Measure Description: Create syndromic surveillance messages and transmit to public health agencies	Justification:  We chose to concentrate on the aspects of this criterion that would:  1) Ensure all patients flagged will have health data sent for surveillance  2) Allow for health threats to be reported faster.  3) Provide information to the CDC or other registries to identify illness clusters early, before diagnoses are confirmed and reported to public health agencies, and to mobilize a rapid response, thereby reducing morbidity and mortality.					
Metric Description:  1) 100 percent of HL7 Syndromic Surveillance messages successfully sent ar agency  2) 100 percent of syndromic surveillance messages successfully received and either:  a) Logging into agency web site and validating, or b) Using a report provided by agency		Standards Implemented:  • § 170.205(d)(4) HL7 2.5.1. Implementation specifications. PHIN Messaging Guide for Syndromic Surveillance: Emergency Department, Urgent, Care, Inpatient and Ambulatory Care, and Inpatient SettingsRelease 2.0, April 21, 2015  • CDC PHIN Messaging Guide for Syndromic Surveillance: Emergency Department, Urgent Care, Inpatient and Ambulatory Care Settings, Release 2.0, April 21, 2015  • Erratum to the CDC PHIN 2.0 Implementation Guide, August 2015; Erratum to the CDC PHIN 2.0 Messaging Guide, April 2015 Release for Syndromic Surveillance: Emergency Department, Urgent Care, Inpatient and Ambulatory Care Settings				
Developer Info: Empower Systems 1200 Harger Road, Suite 408 0048 Brook, IL 60523 (305)766-3245  Care Setting: Inpatient Real World Testing URL: https://www.empower.md/real-world-testing/	Product Info: Product Name: Empower Inpatient-Ambulatory Product Version: 1.1.57  CHPL ID: 15.04.04.2918.Empo.01.00.1.181001	Methods Use t 1) ICD-10-CM 2) SNOMED C 3) SFTP 4) TCP/IP 5) Webservice	I T®	nstrate	Interoperability:	
Testing Procedure:	Expected Outcomes:	Key Milestone	Key		Outcomes:	Comment(s)
Identify Empower Client who either:  - Has a public health agency that can receive Syndromic Surveillance data - Already has a functional Syndromic Surveillance interface or would like to implement one to their public health agency and the agency willing to share metrics of syndromic surveillance messages successfully received.  Implement send-only public health interface (if interface not already in place).  - Determine whether test or production interface will be used  - If production, determine whether an actual patient or a test patient will be used	Syndromic surveillance messages are successfully received and processed by public health agency.  Functioning HL7 2.5.1 interface to public health agency	May, 2022 June, 2022			We decided to work with NYC and NYDOH for this RWT we will be reviewing live Production data	
Create a new patient encounter.  Register a patient or create a new patient "A" in Client EHR and create a current patient encounter  Enter one or more ICD-10 diagnosis codes present in the Trigger Events table that lists reportable Syndromic Surveillance diagnoses	Patient registered and queued for interface				instead of creating 1 sample patient, we'll query our database for all	nessages queued to sent to public
Run Syndromic Surveillance process to send to public health agency (assuming process is batch, rather than real-time).	Ensure messages are de-identified per CDC PHIN Messaging Guide requirements     Messages sent to public health agency				In 2022 we queued up 155932 records to be sent to public health.  All of them was processed successfully.	
Check whether HL7 messages ACKed by agency	HL7 messages are successfully received and ACKed				NYDOH does not send ACKs when they receive our message. We'n	only provided with a log of succes
Query agency to verify that public health data was received for patient A.	Public health successfully processed by agency				We decided to review a random log from december to see if there are	
Calculate and compile metrics		August, 2022	F/	ALSE	Everything looks like it went through fine, no errors found in our UPH in 2022, 155617 surveillance records were queued to send to NYDO 100% of our queued messages was sent to NYDOH successfully.	
Attestation:  This Real World Testing plan is complete with all required elements, including mall information in this plan is up to date and fully addresses the Health IT Devel Authorized Representative Name: Roger Cheng Authorized Representative Email: rcheng@empower.md Authorized Representative Poince 348-724-6780		I care settings.			No errors found in our december log for UPHN.	