### **December 12, 2018**

### NATIONAL COMMITTEE ON VITAL AND HEALTH STATISTICS

## Subcommittee on Standards Review Committee

**Predictability Roadmap** 

# Comments regarding Department of Veterans Affairs as Health Care Provider

As the largest integrated healthcare system in the US, VA sent and received over 45 million healthcare transactions in 2017, and is committed to implementing HIPAA mandated electronic transactions to ensure the benefits of administrative simplification are met across the healthcare industry.

The questions posed by NCVHS are addressed in the three following categories:

- 1. Compliance and Enforcement,
- 2. DSMOs and Standards Development Cycles, and
- 3. Conclusion.

### 1. Compliance and Enforcement

VA agrees with the recommendation for HHS to increase transparency of the complaint process, comply with current regulations for handling complaints of noncompliance, and provide guidance on the appropriate use of the standards and operating rules.

VA is, and has been, very active in payer outreach and compliance enforcement for many years. Because of this ongoing compliance effort, VA has established direct contacts at CMS to work hand in hand to resolve outstanding issues. While VA does have direct contact to CMS staff, many organizations do not. The ASETT tool available to the industry is a good start, but VA does not find it as easy to use or as useful as hoped. Outside of the useablility piece of the ASETT tool, transparency into the compliants and processes would be a valuable feature. This would have multiple benefits such as encouraging others to file complaints on issues they are experiencing; incentivizing noncompliant organizations to become compliant; promoting a greater understanding of the steps CMS takes to resolve a compliant; and gaining insight into what to expect. VA does caution the level

of information shared should protect privacy information and also ensure the entities are not discouraged from reporting noncompliance with the fear of being 'outed.'

As part of expanding transparency, the complaint program should provide the inclusion of a more specific overview of the process, lessons learned under the program and date driven examples of complaints handled and resolved. HHS should also offer transparency into the length of time in which complaints are handled. By making key points on the complaint public, other covered entities may gain a better understanding on the process and be more inclined to utilize the complaint process. VA understands the importance of protecting data specifics of the complaint, but wherever possible it is necessary to include information on the complaint to demonstrate the value of the program and how it has assisted providers and payers.

VA has had success and fully supports CMS' compliant process. More transparency, assistance, and further guidance can ensure that the entire industry has success in the appropriate use of the standards and operating rules.

#### 2. DSMOs and Standards Development Cycles

VA believes that the DSMOs are fulfilling the current scope of work, which is to review requests submitted by the industry for consideration for a standard transaction and review requests to adopt a new or updated standard. It is unclear what is envisioned to be the scope of work for the replacement entity if the DSMOs are disbanded. While VA participates within a number of DSMOs, it is outside scope to suggest a proper replacement or new entity to take over this workload at this time.

VA agrees with the recommendations for a more predictable schedule for the development and publication of standards and operating rules, publication of regulations to adopt new or updated standards and operating rules, and adoption of incremental updates to standards and operating rules. Having predictability with the development and adoption processes will give the industry assurance that incremental updates will be implemented. It would also be useful to have more transparency into the approval process within HHS. Often it seems as though the NCVHS recommendations reach HHS and take considerable time for action. Offering transparency into this process will help better understand and predict when updates and recommendations may be finalized. And although incremental updates will appear to be less burdensome on the industry, consideration will need to be taken on direct and indirect costs to organizations through this updated process. VA firmly believes that HHS should not publish items without accompanying business justification, just to keep with a recommended schedule or timeline.

VA also agrees that guidance regarding the appropriate and correct use of the standards and operating rules should be readily available. And while HHS should assist with this, the SDOs or NCVHS could offer recommendations for HHS to publish or direct the industry as to where the most

up-to-date information can be found. HHS has many competing priorities and by relying on the SDOs and NCVHS for this content, it may make it easier to publish this guidance in a more timely manner.

### 3. Conclusion

VA appreciates NCVHS for the time, energy and passion that led to the Predictability Roadmap. The industry is at a pivotal place and these recommendations, calls to action, and measurements to improve the predictability of standards and operating rules development and adoption processes are necessary to the future of standards and operating rules. VA thanks you for the opportunity to comment.