tab. Stage 1 immunization meaningful use documents are available on the IDPH IRIS website.
- ✓ **Electronic Lab Reporting** - IDPH is capable to assist facilities achieve Stage 1 and Stage 2 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 2 objective. The implementation guide for electronic laboratory reporting and testing is available at http://www.idph.state.ia.us/adper/idss.asp.
- ✓ **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. Information about the reporting file layout can be found at http://www.cdc.gov/ehrmeaningfuluse/cancer.html. The on-boarding process is outlined in a checklist found at http://iowaehealth.org/documents/cms/docs/Resources/Meaningful_Use/Cancer_Registry/IDPH_Cancer_Registry_Checklist_.pdf
- X **Syndromic Surveillance** - 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.

Sincerely,

Gerd W. Clabaugh, MPA
Director

FAQ for Meaningful Use and Public Health
February 27, 2015

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 2

The Stage 1 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.

The Stage 2 Meaningful Use objectives require on-going electronic submission of data. IDPH is using the IHIN to minimize the number of connections that must be maintained with data sharing partners. Any facility pursuing the electronic laboratory Meaningful Use public health objective must enroll with the IHIN.

Q: If my facility does not intend to pursue Meaningful Use Stage 2, am I still 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. Healthcare providers will continue to have the option of direct data entry for both IDSS and IRIS.

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: How do I report to the Iowa Cancer Registry?

A: Cancer data can be reported via the IHIN using Secure File Transfer. 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. To enroll please submit attachment F of the Participation Agreement found here: http://iowaehealth.org/documents/cms/docs/Resources/Meaningful_Use/Cancer_Registry/Attachment_F.pdf

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 2016.

Program Contact Information
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