



## Important Message

### CT Medicaid EHR Incentive Program - Guidance to Eligible Professionals on the 2017 Public Health Specialized Registry Option for Modified Stage 2 and Clinical Data Registry Reporting for Stage 3

In Program Year 2017, an EP can attest to the “Specialized Case Registry” option of the Meaningful Use Public Health Measure for Modified Stage 2 or the “Clinical Data Registry Reporting” option for Stage 3 by demonstrating active engagement to submit data to a specialized registry or clinical data registry, or appropriately claiming an exclusion from the measure option. Currently, the State of Connecticut’s public health agency, the Department of Public Health, does not operate any specialized case or clinical data registries. EPs are required, however, to determine if there is another specialized case or clinical data registry available to them, or if they meet exclusion criteria for this measure.

#### Steps EPs need to take to determine if a Specialized Case Registry or Clinical Data Registry is Available to Them or If They Should Claim Exclusion:

**Step 1:** An EP must check with their jurisdiction or any specialty society with which they are affiliated to determine if the jurisdiction or society maintains or endorses a specialized registry or clinical data registry.

**If there is no specialized registry or clinical data registry endorsed, the EP may exclude from the measure.** The EP should save any documentation of their affiliation with the specialty society for pre and post payment audit purposes. DSS may examine if the specialty society does or does not maintain or endorse a specialized case/clinical data registry to determine the appropriateness of the exclusion taken.

**Step 2:** If the specialty society and/or jurisdiction maintains or endorses a specialized registry, the EPs needs to determine if it meets certain qualities.

**If the registry does not meet the qualities listed below, the EP may exclude from the measure.** The EP should save any documentation of their affiliation with the specialty society and any information regarding the registry. DSS may examine if the registry does or does not meet these qualities.

1. Has **declared that it is ready to accept data as a specialized/clinical data registry** and will be using data to improve population health outcomes. (CMS FAQ 13653)
2. **Is able to receive electronic data generated from Certified Electronic Health Record Technology (CEHRT).** Per CMS, “Manual data entry into a web portal would not qualify for submission to a specialized registry. The electronic file can be sent through any appropriately secure mechanism including, but not limited to, a secure upload function on a web portal, sFTP, or Direct. (CMS FAQ 13653)
3. **Must be able to provide supporting documentation to EPs** that is related to demonstrating how the EP actively engaged with the specialized case registry. (CMS FAQ 13653)
4. For qualified clinical data registries, reporting to a QCDR may count for the public health specialized registry measure **as long as the submission to the registry is not only for the purposes of meeting CQM requirements for PQRS or the EHR Incentive Programs.** In other words, the submission may count if the registry is also using the data for a public health purpose. Many QCDRs use the data for a public health purpose beyond CQM reporting to CMS. A submission to such a registry would meet the requirement for the measure if the submission data is derived for CEHRT and transmitted electronically.

**Key Words for Cataloging:** Specialized Case Registry, Public Health Measure

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**Step 3:** If the specialty society or jurisdiction maintains or endorses a specialized/clinical data registry and meets the qualities of a specialized/clinical data registry, the EP is required to demonstrate active engagement with the registry. EPs may demonstrate active engagement by completing any of the following options:

1. **Completed Registration to Submit Data:** The EP registered to submit data. Registration was completed within 60 days after the start of the EHR reporting period; and the EP is awaiting an invitation to begin testing and validation.
2. **Testing and Validation:** The EP is in the process of testing and validation of the electronic submission of data. EPs must respond to requests from the clinical data registry (CDR) within 30 days; failure to respond twice within an EHR reporting period would result in that the provider not meeting the measure.
3. **Production:** The EP has completed testing and validation of the electronic submission and is electronically submitting production data to the CDR.

The EP will need to upload any supporting documents into the CT Medical Assistance Provider Incentive Repository (MAPIR) attestation verifying their active engagement with the specialized case/clinical data registry during the EHR Reporting Period.

**For more information on the above measures and exclusions, please visit:**

What Can Count as a Specialized Registry?

FAQ #13653 - <https://questions.cms.gov/faq.php?faqId=13653&id=5005>

Steps Providers Take to determine if there is a Specialized Registry Available to Them

FAQ #13657 - <https://questions.cms.gov/faq.php?faqId=13657&id=5005>

***2017 Public Health Reporting Specification Sheet for PY2017***

*Modified Stage 2: [https://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/Downloads/MedicaidEPStage2\\_Obj10.pdf](https://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/Downloads/MedicaidEPStage2_Obj10.pdf)*

*Stage 3: [https://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/Downloads/MedicaidEPStage3\\_Obj8.pdf](https://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/Downloads/MedicaidEPStage3_Obj8.pdf)*