**MEDICAID PROMOTING INTEROPERABILITY PROGRAM**  
**ELIGIBLE PROFESSIONALS OBJECTIVES AND MEASURES FOR 2020**  
**OBJECTIVE 8 of 8**

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<td><strong>Measure 1</strong>: An EP may take an exclusion if any of the following apply:</td>
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<td>(1) They do not administer immunizations to any of the populations for which data is collected by their jurisdiction’s immunization registry or IIS during the EHR reporting period;</td>
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<td>(2) They practice 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</td>
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<td>(3) They practice 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.</td>
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**Measure 2:** An EP may take an exclusion if any of the following apply:
1. They are not in a category of providers from which ambulatory syndromic surveillance data is collected by their jurisdiction’s syndromic surveillance system;
2. They practice in a jurisdiction for which no PHA is capable of receiving electronic syndromic surveillance data from EPs in the specific standards required to meet the CEHRT definition at the start of the EHR reporting period; or
3. They practice in a jurisdiction where no PHA has declared readiness to receive syndromic surveillance data from EPs as of six months prior to the start of the EHR reporting period.

**Measure 3:** An EP may take an exclusion if any of the following apply:
1. They do not diagnose or directly treat any reportable diseases for which data is collected by their jurisdiction’s reportable disease system during the EHR reporting period;
2. They practice 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
3. They practice 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.

**Measure 4:** An EP may take an exclusion if any of the following apply:
1. They do not diagnose or directly treat any disease or condition associated with a public health registry in their jurisdiction during the EHR reporting period;
2. They practice in a jurisdiction for which no PHA can accept electronic registry transactions in the specific standards required to meet the CEHRT definition at the start of the EHR reporting period; or
3. They practice in a jurisdiction where no PHA for which the EP is eligible to submit data has declared readiness to receive electronic registry transactions as of six months prior to the start of the EHR reporting period.

**Measure 5:** An EP may take an exclusion if any of the following apply:
(1) They do not diagnose or directly treat any disease or condition associated with a CDR in their jurisdiction during the EHR reporting period;
(2) They practice 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
(3) They practice in a jurisdiction where no CDR for which the EP is eligible to submit data has declared readiness to receive electronic registry transactions as of six months prior to the start of the EHR reporting period.

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Definition of Terms

Active Engagement: The EP 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 EP 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 EP is awaiting an invitation from the PHA or CDR to begin testing and validation. This option allows EPs to meet the measure when the PHA or the CDR has limited resources to initiate the testing and validation process. EPs 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 EP is in the process of testing and validation of the electronic submission of data. EPs 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 EP not meeting the measure.

Active Engagement Option 3 – Production: The EP has completed testing and validation of the electronic submission and is electronically submitting production data to the PHA or CDR.
Production Data: Data generated through clinical processes involving patient care. This term is used to distinguish between data and “test data,” which may be submitted to test electronic data transfers.

Attestation Requirements

Measure 1:

- YES/NO: The EP 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.
- EXCLUSIONS: An EP may take an exclusion if any of the following apply:
  - They do not administer immunizations to any of the populations for which data is collected by their jurisdiction’s immunization registry or IIS during the EHR reporting period;
  - They practice 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
  - They practice 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.

Measure 2:

- YES/NO: The EP must attest “YES” to being in active engagement with a PHA to submit syndromic surveillance data.
- EXCLUSIONS: An EP may take an exclusion if any of the following apply:
  - They are not in a category of providers from which ambulatory syndromic surveillance data is collected by their jurisdiction’s syndromic surveillance system;
  - They practice in a jurisdiction for which no PHA is capable of receiving electronic syndromic surveillance data from EPs in the specific standards required to meet the CEHRT definition at the start of the EHR reporting period; or
  - They practice in a jurisdiction where no PHA has declared readiness to receive syndromic surveillance data from EPs as of six months prior to the start of the EHR reporting period.

Measure 3:

- YES/NO: The EP must attest “YES” to being in active engagement with a PHA to submit case reporting of reportable conditions.
- EXCLUSIONS: An EP may take an exclusion if any of the following apply:
They do not treat or diagnose any reportable diseases for which data is collected by their jurisdiction’s reportable disease system during the EHR reporting period;

They practice 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

They practice 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.

**Measure 4:**

- **YES/NO:** The EP must attest “YES” to being in active engagement with a PHA to submit data to public health registries.
- **EXCLUSIONS:** An EP may take an exclusion if any of the following apply:
  - They do not diagnose or directly treat any disease or condition associated with a public health registry in their jurisdiction during the EHR reporting period;
  - They practice 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
  - They practice in a jurisdiction where no PHA for which the EP is eligible to submit data has declared readiness to receive electronic registry transactions as of six months prior to the start of the EHR reporting period.

**Measure 5:**

- **YES/NO:** The EP must attest “YES” to being in active engagement to submit data to a CDR.
- **EXCLUSIONS:** An EP may take an exclusion if any of the following apply:
  - They do not diagnose or directly treat any disease or condition associated with a CDR in their jurisdiction during the EHR reporting period;
  - They practice 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
  - They practice in a jurisdiction where no CDR for which the EP is eligible to submit data has declared readiness to receive electronic registry transactions as of six months prior to the start of the EHR reporting period.

**Additional Information**

- EPs must use [2015 Edition CEHRT](#) to meet Stage 3 meaningful use.
- EPs must attest to at least two measures from the Public Health Reporting Objective.
- An exclusion for a measure does not count toward the total of two measures. Instead, in order to meet this objective, an EP needs to meet two of the total number of measures.
available to them. If the EP qualifies for multiple exclusions and the remaining number of available measures is less than two, the EP can meet the objective by meeting all the remaining available measures and claiming the applicable exclusions. Available measures are ones for which the EP does not qualify for an exclusion.

- For Measure 1, an EP’s CEHRT may layer additional information on the immunization history, forecast, and still successfully meet this measure.
- Bi-directionality provides that CEHRT must be able to receive and display a consolidated immunization history and forecast in addition to sending the immunization record.
- For Measure 1, non-vaccinating EPs can meet the measure if they query and receive results (i.e., the consolidated immunization record and forecast) from the IIS and integrate the data into their CEHRT, in accordance with HL7 Version 2.5.1: Implementation Guide for Immunization Messaging, Release 1.5 (October 2014). A non-vaccinating provider may also submit historical immunizations provided from another source; however, this alone would not meet the measure.
- For Measure 1, the 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 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 EP could not claim the second exclusion.
- For Measure 2, the exclusion does not apply if an entity designated by the 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 has designated an HIE to do so on their behalf, and the HIE is capable of accepting the information in the standards required by CEHRT, the EP could not claim the second exclusion.
- For Measure 4, EPs may choose to report to more than one public health registry to meet the number of measures required to meet the objective.
- For Measure 4, an EP may count a specialized registry (such as prescription drug monitoring) if the EP achieved Active Engagement Option 3 in a prior year under the applicable requirements of the PI Programs for that year.
- For Measure 5, EPs may choose to report to more than one CDR to meet the number of measures required to meet the objective.
- For Measure 5, the definition of jurisdiction is general, and the scope may be at the local, state, regional, or national level. The definition will be dependent on the type of registry to which the EP 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.
• For Measures 4 and 5, if the PHA or CDR does not use a specified standard, it must use another standard specified in 170.205 to meet the measure. For example, the transmission could be in the form of a Consolidated Clinical Document Architecture (C-CDA) per 170.205(a)(4), or Quality Reporting Document Architecture (QRDA) per 170.205(h)(2). If an EP practices in a jurisdiction where no PHA or CDR for which they are eligible to submit data has declared readiness to receive electronic registry transactions in accordance with the 2015 Edition standards as of six months prior to the start of the EHR reporting period, they may take an exclusion from these measures, as appropriate.

• EPs who have previously registered, tested, or begun ongoing data submission to a registry do not need to “restart” the process beginning at Active Engagement Option 1. The EP may simply attest to the active engagement option which most closely reflects their current status.

• For the first exclusion of each measure, the registries in question are those sponsored by the PHAs with jurisdiction over the area where the EP practices and national medical societies covering the EP’s scope of practice. Therefore, an EP must complete two actions in order to find available registries or claim an exclusion:
  o Determine whether their jurisdiction (state, territory, etc.) endorses or sponsors a registry; and
  o Determine whether a National Specialty Society or other specialty society with which they are affiliated endorses or sponsors a registry.

• If an EP is part of a group that submits data to a registry, but the EP does not contribute to that data (for example, they do not administer immunizations), the EP should not attest to meeting the measure, but instead should select the exclusion. The EP should select a more relevant measure to meet.

• If in the normal course of their practice, an EP does the action that results in data for a registry and is in active engagement to submit to that registry, but simply has no cases for the reporting period, the EP is not required to take an exclusion and may attest to meeting the measure.

Regulatory References
This objective may be found at 42 C.F.R. § 495.24 (d)(8)(i)(A) and (B). For further discussion please see 80 FR 62870.
**Certification Standards and Criteria**

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

**Certification Criteria**

Information about certification for 2015 Edition CEHRT can be found at:

- §170.315(f)(1) Transmission to immunization registries
- §170.315(f)(2) Transmission to public health agencies — syndromic surveillance
- §170.315(f)(5) Transmission to public health agencies — electronic case reporting
- §170.315(f)(4) Transmission to cancer registries*  
- §170.315(f)(7) Transmission to public health agencies — health care surveys*

**Standards Criteria**

Standards for 2015 Edition CEHRT can be found at the ONC’s 2015 Standards Hub: