

lowa Department of Public Health Protecting and Improving the Health of Iowans

Kim Reynolds Governor Adam Gregg Lt. Governor

PUBLIC HEALTH ADVANCING CARE INFORMATION (MEANINGFUL USE) MEASURES

UPDATE TO LETTER ISSUED JULY 2016

Iowa Providers:

June 30, 2017

The Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) and the Merit-based Incentive Payment System (MIPS) has incorporated Meaningful Use of certified electronic health record technology (CEHRT) into one of the four statutory pillars of the MIPS incentive structure; it falls within "advancing care information." The Iowa Department of Public Health (IDPH) is committed to helping Iowa providers in meeting Meaningful use objectives and advancing care information.

Public health measures supported in Iowa are indicated below with a check mark; those not currently supported are marked with an "X". Current Public Health measure status:

- Immunizations Iowa's Immunization Registry Information System (IRIS) can receive immunization data electronically from electronic health records, and bidirectional exchange is available. IRIS Data Exchange file specifications are posted on the IRIS website, under the Forms tab. The IRIS Data Exchange On-Boarding Form is used to initiate data exchange and serves as the registration of intent to submit to Iowa's immunization registry.
- ✓ <u>Electronic Lab Reporting</u> IDPH is supporting electronic laboratory reporting (ELR) for all stages of Meaningful Use. The IDPH smartLab[™], a component of the IHIN, is required to implement ongoing submission of laboratory reports and achieve the Meaningful Use objective. The implementation guide for electronic laboratory reporting and testing is available at http://www.idph.state.ia.us/adper/idss.asp.
- X <u>Syndromic Surveillance</u> IDPH is not currently supporting syndromic surveillance.
- ✓ <u>Electronic Case Reporting (eCR)</u> IDPH is supporting this Meaningful Use Stage 3 public health objective. This objective compliments ELR for communicable and infectious disease surveillance. For more information or to register, send an e-mail to <u>ELR@idph.iowa.gov</u>.
- ✓ <u>Special Registries</u> IDPH is actively reviewing additional potential special registries that may fall under the MU objectives. The following have been identified as supported special registries:
 - Cancer Reporting from Ambulatory Providers 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 Meaningful Use in Iowa. Information on Ambulatory Healthcare Provider Reporting to Central Cancer Registries including the file layout and implementation guide may 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
 - ✓ Newborn Screening The lowa Newborn Screening Information System (INSIS) is a secure, web-based system for reporting newborn hearing screening results in lowa. This specialized registry option is available to eligible birthing facilities who conduct these types of newborn screenings and follow-up testing. INSIS has the capacity to receive newborn hearing screening data electronically from electronic health records using HL7 messaging. For more information, contact ccid@idph.iowa.gov.

To begin the process of connecting to the lowa Health Information Network (IHIN) for the state public health measures, providers/hospitals must sign a participation agreement with the IHIN. The agreement can be obtained at http://www.iowaehealth.org/provider or by emailing info@ihin.org.

For Eligible Professionals and Eligible Hospitals <u>not</u> pursuing Meaningful Use, methods of submitting immunization data to the IDPH do exist which do not require enrollment in the IHIN.

Sincerely,

Lon Lattey

Chief Information Officer

FAQ for Meaningful Use and Public Health June 30, 2017

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

A: Yes, for all Eligible Hospitals pursuing Stage 2 or 3 of Meaningful Use objectives where the IHIN provides services or infrastructure to meet the objective, such as with electronic laboratory, must enroll with the IHIN.

Eligible Professionals pursuing Stage 2 or 3 Meaningful Use are not required to enroll with the IHIN. However, if Eligible Professionals are interested in meeting an objective where the IHIN provides services or infrastructure to meet that objective, such as with the state cancer registry, enrollment with the IHIN is required.

Q: If my facility does not intend to pursue Meaningful Use Stage 2 or Stage 3, 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 or 3 will be able to meet their legal requirements of reporting to the Iowa Disease Surveillance System (IDSS) through existing methods of reporting for infectious and communicable disease, environmental health conditions, and AIDS/HIV reporting. 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 not supporting syndromic surveillance at this time and does not have an active project preparing for syndromic surveillance.

Q: Who do I talk to if I have additional questions regarding Meaningful Use?

A: Please contact John Satre at john.satre@idph.iowa.gov or 515.725.2212.

IDPH Program Contact Information

Electronic Laboratory Reporting - elr@idph.iowa.gov
Electronic Case Reporting - elr@idph.iowa.gov
IRIS - 1-800-374-3958 or imm.meaningfuluse@idph.iowa.gov
Newborn screening - ccid@idph.iowa.gov
Iowa Cancer Registry - shrimeaningfuluse@uiowa.edu
IHIN General Information - info@ihin.org
IHIN Helpdesk - support@ihin.org