

# CMS Update

NCVHS Full Committee Meeting  
November 18, 2020

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# Today's Presentation

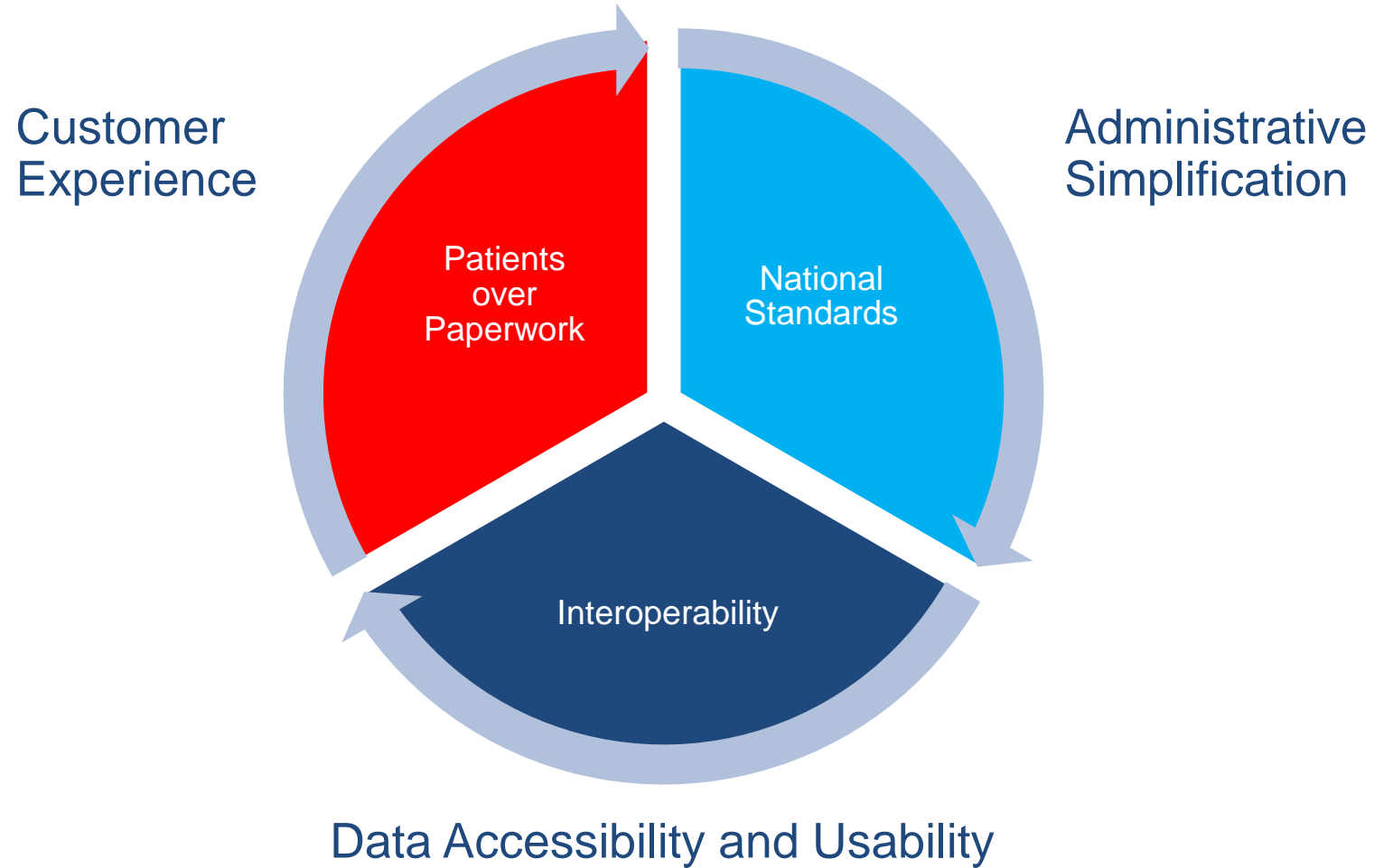
- Introduction to the CMS Office of Burden Reduction and Health Informatics
- Overview of Interoperability Initiatives
- Update on HIPAA National Standards

# Office of Burden Reduction and Health Informatics

- Reduce administrative burden
- Advance interoperability and national standards
- Engage beneficiaries and medical community to inform solutions
- Infuse customer-focused mindset throughout CMS



# Joined Three Existing Bodies of Work



## Comprised of Five Groups

- Customer-Focused Research
- Governance & Impact Analysis
- Health Informatics & Interoperability
- Emerging Innovations
- National Standards



## PATIENT ACCESS

Empowering patients by giving them access to their health information so they can make the best informed decisions about their care, all while keeping that information safe and secure.

## CONNECTING HEALTHCARE THROUGH DATA EXCHANGE

Driving to value-based care by promoting seamless data exchange across the care continuum.

## TECHNOLOGY & STANDARDS

Promoting the use of the latest technology and standards to drive innovation and data exchange in healthcare.



**YOUR HEALTH DATA  
WHEN YOU NEED IT MOST**



# CMS INTEROPERABILITY & PATIENT ACCESS FINAL RULE

Rule Resources: <https://www.cms.gov/Regulations-and-Guidance/Guidance/Interoperability/index>



## 2019

- Draft 2 TECCA released
- CMS publishes **Interoperability and Patient Access Proposed Rule**
- ONC publishes 21st Century Cures Act Proposed Rule

## 2018

- Draft TECCA released
- White House Executive Forum on Interoperability
- CMS made data available to researchers through the Virtual Research Data Center

JAN 2019

Providers are required to use **2015 Edition Certified EHR Technology**

**Promoting Interoperability** program requirements take effect for all providers

LATE 2020

**Public reporting** of clinician or hospital data blocking and providers without digital contact info in NPPES

JAN 1 2021\*

**Patient Access API**  
Patient health care claims and clinical info made available through standards-based APIs for Medicare Advantage, Medicaid and CHIP FFS, Medicaid and CHIP managed care, and QHPs on the FFEs

**Provider Directory API**  
Payer Provider Directories made available through standards-based APIs

\* *both requirements will not be enforced until July 2021*

SPRING 2021

Hospitals send **event notifications** regarding admission, discharge, and transfer to other providers

JAN 1 2022

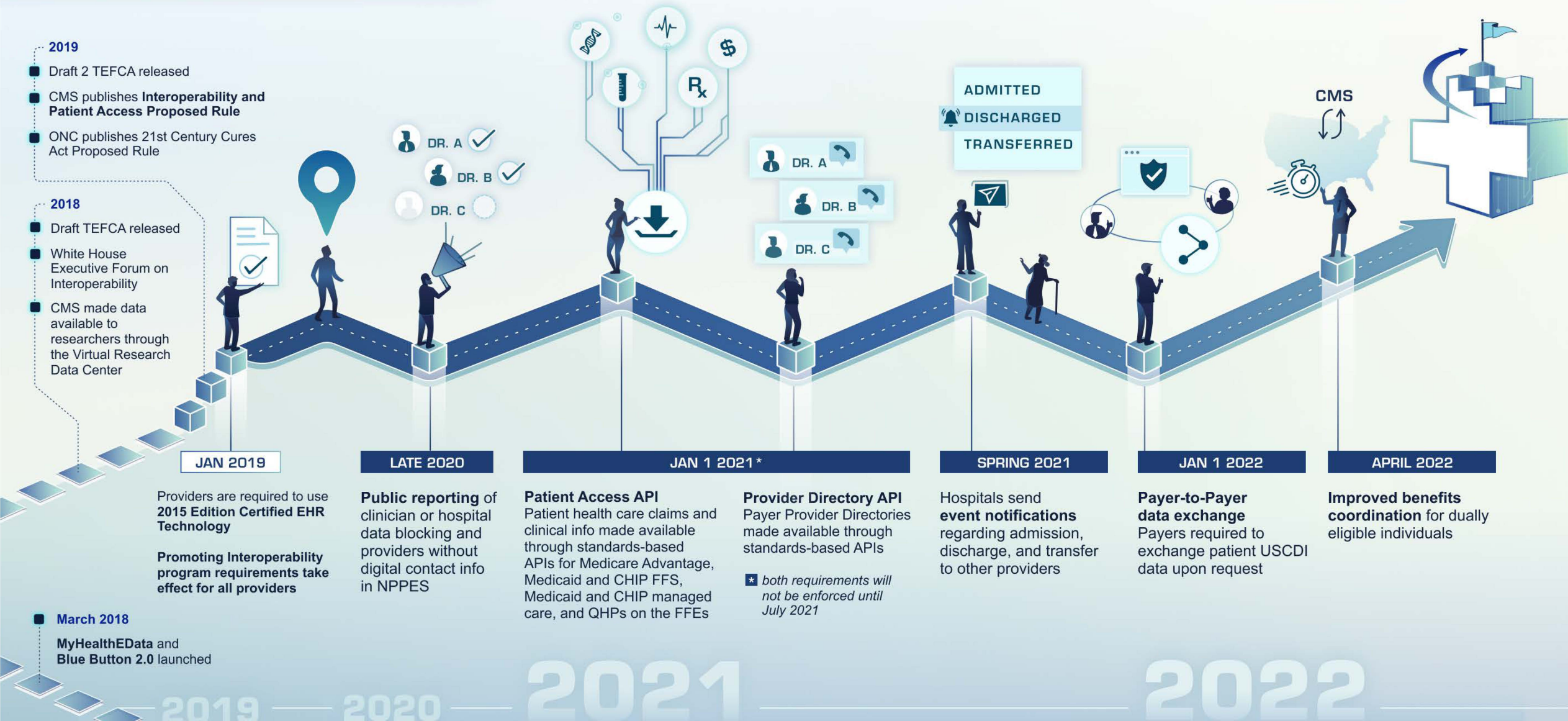
**Payer-to-Payer data exchange**  
Payers required to exchange patient USCDI data upon request

APRIL 2022

**Improved benefits coordination** for dually eligible individuals

## March 2018

**MyHealthEData** and **Blue Button 2.0** launched



# COVID-19: Call to Action

- Statutory authorities
- Feedback from the field
- Data, data, data
- Innovation in interoperability

***COVID-19 Pandemic:***  
*A Call to Action to achieve  
true interoperability,  
making integrated clinical  
and administrative data  
readily accessible for care  
coordination and clinical  
and business decision-  
making*



# Prior Auth and Documentation Requirements

## Prior Authorization

*“I hate to say it, but...prior authorization is unseating electronic health records as the top source of burden for clinicians and providers...”*

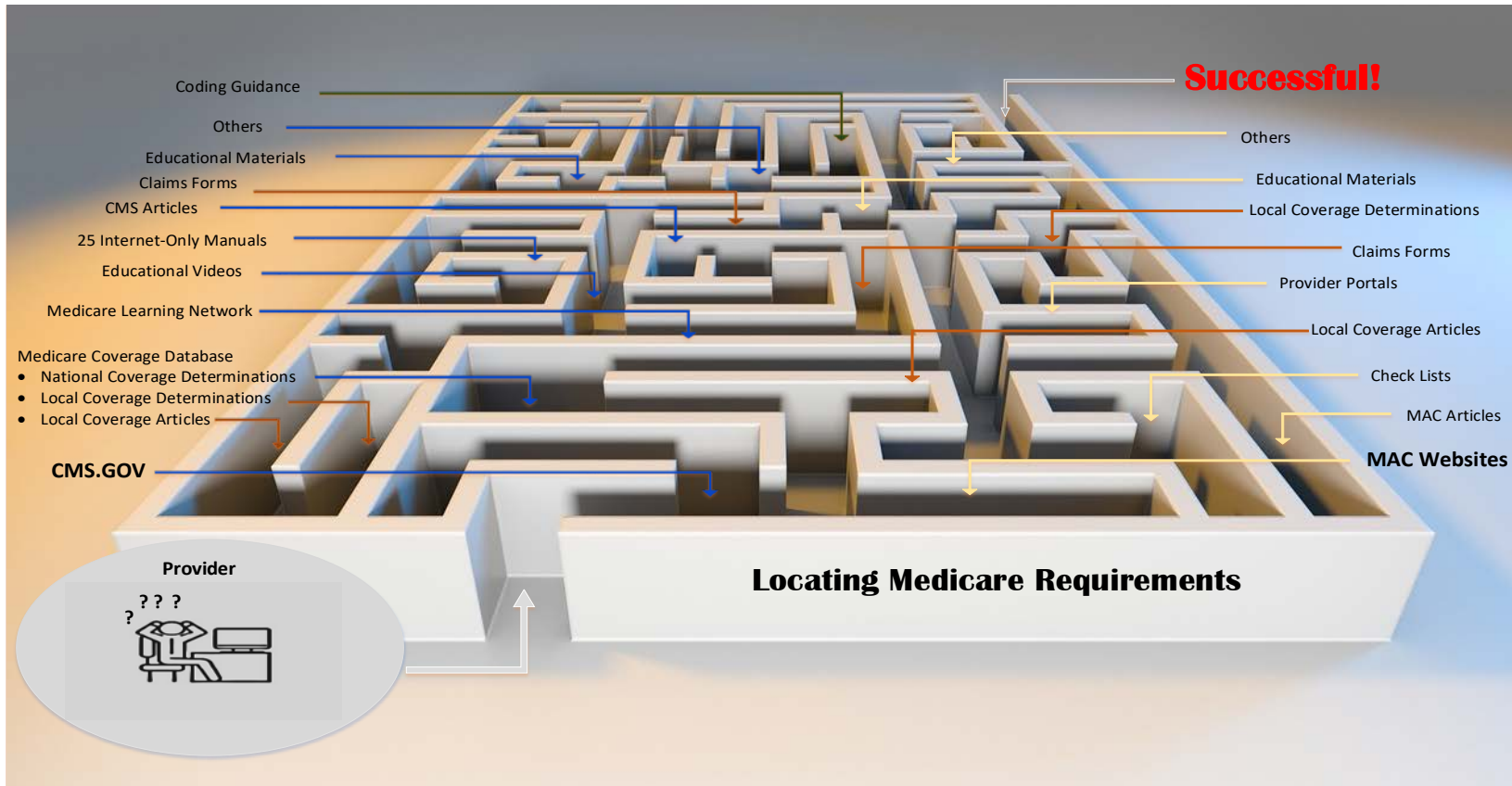
*- Medical community stakeholder*

## Documentation Requirements

*“...even if you can find the instructions, there is no guarantee that it is right”*

*“From a physician standpoint, I want to know what I need to do while the patient is here.”*

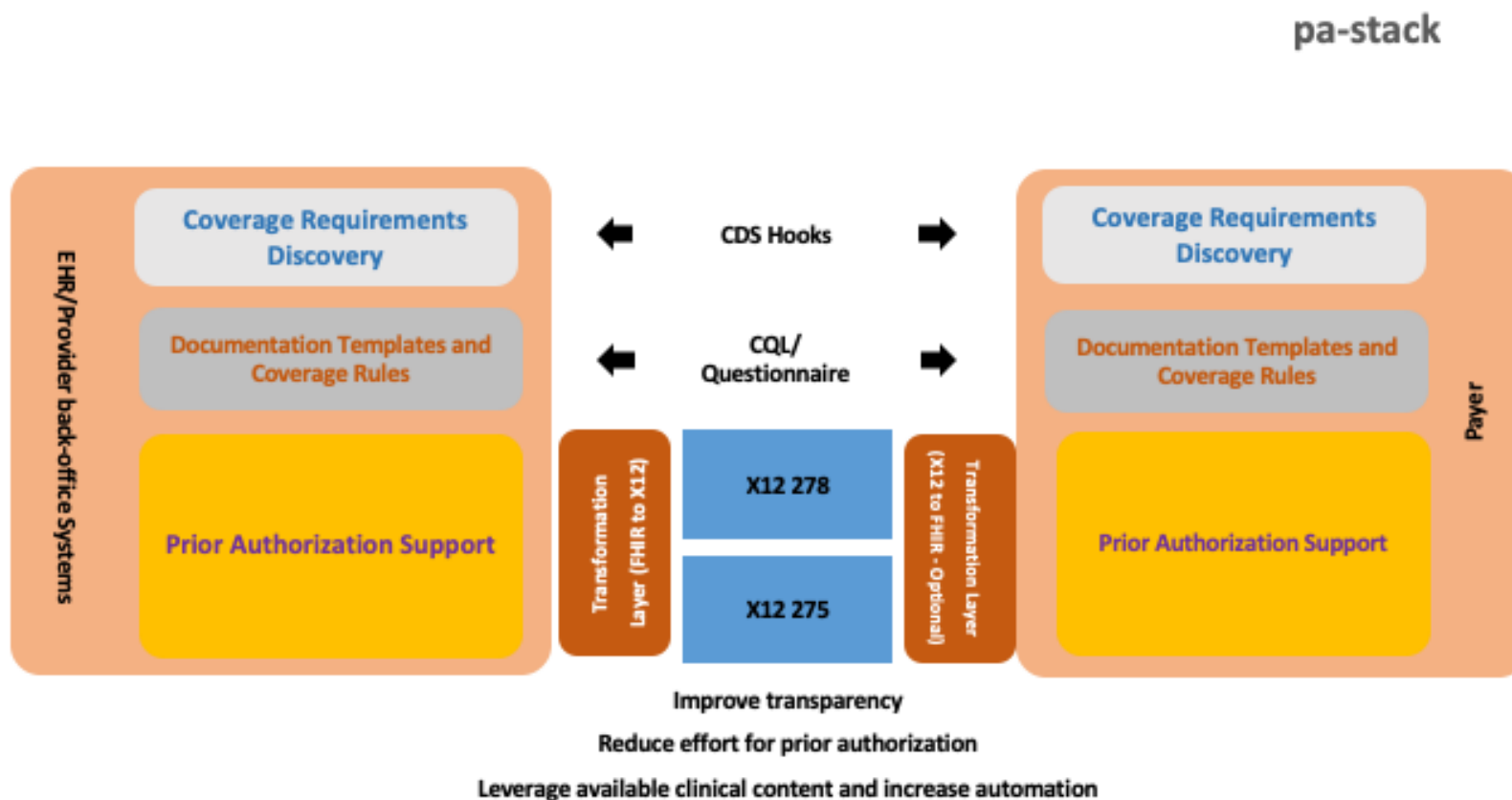
# Information Maze Unintended Consequences



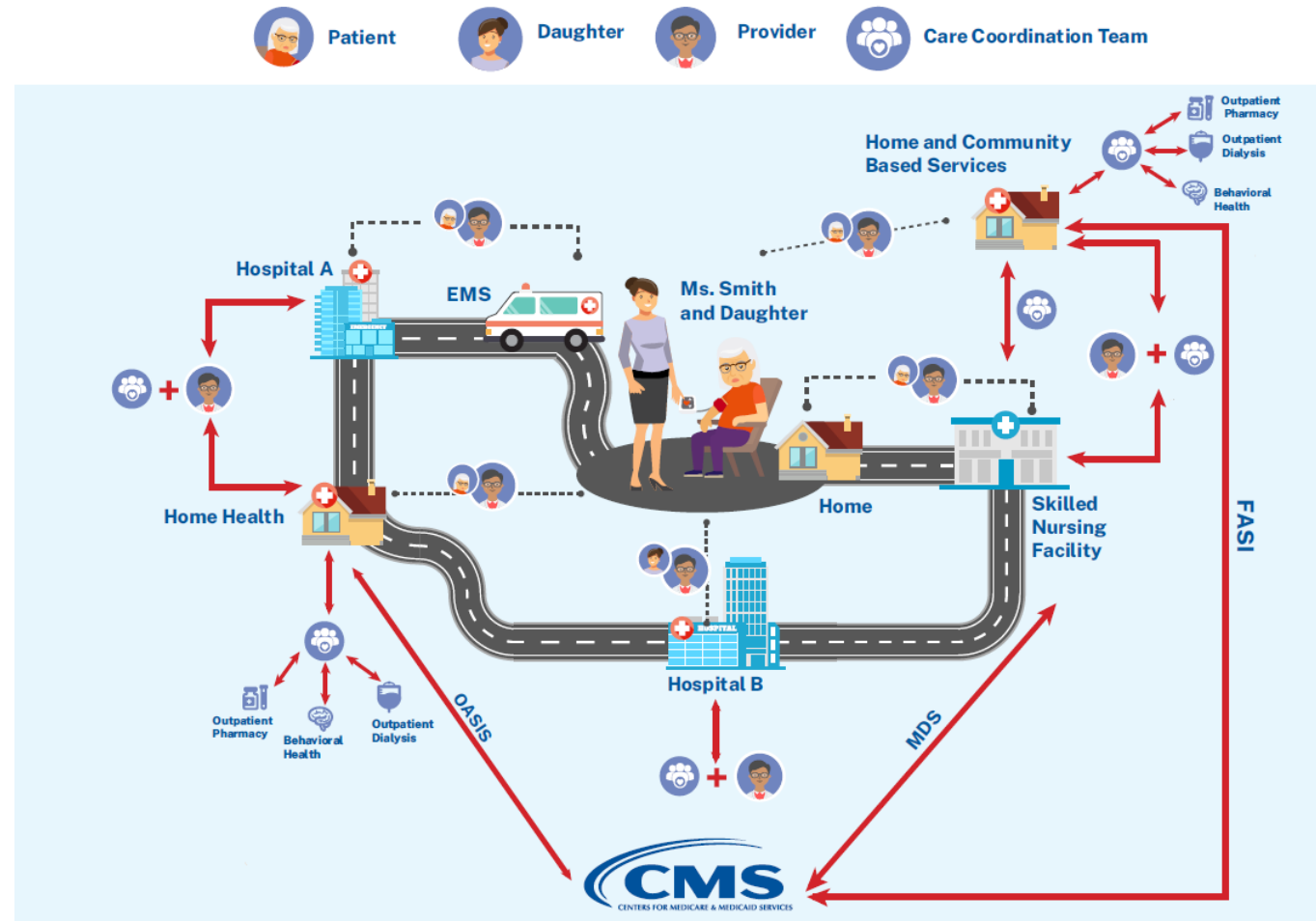
## This contributes to:

- Clinician burden / burnout
- CMS burden and rework
- Inconsistent requirements
- Delayed services to beneficiaries
- Errors in claims processing
- Improper payments
- Barriers to interoperability
- Customer dissatisfaction

# Prior Authorization Standards: Adopted & Emerging



# A Patient Story Navigating the Healthcare System




# Post-Acute Care Interoperability (PACIO) Project

- Launched in February 2019 in response to 2014 IMPACT Act
- Consensus-based approach to advance interoperable health data exchange between post-acute care providers, patients, and other key stakeholders
- Data Element Library (DEL): Centralized resource for CMS assessment data elements (e.g. questions and response options), and their related mappings to nationally accepted health IT standards

**CMS.gov**  
Centers for Medicare & Medicaid Services

Home Search Reports Help/Resources Feedback



The CMS Data Element Library (DEL) is the centralized resource for CMS assessment instrument data elements (e.g. questions and responses) and their associated health information technology (IT) standards.

The DEL does not contain patient health information (PHI).

**What is the purpose of the DEL?**

- Promotes interoperable health information exchange
- Supports "Patients over Paperwork"
- Assists with standardization of assessment data elements to help facilitate care coordination

**What is included in the DEL?**

Care Settings	CMS Assessment Instrument
Inpatient Rehabilitation Facilities (IRFs)	IRF Patient Assessment Instrument (IRF-PAI)
Home Health Agencies (HHAs)	Outcome and Assessment Information Set (OASIS)
Long-Term Care Hospitals (LTCHs)	LTCH Continuity Assessment Record and Evaluation (CARE) Data Set (LCDS)
Skilled Nursing Facilities (SNFs)	Minimum Data Set (MDS)
Hospice Care	Hospice Item Set (HIS)
Home and Community-Based Services (HCBS)	Functional Assessment Standardized Items (FASI)



# Advancing Digital Quality Measurement

- Commitment to All Digital quality measures by 2030
- Goals
  - Reduces burden
  - Ability to provide rapid feedback which can be used at point of care
  - Provides more robust clinical information
  - Ability to leverage for advanced analytics
- Vision: Seamless connection between quality measures, clinical workflow, clinical decision support and feedback

# Recent Updates to HIPAA National Standards

Final Regulation titled “Administrative Simplification: Modification of the Requirements for the Use of Health Insurance Portability and Accountability Act (HIPAA) of 1996 National Council for Prescription Drug Programs (NCPDP) D.0 standard” was published in January of 2020

- The Comprehensive Addiction and Recovery of 2016 (CARA) expanded the circumstances in which a pharmacist may dispense less than the full prescribed amount of Schedule II drugs
- This final rule modified the requirements of the currently adopted HIPAA standard to identify partial fills for Schedule II drugs allowed by CARA that would not otherwise be recorded in the transactions
- The compliance date was September 21, 2020

# HIPAA National Standards in Development

- Information on the regulations in development for HIPAA Standards is available via the Spring, 2020 Unified Agenda below. The Fall, 2020 Unified Agenda will contain updated information.
  - Health Care Attachments for Claims and Prior Authorization (CMS-0053):  
<https://www.reginfo.gov/public/do/eAgendaViewRule?pubId=202004&RIN=0938-AT38>
  - Adoption of a new version of the National Council for Prescription Drug Programs (NCPDP) Standards (CMS-0056):  
<https://www.reginfo.gov/public/do/eAgendaViewRule?pubId=202004&RIN=0938-AU19>

# Continuing HIPAA Compliance Reviews

Program	Launch Date	Total Participants	Current Status
2019 Compliance Review Program	April 2019	4 Clearinghouses 5 Health Plans	7 of 9 Complete 2 of 9 In Process
2020 Compliance Review Program	April 2020	9 Health Plans	6 of 9 In Process 3 of 9 Pending

Quarterly Reports on complaint types submitted by covered entities, violations based on the type of transaction, and resolution time frames are available at the CMS website:

<https://www.cms.gov/Regulations-and-Guidance/Administrative-Simplification/Enforcements/HIPAAEnforcementStatistics>

# Today's Presentation: Key Takeaways

- Your engagement with the Office of Burden Reduction and Health Informatics is important and valued
- CMS is actively working to reduce administrative burden, improve care coordination, and empower beneficiaries with their data through interoperability
- When it comes to standards under HIPAA Administrative Simplification provisions, the work you do is important to inform the adoption process



# Thank you!

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