

Volume of notifiable disease reporting may double with required electronic lab reporting

March 7 2014

Public health departments nationwide are already feeling the strain from budget cuts. But their case report volumes are forecasted to double when federal requirements for automated electronic laboratory reporting of notifiable diseases go into effect next year, according to a new study by researchers from the Regenstrief Institute Inc. and the Indiana University School of Informatics and Computing at Indiana University-Purdue University Indianapolis.

Although past studies have noted that volumes increase following the introduction of electronic laboratory reporting, this is the first to estimate what will occur with the 2015 required adoption of electronic laboratory reporting under the Centers for Medicare and Medicaid Services' meaningful use program.

Notifiable disease reports—required for sexually transmitted diseases, *E. coli*, tuberculosis, Lyme disease and other conditions—typically are submitted by hospitals and physicians' offices to state and county [public health](#) departments by fax or phone or even paper mail. Electronic laboratory reporting not only prevents information from falling through the cracks, but it improves timeliness of data transmittal, which can be critical in preventing the spread of disease.

"An increase of the magnitude we estimate will significantly impact local and state [health departments](#)' workloads as they follow up on reports, placing pressure on these departments, many of which have had budget cuts, to do more with less," said study lead author Brian E. Dixon,

MPA, Ph.D., Regenstrief Institute investigator and assistant professor of health informatics at IUPUI and a Department of Veterans Affairs research scientist.

"Public health and informatics professionals should work together to strengthen the [public health infrastructure](#), developing and evaluating methods for assisting health departments with the anticipated reporting volume increases," Dr. Dixon said. "The bottom line is that public health concerns are growing, and we will likely need greater support from various levels of government."

The study authors used data from the Indiana Network for Patient Care to project the national scenario. Developed by the Regenstrief Institute and operated under license by the Indiana Health Information Exchange, the Indiana Network for Patient Care electronically captures and handles several million secure transactions of clinically relevant data such as laboratory test results, medication and treatment histories daily. Metropolitan Indianapolis is the most health-care-wired city in the nation.

"Nationally, notifiable diseases are chronically underreported. This is a major problem in combating some very serious illnesses where needed resources or initiatives may not get to the targeted populations," said Virginia A. Caine, M.D., director of the Marion County Public Health Department and a past president of the American Public Health Association. "As we have seen here in Indiana with the INPC, electronic lab reporting gives public health officials more complete, accurate and timely data as well as a fast, secure way to communicate with clinicians."

"With this study, [public health officials](#) and policy makers in all states can begin to plan for a future that is right around the corner," Dr. Dixon said.

Provided by Indiana University

Citation: Volume of notifiable disease reporting may double with required electronic lab reporting (2014, March 7) retrieved 26 April 2024 from <https://medicalxpress.com/news/2014-03-volume-notifiable-disease-required-electronic.html>

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