

## ELIGIBLE HOSPITAL/CRITICAL ACCESS HOSPITAL SYNDROMIC SURVEILLANCE REPORTING (2015 MODIFIED STAGE 2 MU, OBJECTIVE 10, MEASURE 2)



### OHIO'S MEANINGFUL USE POLICY

#### SYNDROMIC SURVEILLANCE

EpiCenter<sup>1</sup> is Ohio's statewide syndromic surveillance system used by state and local public health agencies to detect, track and characterize health events such as pandemic influenza, outbreaks, environmental exposures and potential bioterrorism in real-time. The system gathers de-identified information on patient symptoms and automatically alerts public health when an unusual pattern or trend is occurring.

Eligible hospitals (EHs) can report syndromic surveillance data to EpiCenter on behalf of the Ohio Department of Health (ODH) to meet the public health syndromic surveillance reporting measure for Modified Stage 2 Meaningful Use (MU2). EHs must submit appropriate emergency department data to EpiCenter with all required data elements below using the HL7 v2.5.1 format on a continued, ongoing basis.

- Date/time of visit
- Patient sex
- Patient age or date of birth
- Patient home zip code
- Facility
- Patient ID/encrypted medical record number
- Patient chief complaint
- Initial patient temperature\*
- Discharge disposition\*
- Discharge diagnosis\*

*\*Asterisk data elements are required in Ohio*

#### Related Link:

<https://www.ohiopublichealthreporting.info/Enrollment/MeaningfulUse/SyndromicSurveillance>

#### 2015 MODIFIED STAGE 2 OBJECTIVE AND MEASURE

- **Objective 10:** The EH or CAH is in active engagement with a public health agency to submit electronic public health data from certified electronic health record technology (CEHRT), except where prohibited and in accordance with applicable law and practice. EHs/CAHs must meet three of four public health measures. Exclusions may apply. *(Note: The CMS specification sheet lists this objective as #9, but the final rule defines the objective as #10.)*
- **Active Engagement:** To be considered "actively engaged," a provider must:
  - ✓ Option 1 – Register to submit data (prior to or within the first 60 days of EHR reporting period) and await invitation from ODH to begin
  - ✓ Option 2 – Begin testing and validation stage with ODH
  - ✓ Option 3 – Send Production data to ODH

<sup>1</sup> In 2008, RODS was replaced by EpiCenter managed by Health Monitoring Systems (HMS) located in Pittsburgh, Pennsylvania.

# Public Health Reporting

- Alternate Specification: An eligible hospital or CAH scheduled to be in Stage 1 in 2015 may meet two measures.
- Measure 4: The EH or CAH is in active engagement with a Public Health Agency (PHA) to submit syndromic surveillance data from CEHRT except where prohibited and in accordance with applicable law & practice.

**Related Link:** [2015 Modified Stage 2 Fact Sheet for EH/CAH Public Health Reporting](#)

## APPLICABLE EXCLUSIONS

ODH Policy: The current policy does not exclude any provider types.

## OHIO PUBLIC HEALTH REPORTING ENROLLMENT AND REGISTRATION TO SUBMIT

EHS must request enrollment into ODH's public health reporting programs and register to submit data through the Ohio Public Health Reporting Enrollment website.

- EHS that are technically and operationally ready to report electronic laboratory reportable data must register to submit data through the Ohio Public Health Reporting Enrollment website by the 60<sup>th</sup> day of their intended reporting period.
- EHS should not re-register for a measure when transitioning between MU stages or reporting periods.
- It is preferred that provider groups and health systems register as entities, not individuals.
- ODH will prioritize which providers to invite for onboarding if resources do not allow all providers to submit data.

**Related Link:** <https://www.ohiopublichealthreporting.info/Enrollment> (Ohio Public Health Enrollment Site)

## PREFERRED USE OF HIES

ODH prefers the use of health information exchanges (HIEs) for public health reporting. CliniSync and HealthBridge are Ohio-based HIEs that are able to submit data to ODH. For EHS and EPs not working with an HIE and for providers who have determined that it is not feasible to conduct public health reporting through an HIE, ODH will accept data directly from EPs and EHS. The registration to submit data process is the same for either method of data transmission.

## HOSPITAL READINESS CHECKLIST

### CHECKLIST FOR EHS WHO WANT TO BEGIN ELECTRONICALLY REPORTING SYNDROMIC SURVEILLANCE DATA TO ODH THROUGH CLINISYNC

- ✓ You have finalized and notified us of your plans to report syndromic surveillance data or other public health reporting through CliniSync including the reporting period when you wish to begin and primary contact for public health reporting.  
**Note:** Please ensure Peg Eichner ([meichner@ohiponline.org](mailto:meichner@ohiponline.org)) is copied on these communications.
- ✓ You have participated in a CliniSync Public Health Reporting Overview session.

# Public Health Reporting

**Note:** Peg Eichner, your Account Manager or Implementation Manager can provide available dates/times.

- ✓ You have requested enrollment in ODH's syndromic surveillance reporting program.
- ✓ You have deployed your 2014 ONC certified solutions in your Production environment.
- ✓ You have executed or have previously executed a business associate agreement with Health Monitoring Systems (HMS) for syndromic surveillance reporting.

**Note:** HMS does not require the execution of a new agreement for the purpose of an HL7 upgrade. This, along with any other interface changes for existing syndromic senders, would be considered connection maintenance and does not necessitate a new agreement.

- ✓ You have obtained an organization identifier from Health Monitoring Systems (HMS).
- ✓ You can produce a sample HL7 v2.5.1 file containing actual data for syndromic surveillance reporting that includes the three additional ODH required data elements below as well as all other required values and codes in the required format.
- ✓ You have completed online file and validation testing using NIST validation tools. HMS will also work extensively with CliniSync and the EH to test and validate their interface until they are working as expected.
- ✓ You have moved your new interface to your Production environment.
- ✓ You have completed your registration to submit data for syndromic surveillance reporting by the 60th day of your intended reporting period through the ODH Public Health Reporting Enrollment Website.
- ✓ Once your interface project has been scheduled with Medicity and you have completed your ODH registration to submit data for syndromic surveillance, you will be in "awaiting invitation from ODH" status. This status will allow you to attest to Modified MU2 while waiting on deployment of your Medicity interface and/or final connectivity with ODH.

**Note:** It is very important that you actively continue to test and validate your interfaces while awaiting invitation.

## CLINISYNC STEPS

- ✓ Once officially notified and provided a primary contact, CliniSync will initiate scheduling of your syndromic surveillance interface with Medicity.  
**Note:** This process takes a minimum of four weeks after official notification.
- ✓ The scheduling process will identify when your interface will be deployed into CliniSync's testing (CERT) or Production (PROD) environments. These dates will be provided to you by CliniSync, once available.
- ✓ Once the interface is available in the CliniSync testing (CERT) environment, CliniSync will work with you and ODH/HMS to conduct final testing, confirm successful delivery and allow for Production delivery. Note: This step is contingent upon ODH/HMS' availability and integration priorities.
- ✓ Upon HMS approval and migration to HMS' Production environment, ODH will begin a two-month, post-Production validation period to ensure syndromic data is populated as expected.

A word about cost: For existing hospital clients, Implementation fees will be waived for one new interface per year. If you have questions about how this applies to you, please discuss this with your CliniSync representative.

## TECHNICAL REQUIREMENTS

### FORMAT

EHs must submit appropriate emergency department data to EpiCenter with all required data elements below using a specific implementation guide for the HL7 v2.5.1 format on a continued, ongoing basis.

- Date/time of visit
  - Patient sex
  - Patient age or date of birth
  - Patient home zip code
  - Facility
  - Patient ID/encrypted medical record number
  - Patient chief complaint
  - Initial patient temperature\*
  - Discharge disposition\*
  - Discharge diagnosis\*
- The ONC-required implementation guide for Syndromic Surveillance Reporting is called *HL7 v2.5.1 Interface using PHIN Messaging Guide for Syndromic Surveillance and Conformance Clarification* and is available at [http://www.cdc.gov/phinf/library/guides/PHIN%20MSG%20Guide%20for%20SS%20Final\\_508readyRelease1\\_9%2004%2027%202013.pdf](http://www.cdc.gov/phinf/library/guides/PHIN%20MSG%20Guide%20for%20SS%20Final_508readyRelease1_9%2004%2027%202013.pdf)
- The technical specifications document for Ohio's syndromic surveillance system, EpiCenter, is available at <https://www.ohiopublichealthreporting.info/Enrollment/MeaningfulUse/SyndromicSurveillance>
- Note: The option to submit immunization data to ODH using an existing HL7 v.2.3.1 interface has been eliminated in 2015 and beyond.

### AUTOMATED TEST VALIDATION TOOL

EHs can conduct online file and validation testing for syndromic surveillance using NIST validation tools available at <http://hl7v2-ss-testing.nist.gov/mu-syndromic/>. EpiCenter will also work extensively with CliniSync and the EH to test and validate their interface until they are working as expected.

- **Note:** If you send emergency room encounters with HL7 Message Types of "A01" (Admission) instead of "A04" (Registration), please let EpiCenter know this as you begin to test your interface.

## ONC CERTIFICATION REQUIREMENTS

### CLINISYNC CERTIFICATION

CliniSync and its technology partner, Medicity, received 2014 ONC modular EHR Certification (CEHRT) for all public health reporting measures in December 2013. Certification product numbers are:

- Inpatient: CHPL Product Number: 12122013-1978-6
- Ambulatory: CHPL Product Number: 12122013-1977-6

### HOSPITAL SYSTEM CERTIFICATION

# Public Health Reporting

Please notify CliniSync staff if the system you are using to report syndromic surveillance data is NOT 2014 CEHRT certified for Modified MU2 reporting. As long as you can still provide the data in the Ohio required technical format and with the required data elements, we can work with you to meet certification requirements.

- **Note:** There have been several instances where hospitals were not able to provide data in the Ohio required format unless they accepted their source system 2014 certified version upgrades.

**Related Link:** <http://oncchpl.force.com/ehrcert?q=chpl> (Certified Health IT Product List for 2011 and 2014)

## QUESTIONS

- Questions about ODH's MU policy should be directed to [SMED@odh.ohio.gov](mailto:SMED@odh.ohio.gov) or call (614) 995-5599.
- For technical requirements, you may contact EpiCenter (HMS) directly through Kristen Weiss (Manager, Customer Engagement), [kristen.weiss@hmsinc.com](mailto:kristen.weiss@hmsinc.com) or 412-231-2020 ext. 117.
- Questions about CliniSync's implementation process should be directed to Peg Eichner, [meichner@ohionline.org](mailto:meichner@ohionline.org) or call 614.664.2609.

## HELPFUL LINKS

- [Ohio Department of Health Meaningful Use website](#)
- [Ohio Department of Health Public Health Reporting Enrollment website](#)
- [Ohio Department of Health Public Health Reporting Enrollment website, Syndromic Surveillance Page](#)
- [HL7 v2.5.1 Interface using PHIN Messaging Guide for Syndromic Surveillance and Conformance Clarification](#)
- [EpiCenter MU Syndromic Surveillance Technical Specification Document](#)
- [Automated NIST Validation Tool for Syndromic Surveillance](#)
- [2015 Modified Stage 2 Fact Sheet for EH/CAH Public Health Reporting](#)
- [Certified Health IT Product List](#) (2011 and 2014)