

## February 21, 2013 (Updated 2/11/2015)

### Meaningful Use for ELR Workshop

### Question & Answer Document

#### Question 1

Since we are a multi-facility site how will we get error messages back? Can you go right to the correct facility? Do I need an OID for each facility for this to happen or how to do you tell what facility it came from?

#### Answer 1 a)

The answer to getting e-mails back is slightly different than the answer regarding OIDS. The error message should go to those people responsible for providing messaging support. This should generally be technical staff as opposed to clinical staff. The message location where the facility is obtained (and thereby linked to points of contact) differs based on the format that your facility is sending to the IDPH smartLab™ Portal:

1. **2.5.1 EDI format: [FHS.4 - sending facility is of data type HD]**
2. **2.5.1 XML format: [FHS.4 - sending facility is of data type HD]**
3. **2.3.1 EDI format [First MSH.4 (HD.1 & HD.2)]**
4. **2.3.1 XML format [First MSH.4 (HD.1 & HD.2)]**
5. **SMF format [BHS.2 & BHS.3]**

If a multi-facility site is the sending facility for multiple hospitals, but each hospital has its own messaging support team, it is important to identify the specific hospital that should receive the error message by populating the field specified above based on the submitted format. Depending on the format sent, a facility may be required to prepare facility-specific batch files for the SMF and HL7 2.5.1 message formats, because the facility is obtained from a location that occurs only once in the batched message.

If a multi-facility site is the sending facility for multiple hospitals, but there is only one messaging support team for all of the hospitals, it is important to identify the organization where that team resides by populating the field specified above based on the submitted format.

A single facility site should identify itself by populating the field specified above based on the submitted format.

#### Answer 1 b)

You will need to obtain OIDs for each facility as outlined in the IDPH Implementation Guide and Constrained Profile in the section called "Obtaining OIDS and OIDS Registry" beginning on page 24. These rules are based on the HL7 Standard referenced under Meaningful Use. OIDS are required and referenced at several locations throughout the tables in the IDPH implementation guide.

#### Question 2

Does electronic laboratory reporting (ELR) pertain to hospitals, clinics, or both?

### *Answer 2*

Meaningful Use pertains only to eligible hospitals (EHs) and critical access hospitals (CAHs), but ELR pertains to any facility that submits reportable laboratory results to public health agencies in Iowa that would like to submit these electronically.

### **Question 3**

Will there be detailed printed instructions provided for the smartLab™ Provider Portal.

### *Answer 3*

Yes. The document is available from a link found in the IDPH Implementation Guide and Constrained Profile in the section “Using the IDPH smartLab™ Provider Portal and the CWE Data Type” on page 17. [http://www.idph.state.ia.us/adper/common/pdf/idss/elr\\_constrained\\_profile.pdf](http://www.idph.state.ia.us/adper/common/pdf/idss/elr_constrained_profile.pdf)

### **Question 4**

To whom does the proposed administrative rules change apply? Do we need another waiver?

### *Answer 4*

The administrative rules change applies to healthcare providers and hospitals. The chief purpose is to alleviate hospitals that do not perform laboratory tests yielding results related to reportable conditions, but required by Meaningful Use to submit reportable laboratory results to public health. This change also alleviates public health of the additional effort of handling and eliminating duplicate records. Currently only eligible hospitals and critical access hospitals are required to do this reporting under Meaningful use, so these are the most immediately affected by the rules change.

This change – even if effective by July 1, 2013 – will not exempt an eligible hospital or critical access hospital from the Meaningful Use Stage 1 requirements. For this reason, IDPH is going to take 2 actions:

1. Revise its Meaningful Use Letter to indicate that it is not prepared to receive the Stage 1 Meaningful Use test message from hospitals designated as ‘rural hospitals’ or ‘critical access hospitals.’ NOTE: this has not yet been verified with ONC and therefore should not be considered final. This is scheduled to be posted by April 1<sup>st</sup>, 2013.
2. Issue an IDPH waiver to hospitals that indicate they must rely on the smartLab™ to produce the HL7 2.5.1 message required by the Meaningful Use standard.

This entire answer thus far pertains only to Meaningful Use Stage 1.

The rules change and the reporting exemption for hospitals that do not perform their own lab work related to reportable conditions is expected to be more valuable for Meaningful Use Stage 2, where data exchange must be implemented. It is likely that an ONC exemption will be provided, but it has yet to be defined.

### Question 5

Does the hospital register for the smartLab™ or should the hospital's vendor register for the smartLab™?

#### *Answer 5*

The party that will be mapping the codes, submitting messages, and providing message support should register with the smartLab™. Only one facility should be registered, but smartLab™ users can be a mix of hospital and vendor staff.

### Question 6

Do we have to enroll with the Iowa Health Information Network (IHIN) to achieve Meaningful Use Stage 2?

#### *Answer 6*

Yes. IDPH does not have the resources to support point-to-point connections for ELR. The only way IDPH can achieve statewide electronic laboratory reporting is through the efficiencies provided by the IHIN.

### Question 7

Is the delivery method still Direct™ secure messaging?

#### *Answer 7*

No. Direct™ secure messaging has not been selected by a single hospital in Iowa and is not considered the most practical transport. Iowa is now supporting both virtual private network (VPN) and web services as transport methods for ELR.

### Question 8

Which IHIN agreement should I complete; the IHIN Standard Participation Agreement or the IHIN Direct Secure Messaging Partnership Agreement?

#### *Answer 8*

You should use the **IHIN Standard Participation Agreement**. There is no difference in the fee schedule, but there is a difference in authorizations for certain features of the IHIN. Facilities that will be using the smartLab™ will most likely need to enroll with the IHIN Standard Participation Agreement. The following link opens the IHIN Standard Participation Agreement:

[http://www.iowaehealth.org/documents/cms/docs/Enrollment\\_Documents/Standard\\_IHIN\\_Participation\\_Agreement.pdf](http://www.iowaehealth.org/documents/cms/docs/Enrollment_Documents/Standard_IHIN_Participation_Agreement.pdf)