

Eligible Hospital (EH & CAH) Meaningful Use 2018 (Modified Stage 2)

All EH (eligible hospitals) and critical access hospitals (CAH) in 2018 must meet three measures

Objective	Stage	Measure	Explanation	State Status	Additional Information
Modified Stage 2: Objective 10: Public Health Reporting	Modified Stage 2	Measure Option 1 – Immunization Registry Reporting:	The eligible hospital or CAH is in active engagement with a public health agency to submit immunization data.	NH DPHS is not accepting immunization data from EHs at this time. If reporting in NH, EHs may claim exclusions for this measure when attesting for meaningful use, as applicable.	ONC-Adopted Standard(2014 CEHRT) HL7 2.5.1 HL7 Version 2.5.1: Implementation Guide for Immunization Messaging, Release 1.4
Modified Stage 2: Objective 10: Public Health Reporting	Modified Stage 2	Measure Option 2 – Syndromic Surveillance Reporting:	The eligible hospital or CAH is in active engagement with a public health agency to submit syndromic surveillance data.	NH DPHS is accepting syndromic surveillance data into test and production systems as applicable from EHs at this time.	ONC-Adopted Standard(2014 CEHRT) HL7 2.5.1 PHIN Messaging Guide for Syndromic Surveillance: Emergency Department and Urgent Care Data, Release 1.1 (August 2012) NH Link to Syndromic Surveillance Local Implementation Guide: http://www.dhhs.nh.gov/dphs/bphsi/documents/sslocalguide.pdf NH Statutes - RSA 141-C:7 (Reporting of Communicable Disease), 141-C:8 (List of Diseases; Report Forms) Administrative Rule - He-P 301.02 and He-P 301.03.
Modified Stage 2: Objective 10: Public Health Reporting	Modified Stage 2	Measure Option 3 – Specialized Registry Reporting:	The eligible hospital or CAH is in active engagement to submit data to a specialized registry.	NH DPHS is not accepting specialized registry reporting from Eligible Hospitals and CAH.	
Modified Stage 2: Objective 10: Public Health Reporting	Modified Stage 2	Measure Option 4 – Electronic Reportable Laboratory Result Reporting:	The eligible hospital or CAH is in active engagement with a public health agency to submit electronic reportable laboratory (ELR) results.	NH DPHS is accepting the submission of electronic reportable laboratory results into test and production systems as applicable from EHs at this time.	ONC-Adopted Standard(2014 CEHRT) HL7 2.5.1 HL7 Version 2.5.1 Implementation Guide: Electronic Laboratory Reporting to Public Health, Release 1 (US Realm), with Errata and Clarifications NH Link to ELR Local Implementation Guide: http://www.dhhs.nh.gov/dphs/bphsi/documents/elrguide.pdf NH Statutes - RSA 141-C:7 (Reporting of Communicable Disease), 141-C:8 (List of Diseases; Report Forms), and RSA 130-A (Lead Paint Poisoning Prevention and Control) Administrative Rules - He-P 301.02, He-P 301.03 (reportable disease), and



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He-P 1600 (lead paint poisoning)

Eligible Hospital (EH & CAH) Meaningful Use Stage 3 measures in 2018. EHs and CAH attesting for MU3 (optionally in 2018) have six measure options EH & CAH must meet a Total of 4 measures

Objective	Stage	Measure	Explanation	State Status	Additional Information
Objective Stage 3 Objective 8: Public Health and Clinical Data Reporting	Stage Stage 3	Measure Measure 1: Immunization Registry Reporting	The EH or CAH is in active engagement with a public health agency to submit immunization data and receive immunization forecasts and histories from the public health immunization registry/immunization	State Status NH DPHS is not accepting Stage 3 immunization data from EHs for 2018. If reporting in NH, EHs may claim exclusions for this measure when attesting for meaningful use, as applicable.	Additional Information ONC-Adopted Standard(2015 CEHRT) HL7 2.5.1 HL7 Version 2.5.1: Implementation Guide for Immunization Messaging, Release 1.5 (October 2014) and Addendum (July 2015)
Stage 3 Objective 8: Public Health and Clinical Data	Stage 3	Measure 2: Syndromic Surveillance Reporting	information system (IIS). The EH or CAH is in active engagement with a public health agency to submit syndromic surveillance data from an urgent care setting.	NH DPHS is not accepting Stage 3 syndromic surveillance data into test and production systems for 2018. The PHIN messaging guide for hospital syndromic surveillance is upgraded to version 2.0 in the 2015 Edition CEHRT. Important changes include: PHAs operating syndromic surveillance systems (SyS) will need to	ONC-Adopted Standard(2015 CEHRT) HL7 2.5.1 PHIN Messaging Guide for Syndromic Surveillance: Emergency Department, Urgent Care, Ambulatory Care and Inpatient Settings, Release 2.0
Reporting				adjust SyS message receiving and data transformation processes. Certification under 2015 Edition CEHRT calls for the testing of the ability to message inpatient data (in addition to emergency department or outpatient) for syndromic surveillance purposes; under 2014 Edition this was not a requirement. Under 2015 Edition CEHRT, SyS should also provide additional facility and	NH Link to SS Local Implementation Guide: http://www.dhhs.nh.gov/dphs/bphsi/documents/sslocalguide.pdf NH Statutes - RSA 141-C:7 (Reporting of Communicable Disease), 141-C:8 (List of Diseases; Report Forms) Administrative Rule - He-P 301.02 and He-P 301.03.



Eligible Hospital (EH & CAH) Meaningful Use Stage 3 measures in 2018. EHs and CAH attesting for MU3 (optionally in 2018) have six measure options EH & CAH must meet a Total of 4 measures

				patient demographic information, including: Facility name, Facility address, Patient City/Town, Smoking status SyS should have been tested to include the capture and transmission of ICD-9 CM, ICD-10 CM, LOINC, and SNOMED coded data along with Chief Complaint; under 2014 Edition CEHRT, testing for compliance was limited to ICD-9 CM and Chief Complaint.	
Stage 3 Objective 8: Public Health and Clinical Data Reporting	Stage 3	Measure 3- Electronic Case Reporting (For Stage 3 in 2018 only)	Electronic Case Reporting: The EH or CAH is in active engagement with a public health agency to submit case reporting of reportable conditions.	NH DPHS is not accepting Stage 3 Electronic Case Reporting from Eligible Hospitals and CAH for 2018.	Per guidelines in the ONC 2015 Edition Certification Final Rule
Stage 3 Objective 8: Public Health and Clinical Data Reporting	Stage 3	Measure 4: Public Health Registry Reporting* *For Measures 4 and 5, a Provider may report to more than one public health and/or clinical data registry and may count public health and/or clinical	Public Health Registry Reporting: The EH or CAH is in active engagement to submit data to public health registries. Starting in Stage 3, all Public Health Registries and Clinical Data Registries must use certified standards for meaningful use transactions. In 2018, providers can use a combination of 2014 Edition and 2015 Edition CEHRT. This is in contrast	NH DPHS is not accepting Stage 3 Public Health Registry Reporting from Eligible Hospitals and CAH for 2018.	No standard mandated for public health registry reporting per se, except for- • Antimicrobial use and resistance reporting to NHSN-HL7 Implementation Guide for CDA® Release 2 –Level 3: Healthcare Associated Infection Reports, Release 1, U.S. Realm (August 2013) (Eligible Hospital/CAH only) • NCHS Health care surveys-HL7 Implementation Guide for CDA® Release 2: National Health Care Surveys (NHCS), Release 1—US Realm, Draft Standard for Trial Use (December 2014)



Eligible Hospital (EH & CAH) Meaningful Use Stage 3 measures in 2018. EHs and CAH attesting for MU3 (optionally in 2018) have six measure options EH & CAH must meet a Total of 4 measures

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		data registry reporting more	to Modified Stage 2 where use of ONC standards are		
		than once to	not required if they are not		
		meet the	present in the 2014 Edition		
		required number	CEHRT.		
		of measures for			
		the Public Health			
		and Clinical Data			
		Registry Reporting			
		objective.			
Stage 3	Stage	Measure 5:			*For Measures 4 and 5, a Provider may report to more than one
Objective	3	Clinical Data	Measure 5 – Clinical Data		public health and/or clinical data registry and may count public
8: Public		Registry	Registry Reporting: The EH		health and/or clinical data registry reporting more than once to
Health		Reporting*	or CAH is in active		meet the required number of measures for the Public Health and
and Clinical			engagement to submit		Clinical Data Registry Reporting objective.
Data			data to a clinical data		
Reporting			registry.		
Ctago 2	Stage	Measure 6:		NH DPHS is accepting Stage 3 submission of electronic reportable	
Stage 3 Objective	3	Electronic	Measure 6 – Electronic	laboratory results into test and production systems as applicable	HL7 2.5.1
8: Public		Reportable	Reportable Laboratory Result Reporting: The EH or	from EHs for 2018.*	HL7 Version 2.5.1 Implementation Guide: Electronic
Health		Laboratory	CAH is in active		Laboratory Reporting to Public Health, Release 1 (US Realm),
and			engagement with a public	*There are no changes to the HL7 implementation guide used for	with Errata and Clarifications
Clinical			health agency to submit	Electronic Laboratory Reporting.	
Data			electronic reportable		NULLink to FLD Land land and addition Colider
Reporting			laboratory (ELR) results.	*Despite no changes, there may be a need to revalidate if a	NH Link to ELR Local Implementation Guide: http://www.dhhs.nh.gov/dphs/bphsi/documents/elrguide.pdf
				hospital updates or purchases new certified software.	nepry www.amamagovy.upita/upita/upita/upita/enguide.pdr
					NH Statutes - RSA 141-C:7 (Reporting of Communicable Disease),
					141-C:8 (List of Diseases; Report Forms), and RSA 130-A (Lead
					Paint Poisoning Prevention and Control)
					Administrative Rules - He-P 301.02, He-P 301.03 (reportable
					disease), and He-P 1600 (lead paint poisoning)



Eligible Professionals (EP) Modified Stage 2 Meaningful Use 2018 All EPs must meet 2 measures in 2018

Objective	Stage	Measure	Explanation	State Status	Additional Information
Modified Stage 2: Objective 10: Public Health Reporting	Modified Stage 2	Option 1 – Immunization Registry Reporting	The EP is in active engagement with a public health agency to submit immunization data.	NH DPHS is not accepting immunization data from EPs. If reporting in NH, EPs may claim exclusions for this measure when attesting for meaningful use, as applicable.	
Modified Stage 2: Objective 10: Public Health Reporting	Modified Stage 2	Option 2 – Syndromic Surveillance Reporting	The EP is in active engagement with a public health agency to submit syndromic surveillance data.	NH DPHS is not accepting syndromic surveillance data from EPs. If reporting in NH, EPs may claim exclusions for this measure when attesting for meaningful use, as applicable.	
Modified Stage 2: Objective 10: Public Health Reporting	Modified Stage 2	Option 3 – Specialized Registry Reporting	The EP is in active engagement to submit data to a specialized registry.	NH DPHS is accepting the submission of cancer case information from Certified Electronic Health Record Technology.	For more information on the Registry, please visit their website at: http://geiselmed.dartmouth.edu/nhscr/ NH Statutes - RSA 141-C:7 Administrative Rules He-P 304. For information on specifications for providers to use as guidance for reporting cancer cases, please visit the HL7.org website at http://www.hl7.org/implement/standards/product_brief.cfm?product_id=383 For the purposes of the Medicaid EHR Incentive Program, EPs that diagnose
				Note: For the purposes of the Medicaid EHR Incentive Program, the federal statute authorizes eligible professionals attesting to Modified Stage 2 MU in 2018 to submit data to the cancer registry via CEHRT or other electronic means	or treat any disease or condition associated with, or collect, relevant cancer registry data during the EHR reporting period may submit data via CEHRT or electronic means. EPs that submit data by paper are not considered meaningful users and may not claim active engagement or exclusion to this measure. EPs that do not diagnose or treat any disease or condition associated with, or collect, relevant cancer registry data during the EHR reporting period may claim exclusion as applicable. NH DPHS will provide supporting documentation to verify that EPs that are in active engagement with the cancer registry either by CEHRT or electronic means during the EHR reporting period.
				electronic means	active engagement with the cancer registry either by CEHRT or electron



Eligible Professionals (EP) Modified Stage 2 Meaningful Use 2018 All EPs must meet 2 measures in 2018

Objective	Stage	Measure	Explanation	State Status	Additional Information
Stage 3 Objective 8: Public Health and Clinical Data Reporting	Stage 3	Measure 1 – Immunization Registry Reporting	The EP is in active engagement with a public health agency to submit immunization data and receive immunization forecasts and histories from the public health immunization registry/immunization information system (IIS)	NH DPHS is not accepting Stage 3 immunization data from EPs for 2018. If reporting in NH, EPs may claim exclusions for this measure when attesting for meaningful use, as applicable	ONC-Adopted Standard(2015 CEHRT) HL7 2.5.1 HL7 Version 2.5.1: Implementation Guide for Immunization Messaging, Release 1.5 (October 2014) and Addendum (July 2015)
Stage 3 Objective 8: Public Health and Clinical Data Reporting	Stage 3	Measure 2 – Syndromic Surveillance Reporting	The EP is in active engagement with a public health agency to submit syndromic surveillance data from an urgent care setting.	NH DPHS is not accepting Stage 3 syndromic surveillance data for 2018.	
Stage 3 Objective 8: Public Health and Clinical Data Reporting	Stage 3	Measure 3 – Electronic Case Reporting	The EP is in active engagement with a public health agency to submit case reporting of reportable conditions	NH DPHS is not accepting Stage 3 Public Health Electronic Case Reporting from EPs for 2018	
Stage 3 Objective 8: Public Health and Clinical Data Reporting	Stage 3	Measure 4 – Public Health Registry Reporting	The EP is in active engagement to submit data to public health registries	NH DPHS is accepting Stage 3 Public Health Registry Reporting from EPs for 2018.	Cancer case reporting from EPs to State Cancer Registry-HL7 CDA® Release 2 Implementation Guide: Reporting to Public Health Cancer Registries from Ambulatory Healthcare Providers, Release 1; DSTU Release 1.1, U.S. Realm) (EP Only)



Stage 3 Objective 8: Public Health and Clinical Data Reporting	Stage 3	Measure 5 – Clinical Data Registry Reporting	The EP is in active engagement to submit data to a clinical data registry	NH DPHS is not accepting Stage 3 Clinical Data Registry Reporting from EPs for 2018.	

Available links and resources:

Division of Public Health Services

http://www.dhhs.nh.gov/dphs/bphsi/meaningful-use.htm

CMS EHR Incentive Program website

http://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/index.html?redirect=/ehrincentiveprograms/

Regional Extension Center of New Hampshire

http://www.recnh.org

Medicaid Electronic Health Record Incentive Program

http://www.dhhs.nh.gov/ombp/ehr/index.htm

The Office of the National Coordinator for Health Information Technology (ONC)

http://www.healthit.gov/