

Medicaid Promoting Interoperability (PI) Program Frequently Asked Questions: Program Year 2019 Public Health and Clinical Data Registry (CDR) Reporting

#	Question and Answer
1	Q: How does an eligible professional (EP) meet the public health and clinical data registry (CDR) reporting objective?
	<b>A</b> : An EP must satisfy 2 of the 5 available measures listed below for this objective. If the EP cannot satisfy at least two measures, the EP may still meet the objective if the EP qualifies for exclusions from all measures the EP cannot meet.
	<ul> <li>Immunization Registry Reporting</li> <li>Syndromic Surveillance Reporting</li> <li>Electronic Case Reporting</li> <li>Public Health Registry Reporting</li> <li>Clinical Data Registry Reporting</li> </ul>
2	Q: What is an exclusion for the public health and CDR reporting objective?
	<b>A:</b> An exclusion may be applied to any of the 5 available measures where the applicable exclusion criteria was met. See the <u>CMS Specification Sheet</u> and the AHCCCS Public Health and Clinical Data Registry Presentation <sup>A</sup> for the available exclusions for each measure. An EP that meets an exclusion for a particular measure is not required to submit data to the applicable registry; however, the EP must be able to support the reason for taking the exclusion.
3	Q: Does an exclusion for a measure count towards the total of two measures?
	<b>A:</b> No, an exclusion for a measure does not count toward the total of two measures. However, if the EP qualifies for multiple exclusions and there is only one available measure remaining, the EP can meet the objective by meeting the remaining available measure or meeting the applicable exclusions.
4	Q: Which State agency in AZ oversees the public health reporting program?
	<b>A:</b> The Arizona Department of Health Services (ADHS) promotes and protects the health of Arizona's children and adults and has oversight of the public health reporting for the PI Program.
	If an EP has a specific question regarding one of the Arizona state registries, the EP can reach out to the <u>contacts listed</u> for each registry.



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5	Q: What determines an EP's jurisdiction?
	<b>A:</b> The definition of jurisdiction is general, and the scope may be at the local, state, regional, or national level. The definition will be dependent on the type of registry to which the EP is reporting.
	A registry that is "borderless" would be considered a registry at the national level and would be included for purposes of this objective.
6	Q: What does bi-directional mean?
	<b>A</b> : The term bi-directional only relates to immunization registry reporting measure for Program Year 2019. An EP who is exchanging data bi-directionally with the Arizona State Immunization Information System (ASIIS) is able to receive and display a consolidated immunization history and forecast in addition to sending the immunization record.
7	Q: What is production data?
	<b>A</b> : Production data is data generated through clinical processes involving patient care. This term is used to distinguish between live production data and test data submitted to test electronic data transfers.
8	Q: What does active engagement mean?
	<b>A</b> : The EP is in the process of moving towards sending "production data" to a public health agency (PHA) or clinical data registry (CDR), or is sending production data to a PHA or CDR. There are three active engagement options discussed in questions 8 - 11.
	Additional information regarding active engagement options can be found on the <u>ADHS website</u> .
9	Q: How does an EP determine whether he/she is in active engagement option 1?
	<b>A</b> : An EP is in active engagement option 1 if the EP completed registration to submit data. The EP will be awaiting an invitation from the PHA or CDR to begin testing and validation.
	An EP must register no later than <u>60 days from the start of the PI (EHR) reporting period</u> . Registration is allowed prior to the PI (EHR) reporting period. The 60-day period includes the first day of the reporting period.
	EPs that have registered in previous years do not need to submit an additional registration to meet this requirement for each PI (EHR) reporting period.



#	Question and Answer
10	Q: How does an EP determine whether he/she is in active engagement option 2?
	<b>A:</b> An EP is in active engagement option 2 if the EP is in the process of testing and validation of the electronic submission of data.
	EPs must respond to requests from the PHA or, where applicable, the CDR within 30 days. Failure to respond twice within a PI (EHR) reporting period would result in that EP not meeting the measure.
11	Q: How does an EP determine whether he/she is in active engagement option 3?
	<b>A:</b> An EP is in active engagement option 3 if the EP has completed testing and validation of the electronic submission and is electronically submitting production data to the PHA or CDR.
12	Q: If the EP has previously registered, tested or begun ongoing data submission in a prior program year, will the EP need to restart the process for that registry beginning at active engagement option 1?
	A: No, the EP does not need to restart (for example registering again) the process for that registry. The EP may continue to maintain the active engagement option that closely reflects his/her current status.
13	Q: If the EP is part of a group that submits data to a registry, but the EP does not contribute to that data, is the EP able to attest to meeting the measure using that registry?
	A: No, the EP should not attest to meeting the measure using that registry, but instead should select the exclusion or select a more relevant measure to meet.
	However, if in the normal course of his or her practice, the EP does the action that results in data for a registry and is in active engagement to submit to that registry, but simply has no cases for the reporting period, the EP is not required to take an exclusion and may attest to meeting the measure.
14	Q: What documentation must be submitted to demonstrate that the EP is in active engagement with a registry?
	<ul> <li>A: Documentation supporting the EP is in active engagement with the registry should include the following:</li> <li>Provider or practice name;</li> <li>Reflect EP's level of active engagement;</li> <li>Be clearly legible; and</li> <li>Reflect the date the requirement was met.</li> </ul>



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15	Q: When do I need to complete active engagement to meet Program Year 2019 requirements?
	A: EPs must determine his/her level of engagement and then use the below guidance on when to complete.
	<ul> <li>Active Engagement Option 1: The completion date can occur before calendar year 2019 if the EP has not progressed and is still in active engagement option 1, <u>but</u> no later than 60 days from the start of the PI (EHR) reporting period.</li> </ul>
	<ul> <li>Active Engagement Option 2: The completion date can occur before calendar year 2019 if the EP has not progressed and is still in active engagement option 2.</li> <li>Active Engagement Option 3: The completion date can occur before calendar year 2019 if the EP is</li> </ul>
	still in active engagement option 3.
16	Q: What requirements changed between Modified Stage 2 (2018) and Stage 3 (2019) for immunization registry reporting?
	A: The following changes occurred between Modified Stage 2 (2018) and Stage 3 (2019):
	• The measure was formerly objective 10, measure 1 for Modified Stage 2 (2018). It is now objective 8, measure 1 for Stage 3 (2019).
	• Starting in Stage 3, the EP must exchange immunization data <b>bi-directionally</b> .
17	Q: Did the EP have to reach out to ASIIS during Program Year (PY) 2019 or earlier to request bi-directional data exchange?
	<b>A:</b> Yes, the EP must have reached out to ASIIS during PY 2019 or earlier to request bi-directional data exchange. The EP continues unidirectional data exchange with ASIIS until the EP requests bi-directional data exchange with ASIIS.
	<b>Previously Registered EPs:</b> EPs who have previously registered with ASIIS do not need to register again. The EP should reach out to ASIIS once the EP is ready to begin bi-directional data exchange and then the EP will move to active engagement option 2 (testing and validation).
	<u>Newly Registered EPs</u> : Active engagement option 1 is only available in PY 2019 for EPs who have not previously registered with ASIIS. There are two options for EPs that registered in PY 2019.
	<ul> <li>The EP can register for the unidirectional data exchange. However, once the EP moves through active engagement options 1 and 2, the EP must immediately request bi-directional data exchange; or</li> <li>The EP can go ahead and request bi-directional data exchange during the initial registration process with ASIIS. AHCCCS recommends this option.</li> </ul>

<sup>A</sup> AHCCCS Public Health and Clinical Data Registry Presentation



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18	Q: Is an EP in the state of AZ able to meet an exclusion <sup>A</sup> for immunization registry reporting?
	<b>A:</b> An EP may be able to meet exclusion 1 for immunization registry reporting. However, an EP in the state of AZ is not able to meet exclusions 2 or 3.
	<b>Exclusion 1:</b> The EP should explain and document why he or she does not administer immunizations to any of the populations for which data is collected by ASIIS during the PI (EHR) reporting period.
	<b>Exclusion 2:</b> ASIIS has the capability to accept the specific standards required to meet the CEHRT definition; therefore, an EP in AZ is not able to meet this exclusion.
	Exclusion 3: ASIIS has declared readiness; therefore, an EP in AZ is not able to meet this exclusion.
19	Q: Is an EP in the state of AZ able to meet the syndromic surveillance reporting measure?
	<b>A:</b> No, ADHS is not accepting syndromic surveillance messages from EPs at this time. Therefore, an EP in the state of AZ is able to meet any of the exclusions for this measure in Program Year 2019.
20	Q: Is an EP in the state of AZ able to meet the electronic case reporting measure?
	<b>A:</b> No, ADHS is not accepting electronic case reporting from EHs or EPs. Therefore, EPs and EHs in the state of AZ are able to meet any of the exclusions for this measure.
21	Q: What determines whether a registry is a public health registry?
	<b>A:</b> A public health registry is administered by, or on behalf of, a local, state, territorial, or national public health agency and which collects data for public health purposes.
22	Q: What determines whether a registry is a clinical data registry (CDR)?
	<b>A:</b> A CDR records information about the health status of patients and the health care they receive over varying periods of time. CDRs typically focus on patients who share a common reason for needing health care.



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23	Q: Is a specialized registry considered a public health registry or a CDR?
	<b>A:</b> In Modified Stage 2 (2018) all public health registries and CDRs were included in the specialized registries measure. However, in Stage 3 (2019) the specialized registries measure was separated into two measures: public health registries and CDRs. If a specialized registry is public rather than private, it would be classified as a public health registry.
	An EP may count a specialized registry towards meeting the public health registry or CDR measure if the EP achieved active engagement option 3 in a prior year under the applicable requirements of the PI Program for that year.
24	Q: Is an EP in the state of AZ allowed to use the Prescription Drug Monitoring Program as a registry?
	<b>A:</b> No, the Prescription Drug Monitoring Program (PDMP) was not an available registry in the state of AZ for Program Year 2019.
25	Q: If an EP in the state of AZ does not see cancer patients is the EP able to meet the exclusion for the public health registry measure?
	<b>A:</b> No, there are registries at the national level that may be available to the EP. The EP should attempt and document that he or she attempted to find a national public health registry. There are multiple national registries available.
	Contact your national specialty society.
	Participate in the <u>National Health Care Survey</u> .
	<ul> <li>List of public health registries under <u>National Institutes of Health</u>.</li> </ul>
26	Q: Is an EP able to meet an exclusion for the CDR measure?
	<b>A:</b> There are multiple CDRs that may be appropriate for the EP to utilize. For an EP to meet the exclusion, the EP should attempt and document that he or she attempted to find a CDR appropriate for the scope of his/her practice. See list below for some examples of CDRs. There may be additional registries that are not included on the list below.
	List of CDRs



#	Question and Answer
27	Q: How many public health registries can an EP choose to report on to meet the program requirements?
	<b>A:</b> An EP may choose to report on up to 2 public health registries and have each registry count towards the total of 2 measures required by the objective.
28	Q: How many CDRs can an EP choose to report on to meet the program requirements?
	<b>A:</b> An EP may choose to report on up to 2 CDRs and have each registry count towards the total of 2 measures required by the objective.
29	Q: Are there additional FAQs regarding the specific AZ registries?
	A: Yes, additional questions can be found on ADHS website depending on the registry.
	<ul> <li><u>ASIIS FAQs</u></li> <li><u>Cancer Registry FAQs</u></li> </ul>