MEDICARE PROMOTING INTEROPERABILITY PROGRAM
ELIGIBLE HOSPITALS, CRITICAL ACCESS HOSPITALS, AND DUAL-ELIGIBLE HOSPITALS ATTESTING TO CMS OBJECTIVES AND MEASURES FOR 2019

The following information is for eligible hospitals, critical access hospitals (CAHs), and dual-eligible hospitals attesting to CMS for their participation in the Medicare Promoting Interoperability (PI) Program in 2019. Those attesting to their state should refer to the 2019 PI Medicaid specification sheets.

<table>
<thead>
<tr>
<th>Public Health and Clinical Data Exchange</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Objective</strong></td>
</tr>
<tr>
<td>Measures that an eligible hospital or CAH attests yes to being in active engagement with a public health agency (PHA) or clinical data registry (CDR) to submit electronic public health data in a meaningful way using certified electronic health record technology (CEHRT) for two measures within the objective.</td>
</tr>
<tr>
<td><strong>Measures</strong></td>
</tr>
<tr>
<td><strong>Immunization Registry Reporting</strong>: The eligible hospital or CAH is in active engagement with a PHA to submit immunization data and receive immunization forecasts and histories from the public health immunization registry/immunization information system (IIS).</td>
</tr>
<tr>
<td><strong>Syndromic Surveillance Reporting</strong>: The eligible hospital or CAH is in active engagement with a PHA to submit syndromic surveillance data from an urgent care setting.</td>
</tr>
<tr>
<td><strong>Electronic Case Reporting</strong>: The eligible hospital or CAH is in active engagement with a PHA to submit case reporting of reportable conditions.</td>
</tr>
<tr>
<td><strong>Public Health Registry Reporting</strong>: The eligible hospital or CAH is in active engagement with a PHA to submit data to public health registries.</td>
</tr>
<tr>
<td><strong>Clinical Data Registry Reporting</strong>: The eligible hospital or CAH is in active engagement to submit data to a CDR.</td>
</tr>
<tr>
<td><strong>Electronic Reportable Laboratory (ELR) Result Reporting</strong>: The eligible hospital or CAH is in active engagement with a PHA to submit ELR results.</td>
</tr>
<tr>
<td><strong>Note</strong>: Eligible hospitals and CAHs are required to report on any two measures of the eligible hospital or CAHs choice.</td>
</tr>
<tr>
<td><strong>Exclusions</strong></td>
</tr>
<tr>
<td><strong>Immunization Registry Reporting</strong>: Any eligible hospital or CAH meeting one or more of the following criteria may be excluded from the immunization registry reporting measure if the eligible hospital or CAH:</td>
</tr>
</tbody>
</table>
(i) Does not administer any immunizations to any of the populations for which data is collected by their jurisdiction’s immunization registry or IIS during the electronic health record (EHR) reporting period;  
(ii) Operates in a jurisdiction for which no immunization registry or IIS is capable of accepting the specific standards required to meet the CEHRT definition at the start of the EHR reporting period; or  
(i) Operates in a jurisdiction where no immunization registry or IIS has declared readiness to receive immunization data as of six months prior to the start of the EHR reporting period.

**Syndromic Surveillance Reporting:** Any eligible hospital or CAH meeting one or more of the following criteria may be excluded from the syndromic surveillance reporting measure if the eligible hospital or CAH:  
(i) Does not have an emergency or urgent care department;  
(ii) Operates in a jurisdiction for which no PHA is capable of receiving electronic syndromic surveillance data from eligible hospitals or CAHs in the specific standards required to meet the CEHRT definition at the start of the EHR reporting period; or  
(iii) Operates in a jurisdiction where no PHA has declared readiness to receive syndromic surveillance data from eligible hospitals or CAHs as of six months prior to the start of the EHR reporting period.

**Electronic Case Reporting:** Any eligible hospital or CAH meeting one or more of the following criteria may be excluded from the case reporting measure if the eligible hospital or CAH:  
(i) Does not treat or diagnose any reportable diseases for which data is collected by their jurisdiction’s reportable disease system during the EHR reporting period;  
(ii) Operates in a jurisdiction for which no PHA is capable of receiving electronic case reporting data in the specific standards required to meet the CEHRT definition at the start of the EHR reporting period; or  
(iii) Operates in a jurisdiction where no PHA has declared readiness to receive electronic case reporting data as of six months prior to the start of the EHR reporting period.

**Public Health Registry Reporting:** Any eligible hospital or CAH meeting at least one of the following criteria may be excluded from the public health registry reporting measure if the eligible hospital or CAH:  
(i) Does not diagnose or directly treat any disease or condition associated with a public health registry in their jurisdiction during the EHR reporting period;
(ii) Operates in a jurisdiction for which no PHA is capable of accepting electronic registry transactions in the specific standards required to meet the CEHRT definition at the start of the EHR reporting period; or
(iii) Operates in a jurisdiction where no public health registry for which the eligible hospital or CAH is eligible has declared readiness to receive electronic registry transactions as of six months prior to the start of the EHR reporting period.

**Clinical Data Registry Reporting:** Any eligible hospital or CAH meeting at least one of the following criteria may be excluded from the CDR reporting measure if the eligible hospital or CAH:
(i) Does not diagnose or directly treat any disease or condition associated with a CDR in their jurisdiction during the EHR reporting period;
(ii) Operates in a jurisdiction for which no CDR is capable of accepting electronic registry transactions in the specific standards required to meet the CEHRT definition at the start of the EHR reporting period; or
(iii) Operates in a jurisdiction where no CDR for which the eligible hospital or CAH is eligible has declared readiness to receive electronic registry transactions as of six months prior to the start of the EHR reporting period.

**ELR Result Reporting:** Any eligible hospital or CAH meeting one or more of the following criteria may be excluded from the ELR result reporting measure if the eligible hospital or CAH:
(i) Does not perform or order laboratory tests that are reportable in their jurisdiction during the EHR reporting period;
(ii) Operates in a jurisdiction for which no PHA is capable of accepting the specific ELR standards required to meet the CEHRT definition at the start of the EHR reporting period; or
(iii) Operates in a jurisdiction where no PHA has declared readiness to receive ELR results from an eligible hospital or CAH as of six months prior to the start of the EHR reporting period.

**Table of Contents**
- Definition of Terms
- Attestation Requirements
- 2015 Edition Certified Electronic Health Record Technology
- 2019 Scoring Methodology
- Additional Information
- Regulatory References
- Certification and Standards Criteria
Definition of Terms

Active Engagement: Means that the eligible hospital or CAH is in the process of moving towards sending "production data" to a PHA or CDR, or is sending production data to a PHA or CDR.

Active Engagement Option 1: Completed Registration to Submit Data: The eligible hospital or CAH registered to submit data with the PHA or, where applicable, the CDR to which the information is being submitted; registration was completed within 60 days after the start of the EHR reporting period; and the eligible hospital or CAH is awaiting an invitation from the PHA or CDR to begin testing and validation. This option allows eligible hospitals or CAHs to meet the measure when the PHA or the CDR has limited resources to initiate the testing and validation process. Eligible hospitals or CAHs that have registered in previous years do not need to submit an additional registration to meet this requirement for each EHR reporting period.

Active Engagement Option 2: Testing and Validation: The eligible hospital or CAH is in the process of testing and validation of the electronic submission of data. Eligible hospitals or CAHs must respond to requests from the PHA or, where applicable, the CDR within 30 days; failure to respond twice within an EHR reporting period would result in that eligible hospital or CAH not meeting the measure.

Active Engagement Option 3: Production: The eligible hospital or CAH has completed testing and validation of the electronic submission and is electronically submitting production data to the PHA or CDR.

Production Data: Refers to data generated through clinical processes involving patient care, and it is used to distinguish between data and "test data" which may be submitted for the purposes of enrolling in and testing electronic data transfers.

Attestation Requirements

The EHR reporting period in 2019 for new and returning participants attesting to CMS is a minimum of any continuous 90-day period within the calendar year.

MEASURES:

- Immunization Registry Reporting
  - YES/NO – The eligible hospital or CAH must attest YES to being in active engagement with a PHA to submit immunization data and receive immunization forecasts and histories from the public health immunization registry/IIS.

- Syndromic Surveillance Reporting
  - YES/NO – The eligible hospital or CAH must attest YES to being in active engagement with a PHA to submit syndromic surveillance data from an urgent care setting.

- Electronic Case Reporting
- YES/NO – The eligible hospital or CAH must attest YES to being in active engagement with a PHA to submit case reporting of reportable conditions.

- Public Health Registry Reporting
  - YES/NO – The eligible hospital or CAH must attest YES to being in active engagement with a PHA to submit data to public health registries.

- Clinical Data Registry Reporting
  - YES/NO – The eligible hospital or CAH must attest YES to being in active engagement to submit data to a CDR.

- ELR Reporting
  - YES/NO – The eligible hospital or CAH must attest YES to being in active engagement with a PHA to submit ELR results.

**2015 Edition Certified Electronic Health Record Technology**

Beginning with the EHR reporting period in CY 2019, participants in the PI Programs are required to use the 2015 Edition of CEHRT pursuant to the definition of CEHRT under § 495.4. As established in the final rule, the 2015 Edition of CEHRT must be implemented for an EHR reporting period in CY 2019, which will be a minimum of 90-day period. It does not need to be implemented on January 1, 2019.

**2019 Scoring Methodology**

Beginning in 2019, the Medicare PI Program will use a new performance-based scoring methodology consisting of a smaller set of objectives that will provide a more flexible, less burdensome structure.

The new performance-based scoring includes:

- The Public Health and Clinical Data Exchange objective is worth up to a total of 10 points for attesting to two measures.
- If one exclusion is claimed, but one measure is attested to, the 10 points will be granted for this objective.
- If two exclusions are claimed, then the 10 points will be redistributed to the Provide Patients Electronic Access to their Health Information measure.
- 100 total points will be available for the Medicare PI Program.
- In order to earn a score greater than zero, an eligible hospital or CAH must complete the activities required by the Security Risk Analysis measure and submit their complete numerator and denominator or yes/no data for all required measures.
- **Rounding:** When calculating the performance rates and measure and objective scores, we stated that we would generally round to the nearest whole number. Scores under 50 points would not be considered meaningful users.
Additional Information

- An exclusion for a measure counts toward meeting the requirement to report on two measures. An eligible hospital or CAH does not have to exhaust all six exclusions to meet the reporting requirements of the measure.
- If PHAs have not declared six months before the start of the PI reporting period whether the registry they are offering will be ready on January 1 of the upcoming year for use by providers seeking to meet PI reporting periods in that upcoming year, an eligible hospital or CAH can claim an exclusion.
- For Immunization Registry Reporting, an exclusion does not apply if an entity designated by the immunization registry or IIS can receive electronic immunization data submissions. For example, if the immunization registry cannot accept the data directly or in the standards required by CEHRT, but if it has designated a Health Information Exchange (HIE) to do so on their behalf and the HIE is capable of accepting the information in the standards required by CEHRT, the eligible hospital or CAH could not claim the second exclusion.
- For Immunization Registry Reporting, an eligible hospital or CAH’s health information technology (HIT) system may layer additional information on the immunization history, forecast, and still successfully meet this measure.
- Bi-directionality provides that certified HIT must be able to receive and display a consolidated immunization history and forecast in addition to sending the immunization record.
- For Syndromic Surveillance Reporting, an exclusion does not apply if an entity designated by PHA can receive electronic syndromic surveillance data submissions. For example, if the PHA cannot accept the data directly or in the standards required by CEHRT, but if it has designated a HIE to do so on their behalf and the HIE is capable of accepting the information in the standards required by CEHRT, the provider could not claim the second exclusion.
- For Public Health Registry Reporting, an eligible hospital or CAH may count a specialized registry (such as prescription drug monitoring) if the eligible hospital or CAH achieved the phase of active engagement defined under Active Engagement Option 3: Production, including production data submission with the specialized registry in a prior year under the applicable requirements of the Stage 3 PI Program.
- For CDR Reporting, eligible hospitals or CAHs may choose to report to more than one CDR to meet the number of measures required to meet the objective.
- For CDR Reporting, the definition of jurisdiction is general, and the scope may be local, state, regional or at the national level. The definition will be dependent on the type of registry to which the provider is reporting. A registry that is “borderless” would be considered a registry at the national level and would be included for purposes of this measure.
**Regulatory References**

- This objective may be found in Section 42 of the code of the federal register at 495.24 (e)(5)(i-v). For further discussion, please see 83 FR 41634 through 41677.
- In order to meet this objective and measure, an eligible hospital or CAH must possess the capabilities and standards of CEHRT at 45 CFR 170.315 (f)(1) through (f)(7).

**Certification Standards and Criteria**

Below is the corresponding certification and standards criteria for EHR technology that supports achieving the meaningful use of this objective.

<table>
<thead>
<tr>
<th>Certification Criteria</th>
<th>Information about certification for 2015 Edition CEHRT can be found at:</th>
</tr>
</thead>
<tbody>
<tr>
<td>§ 170.315(f)(1)</td>
<td>Transmission to immunization registries</td>
</tr>
<tr>
<td>§ 170.315(f)(2)</td>
<td>Transmission to public health agencies – syndromic surveillance</td>
</tr>
<tr>
<td>§ 170.315(f)(3)</td>
<td>Transmission to public health agencies – reportable laboratory tests and value/results</td>
</tr>
<tr>
<td>§ 170.315(f)(5)</td>
<td>Transmission to public health agencies – electronic case reporting</td>
</tr>
<tr>
<td>§ 170.315(f)(6)</td>
<td>Transmission to public health agencies – antimicrobial use and resistance reporting</td>
</tr>
<tr>
<td>§ 170.315(f)(7)</td>
<td>Transmission to public health agencies – health care surveys</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Standards Criteria</th>
<th>Standards for 2015 Edition CEHRT can be found at the ONC’s 2015 Standards Hub:</th>
</tr>
</thead>
</table>