



North Carolina Department of Health and Human Services
Division of Public Health • Epidemiology Section
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State Health Director

December 1, 2011

TO: Hospital CEOs and CIOs

FROM: Megan Davies, MD
State Epidemiologist

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North Carolina Immunization Registry

SUBJECT: Meaningful Use Public Health Menu Options for Eligible Hospitals

The Health Information Technology for Economic and Clinical Health (HITECH) Act, passed in February 2009, provides support for electronic health information exchange throughout the national health care system allowing for the use of electronic health records in a meaningful way (an initiative known as Meaningful Use).

As part of the Act, Eligible Hospitals (EHs) are granted incentive payments, over the course of three stages, if they can demonstrate that they have engaged in efforts to adopt, implement, or upgrade to certified electronic health record technology. In order to receive these payments, EHs must attest to a set of 15 required core objectives and 5 out of 10 optional menu options, with at least one of the menu options being related to population or public health. The three possible public health menu options are:

- 1) Capability to submit electronic data to immunization registries or immunization information systems and actual submission according to applicable law and practice (45 CFR §170.302(k)).
- 2) Capability to submit electronic data on reportable (as required by State or local law) lab results to public health agencies and actual submission according to applicable law and practice (45 CFR §170.306(g)).
- 3) Capability to submit electronic syndromic surveillance data to public health agencies and actual submission according to applicable law and practice (45 CFR §170.302(l)).

In North Carolina, the N.C. Division of Public Health (NC DPH) is charged with overseeing the three public health menu options. The NC DPH is capable of receiving electronic submission of reportable laboratory results in the format that complies with the standards outlined as part of the Meaningful Use initiative. Currently, NC DPH is receiving meaningful use compliant electronic laboratory results from a national commercial laboratory.

The NC DPH is capable of receiving electronic syndromic surveillance data via the North Carolina Hospital Association's North Carolina Hospital Emergency Surveillance System (NCHESS). For Meaningful Use Stage 1, NC DPH is accepting syndromic surveillance data from hospital Emergency Departments only.

In Stage 1 of the Meaningful Use Initiative, NC DPH is only accepting electronic lab results and syndromic surveillance data from Eligible Hospitals, not Eligible Professionals.



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At this time, the NC Immunization Registry is not accepting electronic submission of immunization information, but is in the process of developing the capability for a bi-directional interface with EHRs. NC DPH will send out an updated communication when this capability is functional.

For more information regarding the North Carolina Division of Public Health and the Meaningful Use Initiative, please see our website: http://epi.publichealth.nc.gov/gcdc/meaningful_use/ or contact:

Emilie Lamb
NC Division of Public Health
Meaningful Use Program Consultant
(919) 733-9587

For more information regarding electronic submission of syndromic surveillance data, please contact:

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North Carolina Hospital Association
Chief Information Officer
(919) 677-4141

Amy Ising
NC DETECT
Program Director
(919) 966-8853

For more information regarding Stage 1 of the Meaningful Use Initiative, please see the Department of Health and Human Services Final Rule, 45 CFR Part 170, Health Information Technology: Initial Set of Standards, Implementation Specifications, and Certification Criteria for Electronic Health Record Technology, dated July 28, 2010 (<http://edocket.access.gpo.gov/2010/pdf/2010-17210.pdf>).

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