

2019 MEDICARE PROMOTING INTEROPERABILITY PROGRAM FOR ELIGIBLE HOSPITALS AND CRITICAL ACCESS HOSPITALS

Public Health and Clinical Data Exchange Objective Fact Sheet

On August 2, 2018, the Centers for Medicare & Medicaid Services (CMS) released the [Fiscal Year 2019 Medicare Hospital Inpatient Prospective Payment System for Acute Care Hospitals and Long-term Care Hospital Prospective Payment System Final Rule](#). In the rule, CMS overhauled the Medicare Promoting Interoperability Program to continue the following:

- Advance certified electronic health record technology (CEHRT) utilization
- Reduce burden
- Improve interoperability and patient access to health information

The rule finalized a new performance-based scoring methodology with a smaller set of four objectives:

1. Electronic Prescribing
2. Health Information Exchange
3. Provider to Patient Exchange
4. Public Health and Clinical Data Exchange

CMS also reiterated that beginning with the EHR reporting period in calendar year (CY) 2019, participants in the Promoting Interoperability Programs are required to use the 2015 Edition of CEHRT. For more information on 2015 Edition CEHRT, review this [fact sheet](#).

The information included in this fact sheet pertains to the Public Health and Clinical Data Exchange objective (formerly known as the Public Health and Clinical Data Registry Reporting objective) for the Medicare Promoting Interoperability Program in CY 2019.

Public Health and Clinical Data Exchange Objective: Measures that an eligible hospital or critical access hospital (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 CEHRT for **two** measures of their choice within the objective.



Measures (Select Two)

Measure 1: Immunization Registry Reporting

- **Measure description:** 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).
- **Exclusion:** 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:
 - (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 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
 - (iii) 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.
- **Maximum points available for this measure:** 10 points (for two measures).

Measure 2: Syndromic Surveillance Reporting

- **Measure description:** The eligible hospital or CAH is in active engagement with a PHA to submit syndromic surveillance data from an urgent care setting.
- **Exclusion:** 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.
- **Maximum points available for this measure:** 10 points (for two measures).

Measure 3: Electronic Case Reporting

- **Measure description:** The eligible hospital or CAH is in active engagement with a PHA to submit case reporting of reportable conditions.
- **Exclusion:** 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.

- **Maximum points available for this measure:** 10 points (for two measures).

Measure 4: Public Health Registry Reporting

- **Measure description:** The eligible hospital or CAH is in active engagement with a PHA to submit data to public health registries.
- **Exclusion:** 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.
- **Maximum points available for this measure:** 10 points (for two measures).

Measure 5: Clinical Data Registry Reporting

- **Measure description:** The eligible hospital or CAH is in active engagement to submit data to a CDR.
- **Exclusion:** 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.
- **Maximum points available for this measure:** 10 points (for two measures).

Measure 6: Electronic Reportable Laboratory Result Reporting

- **Measure description:** The eligible hospital or CAH is in active engagement with a PHA to submit electronic reportable laboratory (ELR) results.
- **Exclusion:** 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.
- **Maximum points available for this measure:** 10 points (for two measures).

Scoring

Eligible hospitals and CAHs are required to report on any **two measures** of the eligible hospital or CAH's choice under the Public Health and Clinical Data Exchange objective. Reporting a "yes" response for two measures will result in 10 points for the objective. If an eligible hospital or CAH submits a "yes" response for one measure and claims an exclusion for another, they will earn 10 points for the objective. If an eligible hospital or CAH claims exclusions for both measures they select to report on, the 10 points would be redistributed to the Provide Patients Electronic Access to Their Health Information measure under the Provider to Patient Exchange objective.

Objective	Measures	CY 2019 Exclusion Available	Maximum Points Available in CY 2019
Public Health and Clinical Data Exchange	Immunization Registry Reporting	Yes	10
	Syndromic Surveillance Reporting		
	Electronic Case Reporting		
	Public Health Registry Reporting		
	Clinical Data Registry Reporting		
	Electronic Reportable Laboratory Result Reporting		

Additional Resources

For more information on the Public Health and Clinical Data Exchange objective and other Medicare program requirements for 2019, visit:

- [Promoting Interoperability Programs Landing Page](#)
- [2019 Medicare Program Requirements webpage](#)
- [Scoring, Payment Adjustment, and Hardship Information webpage](#)
- [FY 2019 IPPS and Medicare Promoting Interoperability Program Overview Fact Sheet](#)
- [2019 Medicare Specification Sheets](#)
- [2015 Edition CEHRT Fact Sheet](#)