TO: Eligible Hospitals Participating in the EHR Incentive Program

FROM: Maryland Department of Health and Mental Hygiene

DATE: December 12, 2013

RE: Overview of Meaningful Use Stage 2 Public Health Reporting and For Obtaining Financial Subsidies for Connectivity when Connecting through CRISP

EXECUTIVE SUMMARY

As Eligible Hospitals plan for Stage 2 Meaningful Use (MU), there are certain requirements that require interaction with DHMH that the Department would like to highlight. Additionally, hospitals may also qualify for subsidies available through CRISP to help offset internal costs associated with meeting these requirements.

PUBLIC HEALTH REPORTING MEANINGFUL USE MEASURES FOR STAGE 2

The Public Health Reporting measures were moved to the core set of measures in Stage 2, so they are required of all Eligible Hospitals. Hospitals must show successful ongoing submission or testing for the following data from Certified Electronic Health Record (EHR) Technology to a public health agency or registry for the reporting period:

- Immunization Registries Data
- Electronic Reportable Laboratory Results
- Syndromic Surveillance Data

DHMH has developed guidance on how Maryland Eligible Hospitals must meet the MU2 measures, which includes registration with DHMH before the EHR reporting period. Importantly, DHMH has partnered with CRISP, Maryland’s state-designated Health Information Exchange, to deliver the public health data from Eligible Hospitals to the State. Additional information can be found on the DHMH website: https://mmcp.dhmh.maryland.gov/ehr/SitePages/PublicHealthObjectives_Main.aspx.

Technical Requirements for Stage 2

Please plan ahead and assess the current status of your systems to prepare for any upgrades and/or new interfaces necessary to meet the requirements.
1) **Certified EHR Technology.** The public health data being sent to the Department must originate from the hospital’s certified technology. Hospitals should consider where the data will originate (i.e. from an individual module, such as a lab system, or from your core EHR) and determine if that technology is certified for MU Stage 2. Depending on the technology, a system upgrade may be necessary to achieve MU certification requirements or a re-assessment of which system the public health information will originate from may be required.

2) **HL7 version 2.5.1 interfaces.** One major provisions of Stage 2 is the requirement of HL7 2.5.1 for all public health messages submitted to the State. Please check your current Lab, Immunization, and Syndromic Surveillance (ADT) feeds to ensure they are compliant. If not, you may require an interface upgrade.

3) **LOINC & SNOMED CT®.** These vocabulary standards must be incorporated into the Lab feed. This effort has proven significant for some hospitals.

**HOSPITAL PUBLIC HEALTH CONNECTIVITY SUBSIDIES**

CRISP has received federal funding to support the establishment of public health connectivity. As part of this funding, CRISP is offering a subsidy to Eligible Hospitals for establishing the necessary interfaces to DHMH. This subsidy will be made available through a discount to the current CRISP Hospital Participation Fees.

**Subsidy Amount**

CRISP offers a subsidy of $5,000 for each feed (Labs, Immunizations, and Syndromic Surveillance). CRISP will work with hospitals that are part of a health system and/or which are already working on public health connectivity to determine the amount for which each hospital is eligible. Hospitals approved to receive the subsidy must go live with the feeds within a maximum of one year of commencing work with CRISP.

**CONTACT INFORMATION**

If you have questions regarding the information contained in this memorandum, please direct your questions to the appropriate contact below.

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