

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

Kim Reynolds Governor Adam Gregg Lt. Governor

June 14, 2019

PUBLIC HEALTH ADVANCING CARE INFORMATION (Promoting Interoperability) MEASURES UPDATE TO LETTER ISSUED JUNE 2017

Iowa Providers:

The Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) and the Merit-based Incentive Payment System (MIPS) has incorporated Promoting Interoperability for 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 Promoting Interoperability 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".

- ✓ <u>Immunizations</u> Iowa's Immunization Registry Information System (IRIS) can receive immunization data electronically from electronic health records, and bidirectional exchange is available. IRIS Data Exchange specifications are posted on the IRIS <u>website</u>, under the Forms tab. The <u>IRIS Data Exchange On-Boarding Form</u> is used to initiate data exchange and serves as the registration of intent to submit to Iowa's immunization registry.
- ✓ <u>Electronic Lab Reporting (ELR)</u> IDPH is supporting ELR for all stages of Promoting Interoperability. The IDPH smartLab[™], a component of the IHIN, is required to implement ongoing submission of laboratory reports and achieve the Promoting Interoperability 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 Promoting Interoperability 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>.
- Special Registries 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 Promoting Interoperability objectives 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 Iowa. 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.
 - ✓ Prescription Monitoring Program (PMP) IDPH is supporting use of the lowa PMP as a Promoting Interoperability objective. The lowa PMP, otherwise known as AWARXE, is a database of Schedule 2, 3 and 4 controlled substance prescription drugs dispensed by in-state and non-resident pharmacies, and from the offices of prescribers to lowa residents. The controlled substance prescription data is reported and uploaded to the PMP no later than the next business day following dispensation of the medication. Any prescriber with a valid DEA number is eligible to obtain a PMP account. Consultation of the Prescription Monitoring Program (PMP) may qualify as a Promoting Interoperability (formerly Meaningful Use) objective.
 - > PMP account registration FAQs can be found at https://pharmacy.iowa.gov/iowa-pmp-awarxe.
 - To apply for a PMP user account please visit https://iowa.pmpaware.net.

To begin the process of connecting to the Iowa Health Information Network (IHIN) for the state public health measures, providers/hospitals must sign a participation agreement which can be obtained at http://www.iowaehealth.org/provider or by emailing info@ihin.org. For Eligible Professionals and Eligible Hospitals not pursuing Promoting Interoperability, methods of submitting immunization data to the IDPH do exist which do not require enrollment in the IHIN.

Sincerely

Lon Laffey, Chief Information Officer

FAQ for Promoting Interoperability and Public Health June 12, 2019

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

A: Yes, all Eligible Hospitals pursuing Stage 2 or 3 of Promoting Interoperability objectives where the IHIN provides services or infrastructure to meet the objective, such as with ELR, must enroll with the IHIN.

Eligible Professionals pursuing Stage 2 or 3 Promoting Interoperability 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 Promoting Interoperability, will I still be required to enroll in the IHIN in order to maintain my legal reporting requirements?

A: Healthcare providers NOT pursuing Promoting Interoperability 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 https://www.ihin.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 Promoting Interoperability (formerly 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

PMP - 844-442-4767 or https://apprisspmp.zendesk.com/hc/en-us/requests/new

IHIN General Information – info@ihin.org

IHIN Helpdesk - support@ihin.org