

NH Division of Public Health Services

Updated Meaningful Use Quick Reference Guide – 2018 Program Year

Eligible Hospital (EH & CAH)

**EHs and CAH attesting for MU3 in 2018 and beyond have six measure options;
Stage 3: Objective 8: Public Health and Clinical Data Registry Reporting.
EH & CAH must meet a Total of 4 measures**

| Objective | Stage | Measure | Explanation | State Status | Additional Information |
|--|---------|---|--|---|---|
| Stage 3 Objective 8: Public Health and Clinical Data Reporting | Stage 3 | Measure 1: Immunization Registry Reporting | The EH or CAH is in active engagement with a public health agency to submit immunization data and receive immunization forecasts and histories from the public health immunization registry/immunization information system (IIS). | <p>NH DPHS is not accepting Stage 3 immunization data from EHs and CAHs for 2018.</p> <p>The Registry is in the process of being implemented. Pilot sites will be selected to participate as resources allow</p> | <p>ONC-Adopted Standard(2015 CEHRT) HL7 2.5.1 HL7 Version 2.5.1: Implementation Guide for Immunization Messaging, Release 1.5 (October 2014) and Addendum (July 2015)</p> |
| Stage 3 Objective 8: Public Health and Clinical Data Reporting | Stage 3 | Measure 2: Syndromic Surveillance Reporting | The EH or CAH is in active engagement with a public health agency to submit syndromic surveillance data from an urgent care setting. | <p>NH DPHS is not accepting Stage 3 syndromic surveillance data into test and production systems for 2018.</p> <p>The PHIN messaging guide for hospital syndromic surveillance is upgraded to version 2.0 in the 2015 Edition CEHRT</p> <p>NH has an operating syndromic surveillance system (Sys) however due to local law and custom, message receiving and transformation processes to accept the new structure/data will not be in-place for the 2018 reporting period as enhancements are made.</p> <p>EHs and CAHs will need to work with DPHS to assure that messages created by the EH or CAH can be accepted into the operating syndromic surveillance system.</p> | <p>ONC-Adopted Standard(2015 CEHRT) HL7 2.5.1 PHIN Messaging Guide for Syndromic Surveillance: Emergency Department, Urgent Care, Ambulatory Care and Inpatient Settings, Release 2.0</p> |

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|--|---------|--|---|---|---|
| Stage 3 Objective 8: Public Health and Clinical Data Reporting | Stage 3 | Measure 3- Electronic Case Reporting (For Stage 3 in 2018 only) | Electronic Case Reporting: The EH or CAH is in active engagement with a public health agency to submit case reporting of reportable conditions. | NH DPHS is not accepting Stage 3 Electronic Case Reporting from Eligible Hospitals and CAH for 2018 | Per guidelines in the ONC 2015 Edition Certification Final Rule |
| Stage 3 Objective 8: Public Health and Clinical Data Reporting | Stage 3 | Measure 4: Public Health Registry Reporting* *For Measures 4 and 5, a Provider may report to more than one public health and/or clinical data registry and may count public health and/or clinical data registry reporting more than once to meet the required number of measures for the Public Health and Clinical Data Registry Reporting objective. | Public Health Registry Reporting: The EH or CAH is in active engagement to submit data to public health registries. Starting in Stage 3, all Public Health Registries and Clinical Data Registries must use certified standards for meaningful use transactions. | NH DPHS is not accepting Stage 3 Public Health Registry Reporting from Eligible Hospitals and CAH for 2018*. Cancer case reporting is the only Registry NH DPHS has readiness for (EP only). | The Cancer Implementation Guide for ambulatory provider cancer reporting to state cancer registries is updated to HL7 CDA [®] Release 2 Implementation Guide: Reporting to Public Health Cancer Registries from Ambulatory Healthcare Providers, Release 1, DSTU Release 1.1 – US Realm in the 2015 Edition CEHRT. (EP Only) Additional Registries available: <ul style="list-style-type: none"> • Antimicrobial use and resistance reporting to NHSN-HL7 Implementation Guide for CDA[®] Release 2 –Level 3: Healthcare Associated Infection Reports, Release 1, U.S. Realm (August 2013) (Eligible Hospital/CAH only) • NCHS Health care surveys-HL7 Implementation Guide for CDA[®] Release 2: National Health Care Surveys (NHCS), Release 1—US Realm, Draft Standard for Trial Use (December 2014) |
| Stage 3 Objective 8: Public Health and Clinical Data Reporting | Stage 3 | Measure 5: Clinical Data Registry Reporting* *For Measures 4 and 5, a Provider may report to more than one public health and/or clinical data registry and may count public health and/or clinical data registry | Measure 5 – Clinical Data Registry Reporting: The EH or CAH is in active engagement to submit data to a clinical data registry. | NH DPHS is not accepting Stage 3 Clinical Data Registry Reporting from Eligible Hospitals and CAH for 2018*. | |

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|--|---------|--|--|---|---|
| | | reporting more than once to meet the required number of measures for the Public Health and Clinical Data Registry Reporting objective. | | | |
| Stage 3 Objective 8: Public Health and Clinical Data Reporting | Stage 3 | Measure 6: Electronic Reportable Laboratory | Measure 6 – Electronic Reportable Laboratory Result Reporting: The EH or CAH is in active engagement with a public health agency to submit electronic reportable laboratory (ELR) results. | NH DPHS is accepting Stage 3 submission of electronic reportable laboratory results into test and production systems as applicable from EHs and CAHs for 2018.* Despite no changes, there may be a need to revalidate if a hospital updates or purchases new certified software. | <p><u>HL7 2.5.1 HL7 Version 2.5.1 Implementation Guide: Electronic Laboratory Reporting to Public Health, Release 1 (US Realm), with Errata and Clarifications</u></p> <p>NH Link to ELR Local Implementation Guide: http://www.dhhs.nh.gov/dphs/bphsi/documents/elrguide.pdf</p> <p>NH Statutes - RSA 141-C:7 (Reporting of Communicable Disease), 141-C:8 (List of Diseases; Report Forms), and RSA 130-A (Lead Paint Poisoning Prevention and Control) Administrative Rules - He-P 301.02, He-P 301.03 (reportable disease), and He-P 1600 (lead paint poisoning)</p> |

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Eligible Professionals (EP)

**EPs attesting for MU3 2018 and beyond have five measure options;
Stage 3: Objective 8: Public Health and Clinical Data Registry Reporting.**

To meet MU3, Objective 8: Public Health and Clinical Data Registry Reporting, EPs must meet two measures,

| Objective | Stage | Measure | Explanation | State Status | Additional Information |
|--|---------|--|--|--|--|
| Stage 3 Objective 8: Public Health and Clinical Data Reporting | Stage 3 | Measure 1 – Immunization Registry Reporting | The EP is in active engagement with a public health agency to submit immunization data and receive immunization forecasts and histories from the public health immunization registry/immunization information system (IIS) | NH DPHS is not accepting Stage 3 immunization data from EPs for 2018. The Registry is in the process of being implemented. Pilot sites will be selected to participate as resources allow | ONC-Adopted Standard(2015 CEHRT) HL7 2.5.1 HL7 Version 2.5.1: Implementation Guide for Immunization Messaging, Release 1.5 (October 2014) and Addendum (July 2015) |
| Stage 3 Objective 8: Public Health and Clinical Data Reporting | Stage 3 | Measure 2 – Syndromic Surveillance Reporting | The EP is in active engagement with a public health agency to submit syndromic surveillance data from an urgent care setting. | NH DPHS is not accepting Stage 3 syndromic surveillance data from EPs for 2018. | |
| Stage 3 Objective 8: Public Health and Clinical Data Reporting | Stage 3 | Measure 3 – Electronic Case Reporting | The EP is in active engagement with a public health agency to submit case reporting of reportable conditions | NH DPHS is not accepting Stage 3 Public Health Electronic Case Reporting from EPs for 2018. | |

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| Stage 3 Objective 8: Public Health and Clinical Data Reporting | Stage 3 | Measure 4 – Public Health Registry Reporting | The EP is in active engagement to submit data to public health registries | <p>NH DPHS is accepting Stage 3 Public Health Registry Reporting from EPs for 2018.*</p> <p>*The only Public Health Registry DPHS has readiness for is the Cancer Case Reporting</p> | <p>Cancer case reporting from EPs to State Cancer Registry-HL7 CDA® Release 2 Implementation Guide: Reporting to Public Health Cancer Registries from Ambulatory Healthcare Providers, Release 1; DSTU Release 1.1, U.S. Realm) (EP Only)</p> <p>EPs planning to report to the cancer registry in Program Year 2018 are required to complete NH’s cancer registry registration form within 60 days of the start of their attestation period. For more information on the Registry, please visit their website at: http://geiselmed.dartmouth.edu/nhscr/</p> <p>NH Statutes - RSA 141-C:7 Administrative Rules He-P 304.</p> <p>For information on specifications for providers to use as guidance for reporting cancer cases, please visit the HL7.org website at http://www.hl7.org/implement/standards/product_brief.cfm?product_id=383</p> |
| Stage 3 Objective 8: Public Health and Clinical Data Reporting | Stage 3 | Measure 5 – Clinical Data Registry Reporting | The EP is in active engagement to submit data to a clinical data registry | NH DPHS is not accepting Stage 3 Clinical Data Registry Reporting from EPs for 2018. | |

Available links and resources:

Department of Public Health

<http://www.dhhs.nh.gov/dphs/bphsi/meaningful-use.htm>

CMS EHR Incentive Program website

<http://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/index.html?redirect=/ehrincentiveprograms/>

Medicaid Electronic Health Record Incentive Program

<http://www.dhhs.nh.gov/ombp/ehr/index.htm>

The Office of the National Coordinator for Health Information Technology (ONC)

<http://www.healthit.gov/>