

HOW DOES ELECTRONIC CASE REPORTING (eCR) WORK?

An example of the eCR process



Patient is diagnosed with a reportable condition, such as COVID-19



Healthcare provider enters patient's information into the electronic health record (EHR)



Data in the EHR automatically triggers a case report that is validated and sent to the appropriate public health agencies if it meets reportability criteria



The public health agency receives the case report in real time and a response about reportability is sent back to the provider



State or local health department reaches out to patient for contact tracing, services, or other public health action



[cdc.gov/eCR](https://www.cdc.gov/eCR)

eCR Now: COVID-19 Electronic Case Reporting for Healthcare Providers

Improve public health action with real-time data flow

Accessible version: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/electronic-case-reporting.html>

Electronic Case Reporting (eCR) is the automated generation and transmission of case reports from the electronic health record (EHR) to public health agencies for review and action. eCR makes disease reporting from healthcare to public health faster and easier. It moves data securely and seamlessly—from the EHR at the point of care, to data systems at state, territorial, and local agencies. eCR also allows public health to provide information back to healthcare professionals. This timely data sharing provides a real-time picture of COVID-19 to support outbreak management. **eCR Now** is a strategic initiative that enables rapid adoption and implementation of eCR for COVID-19.

eCR reduces burden on healthcare professionals, staff, and facilities without disrupting the clinical workflow.

- Will fulfill your clinicians' reporting requirements
- Automatically sends required information to all appropriate public health agencies
- Eliminates the need for manual data entry, faxing, or responding to calls from public health agencies
- Offers credit through the Promoting Interoperability Program for implementing eCR
- Is compliant with HIPAA and state reporting laws
- Improves COVID-19 reporting immediately and allows expansion to all reportable conditions

eCR implementation is easy.

- Onboard in as few as three days with most EHR systems
- Use the Fast Healthcare Interoperability Resources (FHIR) app if your EHR is not eCR-enabled
- Participate through eHealth exchange or Carequality without additional legal requirements
- Enhance learning and shared experiences with a growing network of implementers nationwide

Join a nationwide network with eCR Now

“Our implementation of eCR improved the quality and timeliness of public health reporting for COVID-19 across the 19 states we serve. This national gateway was a cost-effective solution that helped close critical data gaps in wide-scale reporting that saved front line providers valuable time and money.”

– Paul Matthews,
Chief Technology Officer,
OCHIN, Portland, Oregon

How to get started.



Email ecr@cdc.gov to express interest in onboarding for eCR Now



Learn details about implementing eCR for COVID-19: [ecr.aimsplatform.org/ecr-for-covid-19-reporting/](https://www.cdc.gov/nczod/oddsat/docs/default-source/electronic-case-reporting-for-covid-19/aimplatform-ecr-for-covid-19-reporting.pdf)



Contact your EHR vendor about implementing eCR now



Consult with leaders in your organization for project approval



Learn more at www.cdc.gov/ecr

eCR is a collaborative effort of the Association of Public Health Laboratories, the Council of State and Territorial Epidemiologists, and CDC.

[cdc.gov/coronavirus](https://www.cdc.gov/coronavirus)

Electronic Case Reporting 101

August 4, 2021

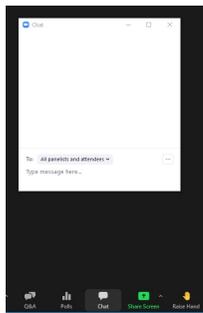
- John Loonsk, MD, FACMI, CDC consultant
- Shannon Sandall, KDHE Director of Disease Surveillance



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Zoom Webinar Features

• Chat



Please select **All panelists and attendees** in the dropdown list when participating in the chat.

Select: All panelists
 All panelists and attendees

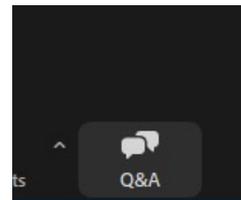
Type your chat message here. Press the Enter or Return key to submit your message.

Hover your mouse at the bottom of the screen to locate and click on Chat to open.

There's also a "raise hand" function.

• Questions

Use Q&A to pose any questions to the presenters.



Only the presenters can see your questions. If appropriate, the response may be shared to all.

Hover your mouse at the bottom of your screen to locate Q&A.



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Polling Question #1

How much do you know about electronic case reporting?

- Never heard of it
- Some
- Not as much as other people in our facility
- A lot
- We have contacted our EHR vendor



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Polling Question #2

Who is currently responsible for managing/completing paperwork for case reports in your facility? (multiple response)

- Office manager
- Quality/Risk
- Infection Preventionist(s)
- Don't know/Not sure
- Other (please type answer into the chat)



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Electronic Case Reporting 101 — Objectives

- Describe the eCR technology and its potential benefit for providers
- Review the current state of eCR implementation in Kansas
- Gauge interest in eCR and begin the onboarding process for interested organizations



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Electronic Case Reporting 101 — Presenters



**John W. Loonsk,
MD, FACMI**

Consulting Chief Medical Informatics Officer and Electronic Case Reporting (eCR) lead for the Association of Public Health Laboratories; Adjunct Associate Professor, the Johns Hopkins University Schools of Medicine and Public Health



Shannon Sandall

KDHE Director of Disease Surveillance



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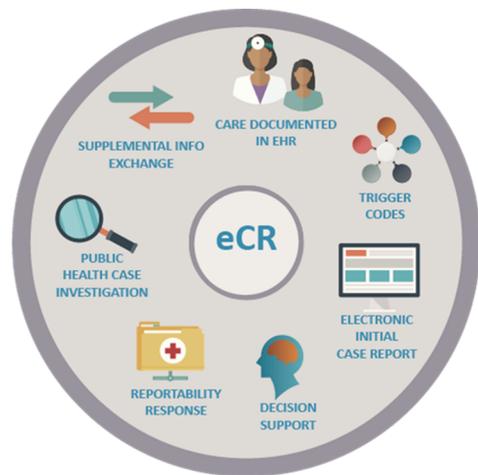
john.loonsk@jhu.edu



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Electronic Case Reporting

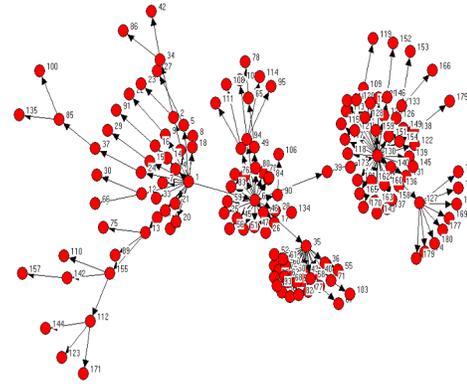
The COVID-19 pandemic highlighted the need for rapid adoption and implementation of electronic case reporting (eCR).



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eCR for COVID-19, but also much more...

- COVID-19 has had a significant cost - we should get the most we can for it
- Outbreaks have happened before and will happen again and yet:
 - **At the start of COVID-19, the U.S. was still mostly using phones, paper, and faxes** for the core public health function of case reporting to state and local public health agencies (if it was done at all)
 - COVID-19 made outbreak management, contact tracing, and other **public health needs extremely apparent**
- Case reporting to Public Health Agencies (PHAs) is **legally required in both emergency and routine times**
- Now that EHRs are commonplace, case reporting can be **fully automated and actually reduce provider reporting burden**



SARS Contact Tracing in Singapore

Bogatti SP. Reprinted in MMWR 5-9-03

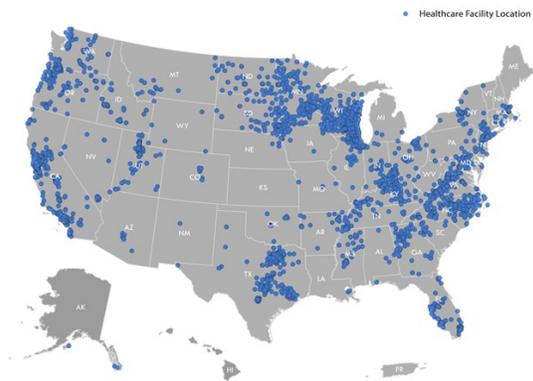


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Electronic Case Reporting (eCR)

The automated generation and transmission of case reports from electronic health records (EHRs) to public health agencies for review and action

Progress during COVID-19



9200+

Facilities have now implemented eCR

>9 M

COVID-19 reports have been sent to 63 public health agencies

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All 50 states, Puerto Rico, D.C., and 11 large local jurisdictions have received electronic initial case reports from AIMS



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Healthcare Provider eCR Benefits

Reduces burden and does not disrupt the clinical workflow



Can fulfill legal reporting requirements



Offers credit from CMS Promoting Interoperability Program



Eliminates manual data entry and faxing reports, and reduces calls from public health agencies



Connects in near real-time with public health agency



Streamlines jurisdiction reporting challenges



Healthcare receives information back from public health related to the reportable condition



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Public Health Agency eCR Benefits

Provides critical clinical data from healthcare for better surveillance and response



Near real-time reporting of clinical case data



Case data support case management, disease monitoring, and investigation



Reduces need for follow up investigation with automated data for public health action



Enables bi-directional data exchange between public health and healthcare providers



Improves communication and collaboration with healthcare providers



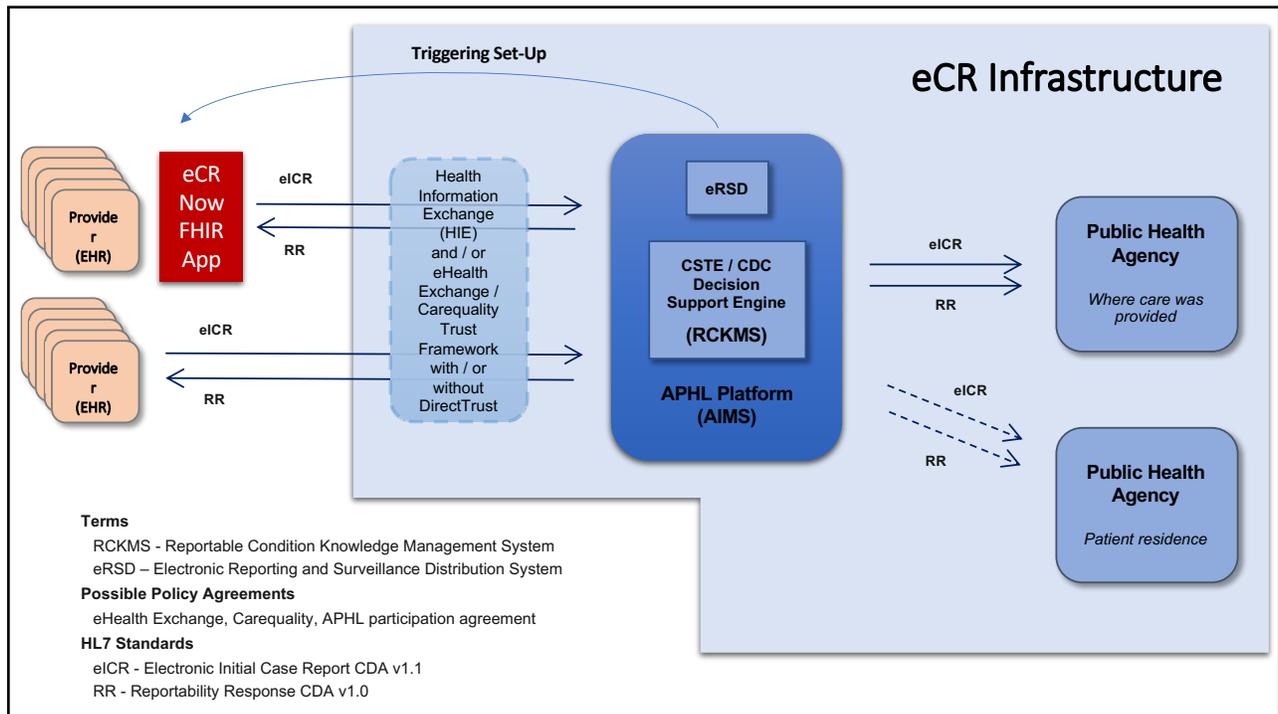
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eCR – It’s about the data

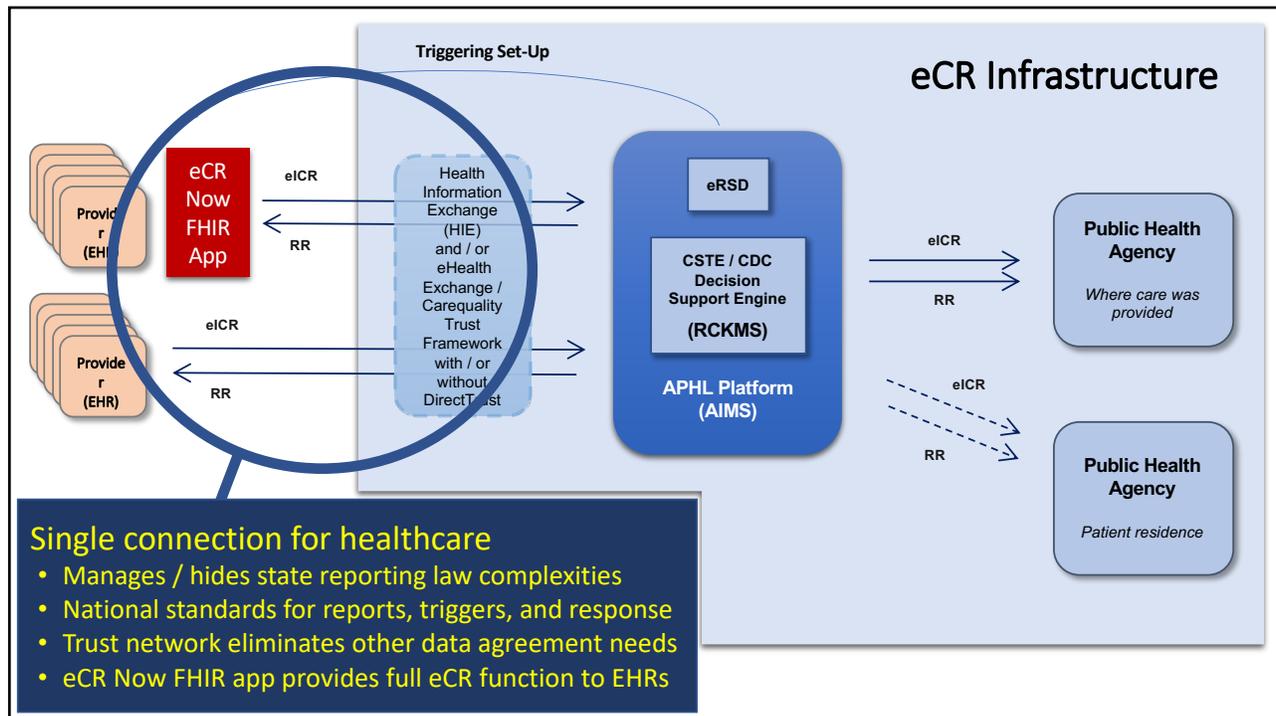
- In addition to COVID-19, eCR supports the routine and emergent reporting of over 100 other conditions
- Legally required case reporting data include:
 - Patient identity, contact information, occupation, and race and ethnicity
 - Diagnoses, problems, and observations
 - Co-morbidities, medications, and immunizations
 - Travel history, pregnancy status and more
- Public health needs these data for managing outbreaks, monitoring disease trends, and supporting investigation
- So, for example, reporting of COVID-19 cases was necessary, but public health also had to, on the fly, work a possible relationship with Multisystem Inflammatory Syndrome in Children (MIS-C) with different treatments and outcomes



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Implement eCR Now!

- Contact us for a kick-off call: ecr@cdc.gov
- Get more information on eCR:
 - www.cdc.gov/ecr
 - ecr.aimsplatform.org
- Assemble your implementation team and join a cohort
- Use the eCR Now FHIR app if your EHR does not have eCR capabilities
- Work with us and others to help turn off manual reporting

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Shannon Sandall

- KDHE Director of Disease Surveillance



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History of eCR in Kansas

- January of 2017 Digital Bridge - Eight demonstration sites in California, Houston, Kansas, Massachusetts, Michigan, New York City, New York State and Utah were selected to pilot the Digital Bridge approach and share their experiences and lessons learned.
- Digital Bridge partners built a technical approach to eCR that leverages existing EHRs to automatically flag potentially reportable disease cases and create a case report.



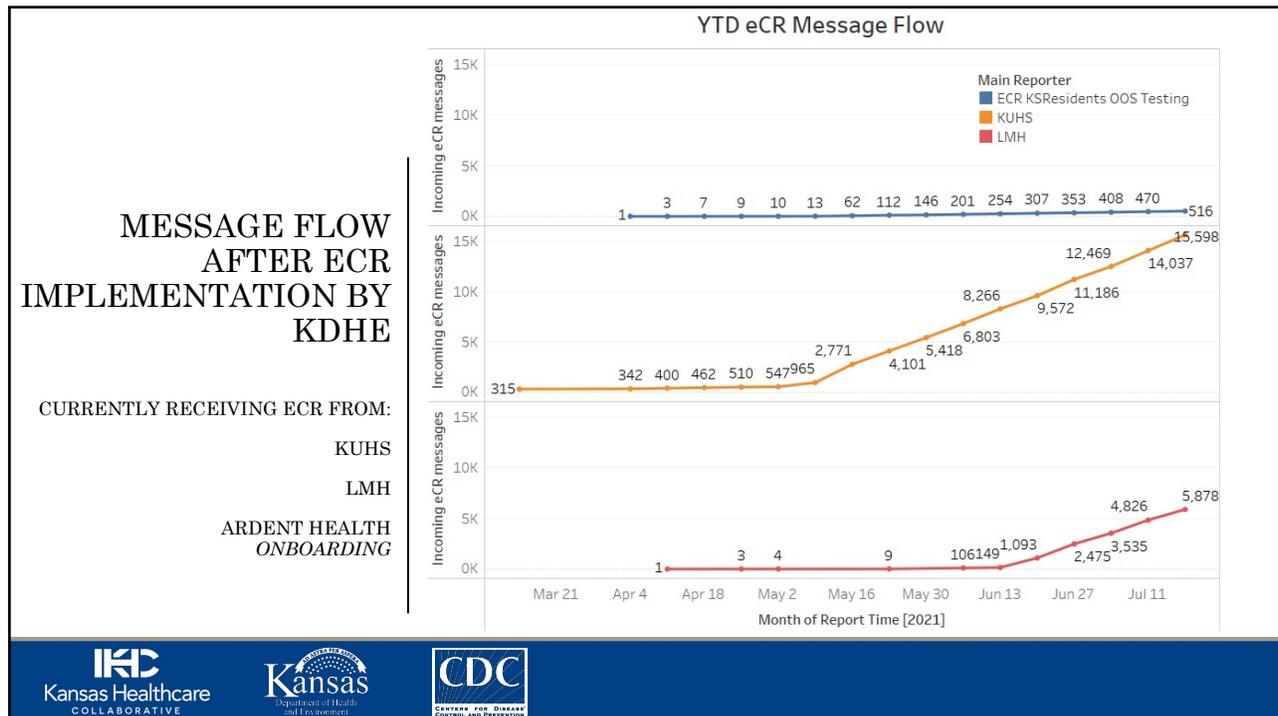
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History of eCR in Kansas

- 2017-2021 — Worked with Cerner and Lawrence Memorial Hospital (now LMH Health) on the configuration of eCR messaging to Kansas Department of Health and Environment.
- March 18, 2021 — The University of Kansas Health System (KUHS) in production.
- April 16, 2021 — LMH Health in production.
- August 2021 — Projected date for Ardent Health onboarding.



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Q & A



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Polling Question #3

How are you feeling about implementing eCR? (only one response)

- Very interested, ready to move forward
- Interested, but need more information
- Interested, but unable to pursue at the current time
- Not interested at this time
- Not sure



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Questions?

Contact information

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