COMMUNICATIONS PLAN FOR ELECTRONIC LABORATORY REPORTING

COMMUNICATIONS MANAGEMENT PLAN

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[Insert appropriate disclaimer(s)]

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1 INTRODUCTION

1.1 BACKGROUND

One of the main sources of information for public health surveillance is reporting of clinical information by clinicians and laboratories. Every state and many large urban areas in the United States have laws and regulations that require clinicians and laboratories to report evidence of reportable conditions. Historically, such reporting was performed by telephone and paper reports sent through the mail. With computerized medical files and electronic reporting capabilities increasingly available, public health has moved towards widespread implementation of electronic reporting. Electronic laboratory reporting (ELR) in particular holds the promise of faster reporting with less burden on laboratories that do not need to generate paper reports. Although much progress has been made in ELR, it has proved technically challenging to bring all laboratories and health departments up to this capability. This Communications Management Plan (CMP) has been developed to help foster better communications among the many ELR stakeholders so that broader implementation of ELR can be achieved.

For the purposes of this CMP, the scope of "electronic laboratory reporting" includes the electronic reporting of all laboratory test results to public health officials as required by state or local law and regulations, by commercial, public health, and hospital laboratories. It does not include electronic test requisitions, reporting of test results to ordering clinicians, nor electronic queries from public health officials to laboratories. Some of these excluded capabilities may be considered for addition to the scope of this communications plan in the future.

Stage 1 of the Meaningful Use (MU) incentive program is catalyzing ELR throughout the country. ELR is expected to result in more complete, consistent, timely, and standardized laboratory results reporting and will help ensure better situational awareness and prevention strategies. While ELR is an option in Stage 1, ELR could become a core public health objective for hospitals for stages 2 and 3.

Successful ELR requires timely communications and coordination among involved stakeholders. Stakeholders range from those who generate and send data to those who receive and consume data. Stakeholders also include those who define regulations, establish incentives and set standards. Others who also play a role are software and tool vendors, health information exchanges (HIEs) and public health affiliates and organizations.

Communications among these groups cover a diverse range of topics including: funding opportunities; policy and legal considerations; frequently asked questions (FAQs); lessons learned and best practices; available tools and recommendations on which ones to use; updated information on standards, implementation guides and specifications; and opportunities to guide future policy direction by keeping everyone informed of comment periods and due dates for policy and standards.

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1.2 PURPOSE

The overall objective of this CMP is to promote success by meeting the information needs of stakeholders. At a high level, the CMP defines the stakeholders involved in ELR, outlines methods of information exchange among stakeholders and defines frequency of established exchanges. The CMP describes the actions and processes necessary to facilitate the critical links among people, ideas, and information that are necessary for project success.

The intended audience of the CMP includes all stakeholders involved in sending, receiving or processing ELR reports, as well as those who are defining regulations, setting policy, establishing incentives and developing standards.

2 STAKEHOLDER IDENTIFICATION AND ANALYSIS

ELR stakeholders include groups at federal, state and local levels of public health, the Office of the National Coordinator for Health Information Technology (ONC), the Centers for Medicaid and Medicare Services (CMS), healthcare providers, laboratories (clinical, public health and private), laboratory information system (LIS) vendors, electronic health record (EHR) vendors, HIE organizations, vendors of tools and services that support ELR, and organizations that assist with implementation of ELR .

Figure 1. Stakeholders

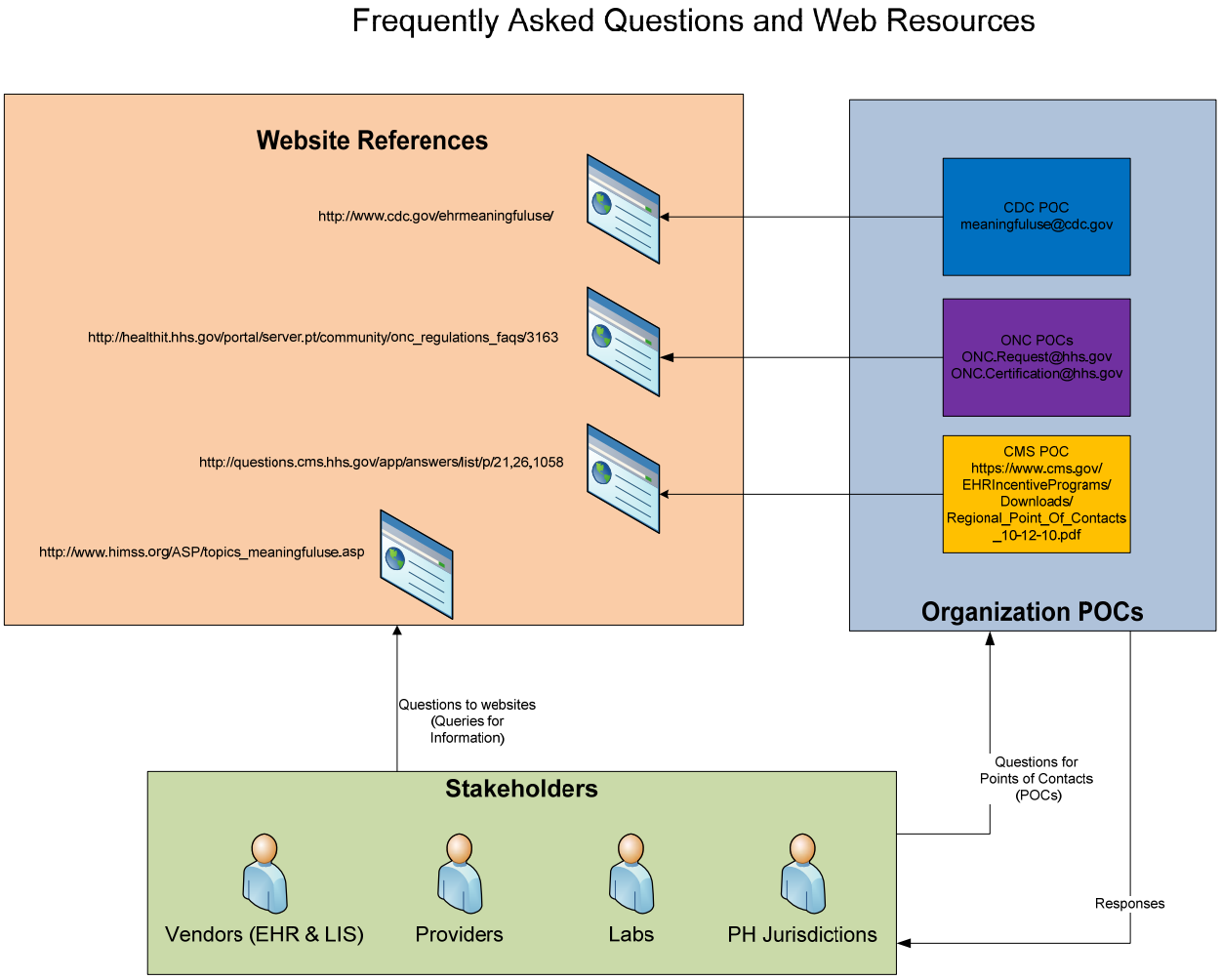
The following table shows a list of stakeholders and their roles in ELR.

Title	Communication
ONC	Define and communicate standards for ELR Meaningful Use
CMS	Define and communicate objectives for ELR Meaningful Use Receive and incorporate input on future Stages of MU Manage MU incentives for providers
Centers for Disease Control and Prevention (CDC)	Develop tools, services, national constrained profiles Evaluate and assess options for tool use Provide guidance on implementation Convene experts and report on findings Manage funding provided through CDC
State/Local Public Health Departments	Implement receipt and consumption of ELR messages On-board providers Coordinate with CMS on incentives and requirements to receive incentives
Healthcare Providers	Report laboratory results Coordinate with ONC to certify their EHR systems Coordinate with CMS on requirements to receive incentives Coordinate with HIEs on implementation strategy Coordinate with jurisdictional public health agency to implement ELR
Private Laboratories	Report laboratory results Coordinate with area HIEs, as appropriate, on implementation strategy Coordinate with jurisdictional public health agency to implement

	ELR
Public Health Laboratories	Report laboratory results Coordinate with area HIEs, as appropriate, on implementation strategy
EHR or Tools Services Vendors	Provide technology for electronic health records, medical records or associated tools or services (e.g., to map vocabulary, construct compliant message, send message to public health)
LIS Vendors	Provide technology to manage laboratory information. This may include order management, sample/specimen management, results reporting, and inventory control.
HIEs	Provide technology to route messages to public health, among others. May also map vocabulary, or do message format translation [e.g., Health Level 7 (HL7) 2.3.1 to 2.5.1]
Regional Extension Centers (RECs)	Support smaller health care providers for certification for MU by providing EHRs for their use and explaining requirements for ELR.
Surescripts	Communicate standards, tools, and services and coordinate with public health jurisdictions on reporting requirements and criteria for ELR for 500 hospitals, under a federal contract with Surescripts. Work collaboratively with the College of American Pathologists (CAP) and American Hospital Association (AHA).
The Council of State and Territorial Epidemiologists (CSTE)	Sets surveillance reporting recommendations. Coordinates communications among state and local health departments and provides comments from state epidemiologists concerning national surveillance policy.
The Association of Public Health Laboratories (APHL)	Represents state and local public health laboratories. These laboratories are both generators of reportable lab results and in some cases receivers of reportable laboratory results for the state public health agencies. As confirmatory labs they have bidirectional communication with hospital laboratories.
The Association of State and Territorial Health Officials (ASTHO)	Represents the chief executives of 59 states, territories and the District of Columbia. Policy focused organization that includes an informatics program.
The National Association of City and County Health Officials (NACCHO)	Represents over 3000 city and county public health agencies. Many of these receive laboratory results directly from laboratories or indirectly through their state public health agency. NACCHO has a large member forum to help represent issues of large local public health agencies. Many of these large agencies have their own ELR reporting systems.
The Joint Public Health Informatics Taskforce (JPHIT)	Serves as a convener of seven public health associations to help coordinate advocacy and policy for public health informatics. JPHIT is co-chaired by ASTHO and NACCHO

3 COMMUNICATIONS FLOW DIAGRAM

Stakeholders are able to contact CDC, CMS or ONC with questions about meaningful use. CDC focuses on public health-related information on meaningful use. CDC and CSTE are also resources for information on ELR.



4 COMMUNICATIONS VEHICLES

The following sections outline the communication vehicles used for ELR. These include meetings and other resources.

4.1 MEETINGS

This table identifies meetings with their frequency and participants.

Meeting	Description	Frequency	Owner	Comments/ Participants
CDC MU Advisory Group Core Team Call	Public health focused discussion on adoption, implementation, challenges and barriers associated with MU.	Weekly	CDC	CDC Leadership, ONC and CMS liaisons,
CDC MU Advisory Group Update Call	Program-based input to inform Stages 1 and 2 of MU. Updates are provided from the core team and on-going ONC committeess' activities on MU.	Monthly	CDC	Program–based participants across CDC in addition to the core team described above, plus JPHIT representatives.
CSTE Electronic Laboratory and Disease Reporting Subcommittee	ELR Metrics Workgroup to develop metrics to measure the overall status of ELR in States and Territories, and to provide the ability to track progress on implementation.	Monthly (every third Wed)	CSTE	CSTE members and other public health particpants interested in advancing ELR and Disease Reporting.
CSTE/CDC ELR Task Force Leadership Meetings	Call with ELR Task Force Workgroup Staff, Subject Matter Experts and co-chairs to discuss progress, challenges and cross-workgroup topics.	Monthly – Quarterly to sunset in Spring 2012	CDC/CSTE/APHL	Task force leadership from CSTE, CDC and APHL (task force co-chairs, project management support staff, advisors, workgroup co-chairs, subject matter experts).
Meaningful Use Public Health Nationwide Community of Practice (CoP) Call	The purpose of the call is to foster collaboration among public health jurisdictions, HIEs, Beacon Communities and RECs about the public health response to the widespread adoption of EHRs for MU	Monthly	CDC	Public health jurisdictions, HIEs, Beacon Communities and RECs

National ELR Workgroup Call	Call with State and Local health departments on topics related to ELR.	Monthly	CSTE – JA Magnuson	State and local public health officials.
Public Health Information Network (PHIN) Partner Calls	Calls focus on CDC initiatives, states' successes, or other federal partner HIE initiatives.	Monthly	CDC	State PHIN representatives, PHIN coordinators, CDC PHIN team and subject matter experts.
ONC/CDC monthly Communications and progress meetings	Strategic planning and issues related to MU.	Monthly	CDC/ONC	CDC and ONC leadership
ONC Standards & Interoperability (S&I) Public Health Initiative	The Public Health Initiative is a Community Led Initiative under the S&I Framework. The purpose of this initiative is to gather Public Health experts to determine the scope for a potential Public Health Initiative, based on the needs of the Public Health Community. Once the scope and charter have been determined, it will be presented to ONC to potentially become an initiative within the Standards and Interoperability Framework.	Bi-Monthly	PHDSC, CDC, ONC	Public Health Data Standards Consortium (PHDSC), CDC, PH Partners & Practitioners
ONC Standards &Interoperability (S&I) Laboratory Results Interface (LRI) Framework Meetings	• Create Lab Reporting deployment models to evaluate how the Lab Reporting Interface specification would work when implemented. • Identify the policies, services, regulatory requirements, and other dependencies that are needed to ensure that a Lab Reporting Interface	Weekly	ONC	S&I community participants

	specification is implementable.			
ONC Standards &Interoperability (S&I) Public Health Reporting Framework Meetings	The S&I Public Health Reporting Initiative wil develop and implement a standardized approach to electronic public health reporting from EHR systems to local, state and federal public health programs that addresses the needs of several different reporting use cases, with the long-term goal of reducing the difficulty (to both providers and public health agencies) of implementing electronic versions of the broad spectrum of public health reporting.	Weekly	Community-led with a proposal for support by ONC	S&I community participants
Public Health Laboratory Interoperability Project (PHLIP) Executive Committee	This group provides high-level direction and strategic direction to the various initiatives that fall under the PHLIP Program	Once per quarter	APHL	The PHLIP EC is comprised of leadership from State Public Health Labs, CDC – PHITPO, CDC – OID and APHL.
Public Health Laboratory Interoperability Project (PHLIP) Meetings	PHLIPse meetings aim to promote reliable laboratory data exchange between state public health laboratories and CDC by fostering collaboration in information technology and laboratory science. There are several workgroups that meet on a varying basis.	Weekly to monthly based on specific workgroup	APHL	Lab subject matter experts and IT technical experts from State Public Health Labs, CDC – PHITPO, CDC – OID and APHL.
Public Health Laboratory Interoperability Project (PHLIP) Steering Committee	This group provides overall leadership to the various initiatives that fall under the PHLIP Program.	Every two weeks	APHL	The PHLIP SC is comprised of representatives from State Public Health Labs, CDC – PHITPO, CDC – OID and APHL.
Vocabulary and Messaging CoP	This CoP brings together PHIN	Quarterly or more	CDC	Members of the ELR Workgroup,

	stakeholders nationwide involved in defining, implementing, maintaining, evaluating, and evolving lab messaging.	frequently as needed		the Public Health Laboratory Interoperability Project (PHLIP) and Laboratory Information Management System [LIMSi]projects, andstate laboratory staff.

4.2 RESOURCES

The Resources Table summarizes the websites where public health-related meaningful use and ELR information is posted.

Resource	URL	Description
Meaningful Use Cross Program Collaboration for Public Health	http://hitrc-collaborative.org	The CoP will review current burning issues affecting members and barriers that providers encounter in adopting EHRs and achieving Meaningful Use.
CDC Meaningful Use Internet	www.cdc.gov/ehrmeaningfuluse	Public Health-related Meaningful Use information
Meaningfuluse@cdc.gov	Meaningfuluse@cdc.gov	Mailbox for public health-related meaningful use questions
Meaningful Use listserv	www.cdc.gov/ehrmeaningfuluse/listserv.html	Site to join the Listserv for meaningful use communications from the CDC
CDC Meaningful Use ELR Webpage	http://www.cdc.gov/ehrmeaningfuluse/elr.html	Summarizes ELR doe Meaningful Use.
CSTE/CDC ELR Task Force Webpage	http://www.cdc.gov/ehrmeaningfuluse/ELRTF.html	Summarizes activities and products of the CSTE/CDC ELR Task Force. This site links to available products and navigates the user to CSTE's webpage for the CSTE/CDC ELR Task Force
CSTE Webpage for the CSTE/CDC ELR Task Force	Under Construction	Summarizes activities and products of the CSTE/CDC ELR Task Force. This site includes links to available products.
phConnects for Vocabulary and Messaging Community of Practice	http://www.phconnect.org/group/vocabularyandmessagingcommunityofpractice	The Vocabulary and Messaging Community of Practice works together to share knowledge, expand their professional skills, and develop solutions to solving common public health vocabulary and messaging challenges.
Reportable Condition Mapping Table Workgroup	http://www.phconnect.org/group/rcmt	RCMT provides mapping between a reportable condition and its associated LOINC lab tests and SNOMED lab results. The RCMT workgroup has been formed by CDC CSTE ELR Task Force to facilitate the development and implementation of RCMT.

phConnects for Public Health EHR Meaningful Use	http://www.phconnect.org/group/public-health-ehr-meaningful-use	This community will provide distilled information and foster discussion related to public health issues within the constantly evolving Electronic Health Records [EHR] 'Meaningful Use' domain.
phConnects for Public Health Laboratory Messaging Community of Practice	http://www.phconnect.org/group/laboratorymessagingcommunityofpractice	The Laboratory Messaging Community of Practice (LM CoP) brings together PHIN stakeholders nationwide involved in defining, implementing, maintaining, evaluating, and evolving lab messaging.
PHLIP Webpage	http://www.aphl.org/aphlprograms/informatics/collaborations/phlip/pages/default.aspx	Webpage for the Public Health Laboratory Interoperability Project

APPENDIX A: GLOSSARY

The following table provides definitions for acronyms relevant to this document.

Term	Definition
AHA	American Hospital Association
APHL	Association of Public Health Labs
ASTHO	Association of State & Territorial Health Officials
CAP	College of American Pathologist
CDC	Centers for Disease Control and Prevention
COP	Communities of Practice
CSTE	Council of State & Territorial Epidemiologists
EHR	Electronic Health Records
ELR	Electronic Labortaory Reporting
FAQs	Frequently Asked Questions
FTE	Full Time Employee (to CDC)
HIE	Health Information Exchange
HL7	Health Level Seven
JPHIT	Joint Public Heallth Informatics Task Force
LIMS	Laboratory Information Management System
LIS	Laboratory Information System
MU	Meaningful Use
NACCHO	National Association of County & City Health Officials
ONC	Office of National Coordinator for Health IT
PHIN	Public Health Information Network
REC	Regional Extension Centers
SME	Subject Matter Expert