NDHIN Monthly Q & A February 18, 2021

Topic focus: Public Health Reporting and NDHIN

The monthly Q & A meetings provide a forum for sharing NDHIN updates and information. It also allows users an opportunity to ask questions. The team will present a specific topic each month, but welcome questions regarding any topic. Questions and Answers from the February session are below:

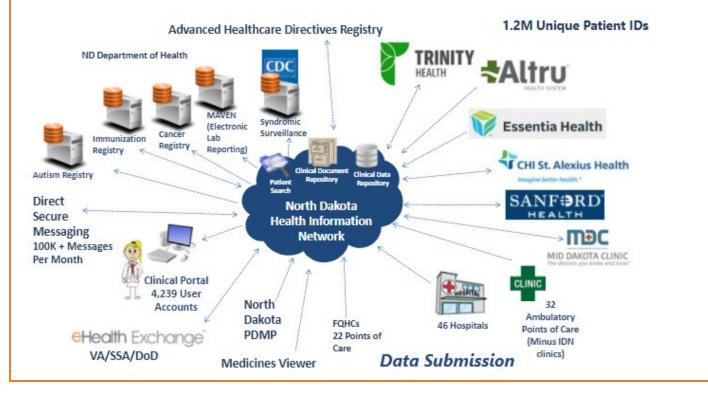
Q How does NDHIN and electronic public health reporting benefit my facility?

A The primary benefit is assisting providers in meeting regulatory compliance for public health reporting required by the ND Department of Health (NDDOH) and North Dakota Century Code. NDHIN acts as a data intermediary for the participating provider by routing data to NDDOH. There are a number of mandatory reportable conditions (COVID, Influenza, Hepatitis A, TB, etc.) that are submitted by this Electronic Laboratory Reporting (ELR) process. There are timelines for which some must be reported and historically this was done by manually filling out report forms to fax and/or mail. Electronically reporting from the provider's electronic health record to NDHIN reduces the administrative burden on the provider and improves accuracy and timeliness of reporting to NDDOH. There is guidance provided for who must report. NDHIN also facilitates immunization reporting to the ND Immunization Information System (NDIIS) and Syndromic Surveillance Reporting, which is ultimately routed to the CDC. Immunizations, Syndromic Surveillance and ELR eliminates the manual work and meets the regulatory reporting requirements for MIPS/Promoting Interoperability. The NDDOH epidemiology team uses the information for monitoring of trends, patterns and case follow up. More detailed information can be found here.

Q What is Syndromic Surveillance?

A Syndromic Surveillance is a way to identify and monitor outbreaks of certain health symptoms, and report to the CDC. It is the systematic collection, grouping, and tracking of reason for visit-type data. Syndromic surveillance is not tied to reportable conditions or laboratory results, but rather is a set of information shared for all patient visits (or all visits of a certain type, such as all emergency department and urgent care visits. Commonly used syndromes include respiratory, gastrointestinal, neurologic, rash, sepsis, injury, animal bites, and severe illness/death. The NDDoH follows up on any identified data anomaly to see if there may be a reason for the unexpected increase. Note the immunization, cancer and autism registries included in the schematic below. More information can be found here.

This is an illustration of how data is exchanged between NDHIN, healthcare facilities, NDDOH and CDC.

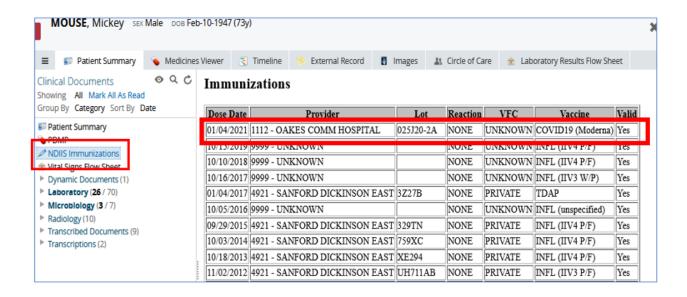


Q What other electronic reporting occurs with NDHIN?

A In addition to public health reporting mentioned above, NDHIN offers electronic test orders and results (ETOR). This process is currently in place with large health systems (Trinity, Altru, etc.) and the state lab. The facility sends a test order message to the state lab, a test result message goes back to the ordering facility, and it can be imported into the facility's electronic health record. ETOR helps to streamline the order and result process.

Q I know NDHIN has data feeds for immunizations. I had a patient report that he received a COVID-19 immunization, but it is not showing up in NDIIS. Also, does NDIIS/NDHIN show vaccines received out of state?

A Normally vaccines should appear as in the screen shots below. We found a particular facility that had an issue with the query timing out within their EHR and the query could not be completed. The information in NDIIS/NDHIN was correct. That issue will be addressed with their EHR vendor. Minnesota is currently the only state with which we exchange data. If you are having issues viewing immunizations, please reach out to NDHIN.



For additional guidance on the NDHIN clinical portal, please access the NDHIN on-demand training videos found here.

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