BRIEFING
FROM THE BELTWAY

ONC/CMS Principles and Strategy for Accelerating Health Information Exchange

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September 19, 2013

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Reminder

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Reminder

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(* 6 to mute, *7 to unmute)

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Agenda

4:00 – 4:05 PM   Welcome and Introductions

4:05 – 4:30 PM   Kelly Cronin, Health Reform Coordinator in the Office of the National Coordinator for Health Information Technology (ONC) &

Maria Michaels, Policy and Operations lead for HITECH Clinical Quality Measures (CQMs) at the Centers for Medicare and Medicaid Services (CMS)

4:30 – 4:45 PM   Dr. Laura McCrary, Executive Director of the Kansas Health Information Network (KHIN)

4:45 – 4:55 PM   Discussion

4:55 – 5:00 PM   Updates and announcements of eHI future events.

5:00 PM   Adjourn

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Kelly Cronin

Health Reform Coordinator in the Office of the National Coordinator for Health Information Technology (ONC)

Maria Michaels

Policy and Operations lead for HITECH Clinical Quality Measures (CQMs) at the Centers for Medicare and Medicaid Services (CMS)

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The Office of the National Coordinator for
Health Information Technology

ONC – CMS Accelerating Health Information Exchange and Advancing Interoperability

Kelly Cronin, Health Reform Coordinator, ONC
Maria Michaels, CQM Policy and Operations, CMS
September 19, 2013

HealthIT.gov

Hardwiring the 3-part Aim

Better healthcare

Improving **patients**' experience of care within the Institute of Medicine's 6 domains of quality: *Safety, Effectiveness, Patient-Centeredness, Timeliness, Efficiency,* and *Equity.*

Better health

Keeping patients well so they can do what they want to do. Increasing the overall health of **populations**: address behavioral risk factors; focus on preventive care.

Reduced costs

Lowering the total cost of care while improving quality, resulting in reduced monthly expenditures for Medicare, Medicaid, and CHIP beneficiaries. Supporting **new models of payment**.

Health Information Technology and Information Exchange

Accelerating Exchange Capabilities Across the Health Care System

- Lab Companies
- Home Health
- Nursing Homes
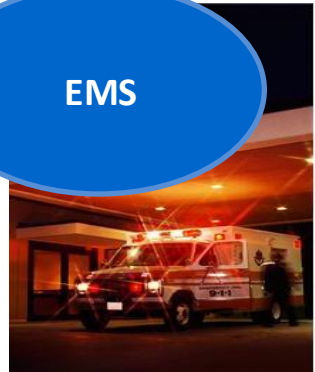- Hospitals
- Physician Practices
- Public Health Agencies
- EMS
- Behavioral Health Providers
- Pharmacies
- Schools
- Community Health Centers
- Patients and Caregivers

- **New Policies and Programs**
  - Encourage providers to routinely exchange health information through interoperable systems in support of care coordination across health care settings.
  - Strengthen the business case for electronic health information exchange across providers to ensure patients' health information will follow them seamlessly and securely wherever they access care.
    - The CMS Medicare and Medicaid EHR Incentive Programs and the ONC HIT Certification Programs are not enough to achieve the widespread interoperability and HIE necessary for delivery and payment reform.
    - Fee for Service (FFS) reimbursement and other business motivations are the stronger influencer of provider behavior, still no strong business imperative for HIE across all providers and settings of care has developed.

- ## Rely on all authorities
  - HHS intends to rely on all applicable and appropriate statutory authorities, regulations, policies, and programs to accelerate rapid adoption of health information exchange across the care continuum in support of delivery and payment reform.

- ## Received public input (RFI Spring 2013)
  - More than 200 responses from variety of providers, including long-term and post-acute care and behavioral health providers, payers, state-based associations and organizations, and consumers
  - Comments focused on
    - Accelerating interoperability and electronic health information exchange through payment models
    - Voluntary EHR certification
    - Standards and electronic exchange of health information

- Accelerating Interoperability and Electronic Health Information Exchange (HIE) through Payment Models
  - Require electronic HIE in all advanced payment models and Medicaid waivers
  - Extend Center for Medicare & Medicaid Innovation (CMMI) efforts
  - Include Long-term care and post-acute care (LTPAC) and Behavioral Health (BH) in State Innovation Models (SIM) grants
  - Direct incentives for LTPAC and BH providers
  - Explore additional reimbursement codes for care coordination via tele-health, e-visits, radiology queries, and Evaluation &Management
  - Require electronic HIE standards as regulatory requirements for quality measurement and conditions of participation
  - Extend Regional Extension Center (REC) support
  - Extend Stark and Anti-kickback exceptions for donations of EHR software

- Voluntary HIT Certification: Expansion
  - Interoperability across the spectrum of care
    - LTPAC
    - BH

- Standards and Electronic Exchange
  - Support for DIRECT and Meaningful Use Stage 2 objectives
  - Standardization of data elements
  - Encourage bi-directional information exchange

Principles and Strategy – The Path Forward

- HHS Principles and Strategy for Accelerating Health Information Exchange (Released 8/7/2013)
  - Clearly identifies HHS policy and program intent and commitment to accelerate HIE across the continuum of care
  - Will guide future HHS decisions about health care programs and policies moving beyond EHR Incentive Programs
  - Includes principles for:
    - Accelerating HIE
    - Advancing Standards and Interoperability
    - Consumer/Patient Engagement

Transformed Health System – The Vision

- HHS is committed to an incremental, yet comprehensive and strategic approach to accelerating different types of health information exchange as a part of Affordable Care Act delivery reform programs and Medicare and Medicaid payment

- Health information exchange and health information technology are foundational building blocks for delivery system transformation

- New regulations and guidance on existing programs will enable a patient's health information to follow them wherever they access care with appropriate privacy and security safeguards

Infrastructure for Value-based Payment

- HHS will implement policies that encourage electronic health information exchange
  - Could evolve from incentive and reward structures to electronic health information exchange as standard business practice for providers
  - Will facilitate the types of health information exchange needed to support successful participation in new Medicare and Medicaid care delivery and payment programs such as accountable care organizations and bundled payment demonstrations
  - Will encourage health information exchange where possible in support of state-led delivery and payment reform through federal and state partnerships

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- HHS will advance multi-stakeholder development of standards through the Standards & Interoperability Framework and coordination with standards development organizations

- HHS will encourage widespread use of HHS adopted HIT standards for advancing interoperability and electronic HIE across the health system through Medicare and Medicaid delivery reform

- HHS will release an interoperability and certification roadmap

  – Serve as a transparent planning tool to guide standards development, adoption and HIT certification

- ## HHS will:

  - consider various ways to align HIT certification with Medicare and Medicaid payment policy to the extent feasible and allowable by law.

  - For example, meeting most recent standards for MU of certified EHRs has been proposed as a requirement for a new care management fee in the FY2014 Medicare Physician Fee Schedule Proposed Rulemaking

Privacy and Security

- HHS will:
  - support privacy, security and integrity of patient health information across all HIE acceleration activities
  - strengthen data provenance to enhance providers' confidence in the original source of data they receive
  - develop standards and policies to enable electronic management of consent and HIE among providers treating patients with sensitive health data such as those with behavioral health conditions or HIV
  - develop additional guidance that clarify federal policies for the privacy and security of electronic health information

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- HHS will:

  - work to align HIT standards and specifications for quality measurement and improvement across Medicare and Medicaid

  - accelerate alignment and implementation of electronic clinical quality measures, electronic decision support interventions, and electronic reporting mechanisms

Patient/Consumer Engagement

- HHS will:
  - support appropriate patient access to health information
  - support appropriate access to patient information by family and caregivers
  - make standardized data available to patients wherever possible

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CMS Action Steps

- Proposed Physician Fee Schedule rule-making process
  - Notice of Proposed Rulemaking (NPRM) proposed new complex chronic care management fee conditioned on e-summary of care record exchange

- Health Care Innovation Awards
  - Multiple first round awards including HIE as part of model
  - 2nd round of funding will test new payment models and allow for support of HIE

- State Innovation Model Initiative
  - Supporting HIT and HIE among LTPAC, BH and other providers participating in delivery models in testing states

CMS – Actions in Partnership with States

- Continue to incorporate health information exchange acceleration strategies into Medicaid and CHIP through State Plan Amendment and Waiver processes

- Use existing Medicaid, CHIP and Basic Health Plan authorities to incorporate health information exchange into payment policies

- Make further use of Medicaid health information exchange funding opportunities to contribute to health information exchange infrastructure costs

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ONC Action Steps

- Public communication of Standards, Interoperability and Certification Roadmap

- Move forward with determining potential scope and criteria for LTPAC and BH HIT certification through HIT Policy Committee

- Open source tool kits for ADT alerts

- Path to Interoperability Whiteboard video and Fact Sheet http://www.healthit.gov/providers-professionals/video/interoperability-whiteboard

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- HHS is committed to realizing a patient-centered, value-driven health care system supported by the secure exchange of information across all providers of care.

- HIT is a foundational building block for achieving better health outcomes at lower costs

Dr. Laura McCrary

Executive Director of the Kansas
Health Information Network (KHIN)

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Advancing HIE

Perspectives from the Field
Kansas Health Information Network, Inc.

**KANSAS HEALTH
INFORMATION NETWORK**

iCA integrating care. **improving health.**

Kansas Health Information Network, Inc.

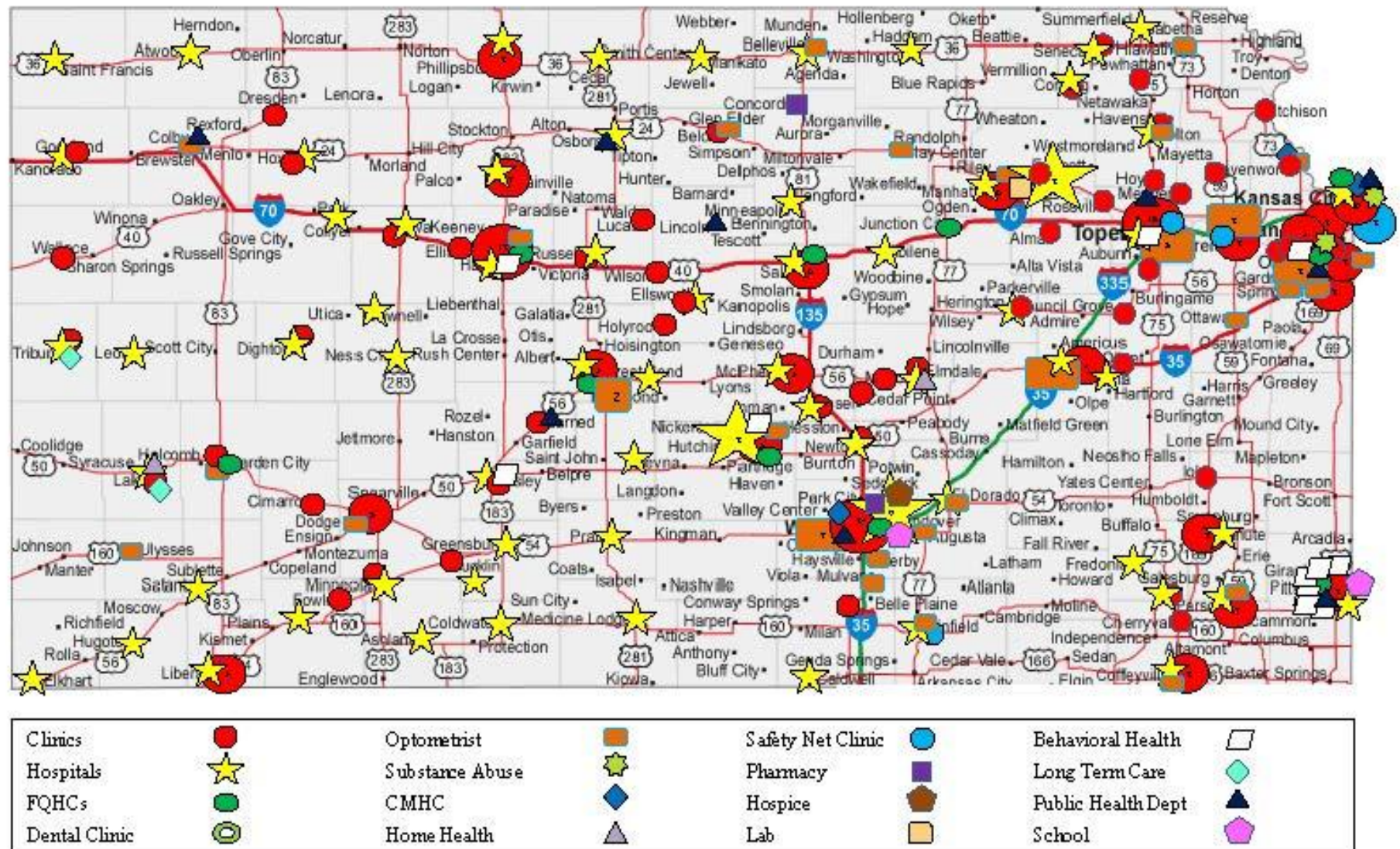## FOUNDING MEMBERS--NOT FOR PROFIT-2010

KHIN Key Statistics

1. **Over 1 Million Unique Patients in KHIN Exchange**

2. **367 KHIN Members**

3. **49 Health Care Organizations in Production—33 testing**
   - **46 Hospital Systems**
   - **90 Clinics**

4. **Public Health Transmissions**
   - **Syndromic Surveillance—800,000+ transmissions**
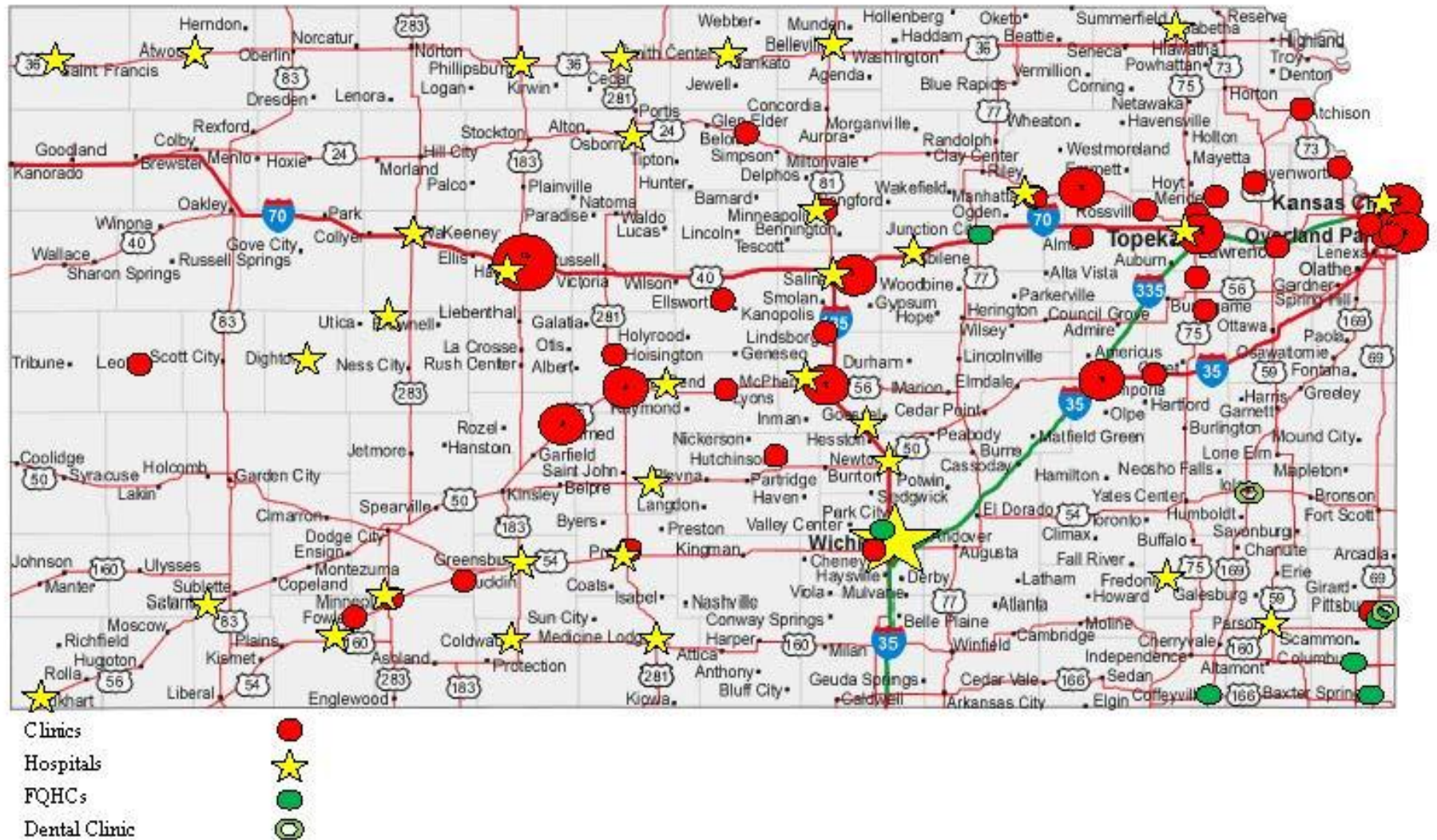   - **Immunizations—20,000+**

Legend:

Symbol	Type		Symbol	Type		Symbol	Type		Symbol	Type
●	Clinics		■	Optometrist		●	Safety Net Clinic		▱	Behavioral Health
★	Hospitals		✦	Substance Abuse		■	Pharmacy		◆	Long Term Care
●	FQHCs		◆	CMHC		◆	Hospice		▲	Public Health Dept
◎	Dental Clinic		▲	Home Health		■	Lab		⬠	School

Note: Larger icons indicate multiple locations within the same city of the same type

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V09.03.13

KHIN Online Participants

Clinics ● (red)
Hospitals ★ (yellow)
FQHCs ● (green)
Dental Clinic ◎ (green outline)

Note: Larger icons indicate multiple locations within the same city by the same parent company

V09.09.13

KHIN HIE Products 2013

1. **Secure Clinical Messaging/DIRECT**

2. **Provider Portal**
    - **Full HIE–Query functionality**

3. **Personal Health Record**

4. **State level interfaces**
    - **Immunizations**
    - **Syndromic Surveillance**
    - **Reportable Diseases**
    - **Cancer Registry**
    - **Birth Defect Registry**

5. **Alerts and Data Extracts**

Advancing HIE in Kansas

Tying MU3 to HIE Functions

1. **Transitions of Care**
   - HIE crosses organizations
   - Query and DIRECT

2. **Transport of Public Health Measures**
   - Limited State Level Resources
   - EHR vendor creates the message –HIE transports
   - HIE can add necessary data-facility code

3. **Patient Engagement**
   - Single location for patient data
   - Providers can work together to achieve MU2 % requirements
   - Single location for secure messaging

Advancing HIE in Kansas

WHAT WOULD HELP?

Tying Payment Reform to HIE Functions

1. **Alerting**
   - **Admit**
   - **Discharge**
   - **Readmit %**

2. **Transparency**
   - **Data Extracts across Populations—ACO Measures**
   - **Clinical Quality Measures Across Providers—Provider Report Cards**
   - **Care Coordination—Care Plans Across Providers**

Advancing HIE in Kansas

System Reform

1. **Unique Patient Identifier**

2. **Interoperability Standards**
   - XCA—HIO to HIO
   - XDS
     - CCD/CCDA
     - PIX
     - ATNA
   - HL7
     - ADT
     - Public Health
     - Labs/Meds/Radiology
   - DIRECT
     - HISP
     - XDR

3. **Voluntary HIE Certification focused on MU3 measures—Parallel EHR certification**

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Contact Information

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DISCUSSION

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2013 HEALTH DATA EXCHANGE & INTEROPERABILITY SUMMIT

October 30-31, Grand Hyatt, Washington, DC

Early bird rate expires September 30!

DISCUSSIONS TOPICS:

Interoperability & Standards for Health Data Exchange	Exchanging Data with the Federal Government
Breaking Down Silos: Exchanging Data Across the Continuum of Care	Protecting Patient Rights While Exchanging Data
Cybersecurity and Health Data	Connecting Health Data to Health Insurance Exchanges
Data Sharing to Improve Population and Public Health	Data Sharing in Accountable Care Organizations
Sustaining the HIE Model: Defining the Value of Health Data Exchange	Best Practices to Support a Trusted Environment for Exchange

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Next Briefing from the Beltway

October 17, 2013

4:00 - 5:00 pm (ET)

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Thank You