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Connecticut Eligible Professionals and Hospitals:

This is an update regarding public health reporting for Meaningful Use (MU) for Eligible Hospitals (EHs) and Eligible Professionals (EPs) attesting to the Promoting Interoperability (PI) Program for **Program Year 2019**.

Pursuant to CMS regulations, EPs or EHs must demonstrate “active engagement” to electronically submit data pertaining to public health measures from Certified Electronic Health Record Technology (CEHRT) except where prohibited and in accordance with applicable law and practice. Under CMS regulations, “active engagement” means completion of applicable registration processes to submit such data, or testing and validation in preparation of such submission or active submission of public health production data.

For the Medicaid PI program’s Meaningful Use Stage 3 requirements, there are six public health reporting measure options for EHs, and five for EPs, with several possible exclusions. *Note: All EPs, EHs and CAHs are now required to participate in Stage 3 regardless of their prior participation.*

Many of the exclusions depend on whether the designated public health authorities in the EHs or EPs state have available reporting systems, as well as the level of readiness of such systems.

Also, beginning with an EHR reporting period in CY 2019, all EPs, EHs and CAHs under the Medicare and Medicaid PI Programs are required to use the 2015 Edition of Certified Electronic Health Records Technology (CEHRT).

The following is a summary of the Department of Public Health’s (DPH’s) current MU status as it relates to the public health measures of the Promoting Interoperability Program for **Program Year 2019**:

Immunization Information System (IIS) for Program Year 2019:

Eligible Professionals or Eligible Hospitals: An EP or EH who orders vaccines from the Connecticut Vaccine Program (CVP), reports immunizations administered to children ages 0 through 18 as part of the patient’s medical home is mandated to report immunizations to the CT DPH IIS (now CT WiZ, formerly known as CIRT). For the purposes of the Medicaid Promoting Interoperability Program, an EP or EH can attest to the immunization registry public health (PH) reporting option in order to meet MU for Program Year 2019 as follows:

- An EP who was mandated to report immunizations and registered prior to program year 2019 using the former (inactive) MUST Portal or the CT IIS registration form is not required to register again for active engagement and can resubmit their MUST Portal Certificate or email from DPH to satisfy the PH Immunization Objective for Program Year 2019.
- DPH is declaring readiness for MU Stage 3 as of January 2019. To attest to MU Stage 3, an EP or EH can complete and submit the CT WiZ HL7 Application Form and DPH will send email notifications as

evidence of each phase of the EHR onboarding process (registration, testing, production). These emails will be accepted as supporting documentation for EPs and EHs attesting to the Medicaid Interoperability Program and will meet the meaningful use objective for immunization reporting for MU Stage 3.

Eligible Professional or Eligible Hospital: An EP or EH who is NOT mandated to report immunizations to the CT DPH IIS is to claim an exclusion from the measure based upon the criteria –“does not administer any immunizations to any of the populations for which data is collected by his or her jurisdiction’s immunization registry during the EHR Reporting Period”. 42 CFR § 495.22 (e)(10)(i)(C)(1)(i).

Electronic Laboratory Reporting for Program Year 2019:

Eligible Professionals: EPs are not required to report on or attest to this public health measure option.

Eligible Hospitals: DPH has declared readiness for EHs electronic laboratory reporting (ELR) for Stage 3. EHs must attest to the measure if the EH has a laboratory that is reporting results as defined under Connecticut General Statutes Section 19a-215(c) and Section 19a-36-A2 of the Public Health Code using the Laboratory Results of Significant Findings form (OL15C).

EHs completion and submission of the [CT DPH ELR Registration Form](#) satisfies the Registration Active Engagement Option. Please retain any confirmation material from DPH to validate the measure. EHs with qualifying laboratories (see below) that have not registered yet in 2019, OR, if the EH has changed or plans to change its laboratory system to a new CEHRT system, need to complete a new ELR Registration form.

If an EH **does not** have a laboratory that is required to report results under Connecticut General Statutes § 19a-215(c) and Connecticut Agencies Regs. § 19a-36-A2, et seq. **they are to claim an exclusion from the measure** and are not required to register for ELR.

Syndromic Surveillance System for Program Year 2019:

Eligible Professionals: DPH does not have the capability to accept syndromic surveillance data in a MU-compliant manner for EPs. **EPs must exclude from the measure** based upon the criteria that EPs “Operate in a jurisdiction for which no public health agency 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.” 42 CFR 495.22(e)(10)(i)(B)(2)(ii) and 42 CFR 495.22 (e)(10)(i)(C)(2)(ii); 42 CFR 495.22 (e)(10)(ii)(C)(2)(ii).

Eligible Hospitals: DPH has declared readiness for EHs syndromic surveillance reporting for Stage 3. EHs who have met the active engagement requirements for MU will need to email dph.syndromic@ct.gov to request documentation for the EHR Incentive Program attestation.

Specialized Case Registry System for Program Year 2019:

Eligible Hospitals and Eligible Professionals: DPH, as the Public Health Agency, does not operate or have the capability to accept specialized case registry electronic data. However, CMS regulation states that Specialized Case Registries are not limited to endorsement by the public health agency.

Eligible Professionals: Specific steps are to be utilized by EPs to determine if they need to attest or can appropriately exclude from the measure option. [Please reference DSS Guidance for EPs here.](#)

Eligible Hospitals: CMS released guidance indicating that Eligible Hospitals should follow the same process as EPs. The EH should check any such organization or specialty society with which they are affiliated to determine if that entity maintains a specialized registry that has declared readiness. EHs do not, however, need to explore every specialty society with which their hospital-based specialists may be affiliated. See [FAQ 14117](#).

Public Health Registry Reporting for Program Year 2019:

Eligible Hospitals and Eligible Professionals: DPH does not have the capability to accept public health registry data in a MU-compliant manner for EPs or EHs. Eligible Hospitals and Professionals are to claim an exclusion from this measure.

Electronic Case Reporting for Program Year 2019:

Eligible Professionals: DPH, as the Public Health Agency, does not operate or have the capability to accept electronic case reporting data. Eligible Professionals are to claim an exclusion from this measure.

Eligible Hospitals: DPH, as the Public Health Agency, does not operate or have the capability to accept electronic case reporting data. Eligible Hospitals are to claim an exclusion from this measure.

Clinical Data Registry Reporting for Program Year 2019:

Eligible Hospitals and Eligible Professionals: DPH, as the Public Health Agency, does not operate or have the capability to accept clinical data registry electronic data. However, CMS regulation states that clinical data registries are not limited to endorsement by the public health agency.

Eligible Professionals: Specific steps are to be utilized by EPs to determine if they need to attest or can appropriately exclude from the measure option. [Please reference DSS Guidance for EPs here.](#)

Eligible Hospitals: Eligible Hospitals should follow the same process as EPs. The EH should check any such organization or specialty society with which they are affiliated to determine if that entity maintains a clinical data registry that has declared readiness. EHs do not, however, need to explore every specialty society with which their hospital-based specialists may be affiliated.

The Department of Public Health encourages you to frequently check its Meaningful Use Website link to obtain timely updates and learn more about DPH's public health reporting statuses applicable to MU. Please visit the [Department of Public Health's Meaningful Use Website](#).

For further guidance on the additional **Medicaid** MU Requirements and the **Medicaid** Attestation process, please visit the [Myers and Stauffer LLC Website](#).

EHs and EPs may also call the state's toll free help line at 1-855-313-6638, or email Department of Social Services Medicaid Promoting Interoperability Program at ctmedicaid-ehr@dxc.com.

To receive Important Messages and Program Updates from the DSS Promoting Interoperability Program, please subscribe to the Promoting Interoperability Program Topic at the [CT Medical Assistance Program Email Subscription Website](#).

For further guidance and contact information on the **Medicare** requirements and **Medicare** attestation process, please visit CMS at <https://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/index.html?redirect=/ehrincentiveprograms>

Sincerely,



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