



# ONC/CMS Reducing Clinician Burden HIMSS Listening Session

Wednesday, March 7, 2018  
11:30 am – 12:30 pm PST  
Lando 4204





## Welcome and Agenda Review

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Andy Gettinger, MD, Chief Clinical Officer | ONC

Kate Goodrich, MD, Chief Medical Officer | CMS



# AGENDA

- 11:30 am – 11:35 am Welcome and Instructions for Session  
*Dr. Andy Gettinger, Chief Clinical Officer, ONC*  
*Dr. Kate Goodrich, Chief Medical Officer, CMS*
- 11:35 am – 11:40 am Review of 21<sup>st</sup> Century Cures Act Section 4001(a)  
*Dr. Thomas Mason, Chief Medical Officer, ONC*
- 11:40 am – 11:45 am Review Topical Workgroups for Congressional Report  
*Dr. Andy Gettinger, ONC*
- 11:45 am – 11:55 am CMS Regulatory and Administration Review  
*Dr. Kate Goodrich, CMS*  
*Melanie Combs-Dyer, CMS*
- 11:55 am – 12:25 pm Public Feedback via Digital Audience Response
- 12:25 pm – 12:30 pm Recap of Session Discussion  
*Dr. John Fleming, Deputy Assistant Secretary for Health Technology Reform, HHS*
- 12:30 pm Session Adjourned





## Review of 21<sup>st</sup> Century Cures Act Section 4001(a)

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Thomas Mason, MD, Chief Medical Officer | ONC



# 21<sup>st</sup> Century Cures Act

## SEC. 4001. (a) ASSISTING DOCTORS AND HOSPITALS IN IMPROVING QUALITY OF CARE FOR PATIENTS.

- (1) (a) Reduction in Burdens Goal.--The Secretary of Health and Human Services (referred to in this section as the `Secretary'), in consultation with providers of health services, health care suppliers of services, health care payers, health professional societies, health information technology developers, health care quality organizations, health care accreditation organizations, public health entities, States, and other appropriate entities, shall:
  - 1) establish a goal with respect to the reduction of regulatory or administrative burdens (such as documentation requirements) relating to the use of electronic health records;
  - 2) develop a strategy for meeting the goal established; and
  - 3) develop recommendations for meeting the goal established.

# 21<sup>st</sup> Century Cures Act

## SEC. 4001. (a) ASSISTING DOCTORS AND HOSPITALS IN IMPROVING QUALITY OF CARE FOR PATIENTS.

- (1)(b)(3) Recommendations.--The recommendations developed under paragraph shall address--
  - » actions that improve the clinical documentation experience;
  - » actions that improve patient care;
  - » actions to be taken by the Secretary and by other entities; and
  - » other areas, as the Secretary determines appropriate, to reduce the reporting burden required of health care providers.

# Clinician Burden Workgroups

- **Executive Sponsor**
  - » John Fleming, MD, Deputy Assistant Secretary for Health IT Reform
- **Executive Leads**
  - » Andrew Gettinger, MD & Kate Goodrich, MD
- **Documentation, Administrative, and Reimbursement Models**
  - » Workgroup Lead: Thomas Mason, MD (thomas.mason@hhs.gov)
- **EHR Reporting**
  - » Workgroup Lead: Jon White, MD (jon.white@hhs.gov)
- **Health IT and User-Centered Design**
  - » Workgroup Lead: Justin Cross, MD (justin.cross@hhs.gov)
- **Non-Federal Payers and Other Government Requirements**
  - » Workgroup Lead: Kelly Cronin (kelly.cronin@hhs.gov)
- **Lead Report Drafter:** Robert Anthony



## CMS Regulatory and Administrative Review

Kate Goodrich, MD, Chief Medical Officer | CMS

Melanie Combs-Dyer | CMS

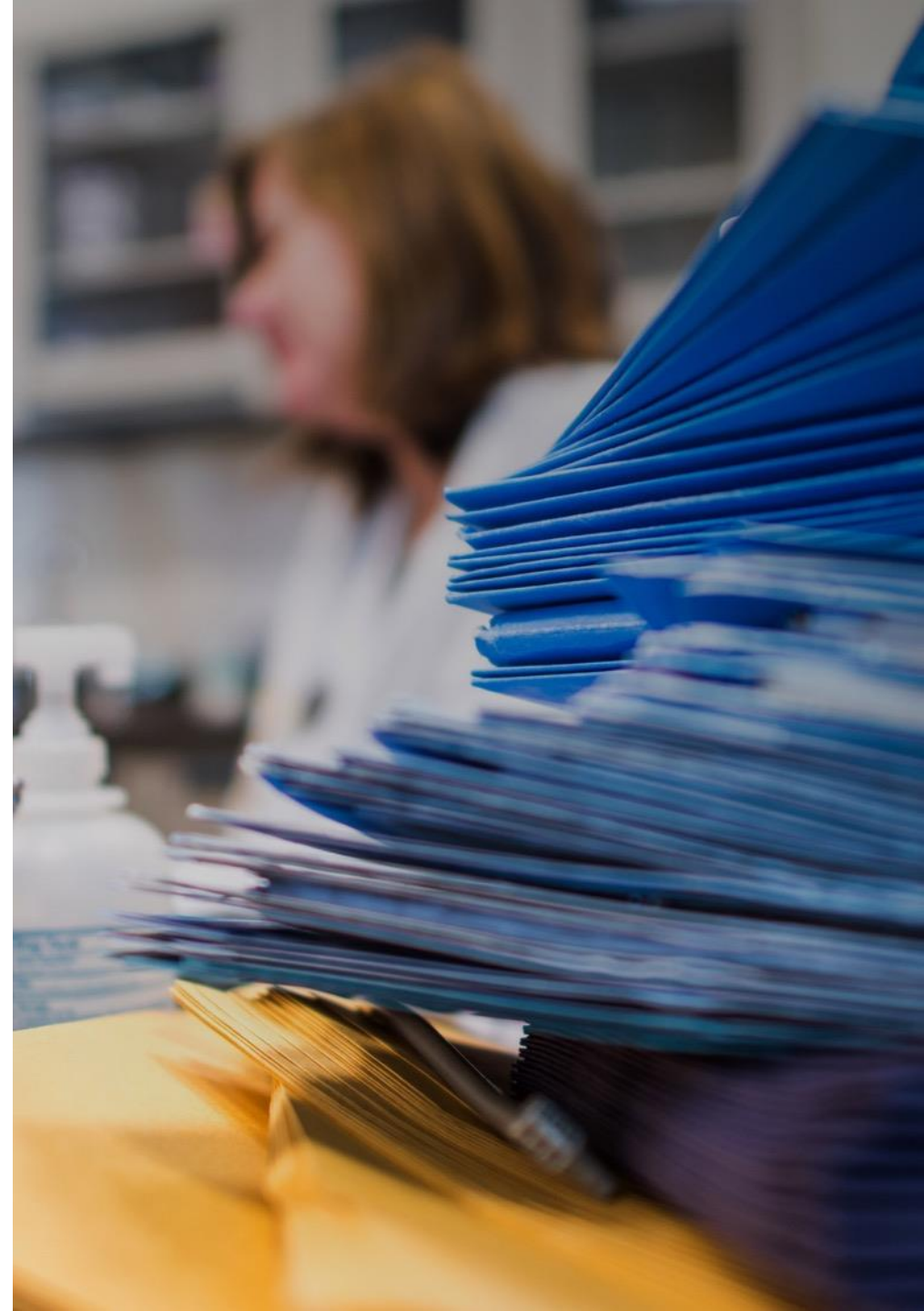




# **PATIENTS** **OVER PAPERWORK**

## **Our top priority at CMS is putting patients first**

CMS is committed to reducing unnecessary burden, increasing efficiencies, and improving the beneficiary experience.



# PATIENTS OVER PAPERWORK



## CCSQ Sub-Regulatory EHR and Quality Payment Program (QPP) Accomplishments

1. Greatly reduced the number of EHR measures and thresholds required for Meaningful Use and QPP
  - Re-engineering these programs for future years to focus on interoperability and further reducing burden for providers
2. Developed an **API** for data submission under QPP that can be used for reporting to MIPS for clinicians using registries or QCDRs
3. Developed a very user friendly **website for QPP** for obtaining information and submitting data.

# PATIENTS OVER PAPERWORK



## CCSQ Sub-Reg Quality and Safety Oversight Burden Reduction Accomplishments

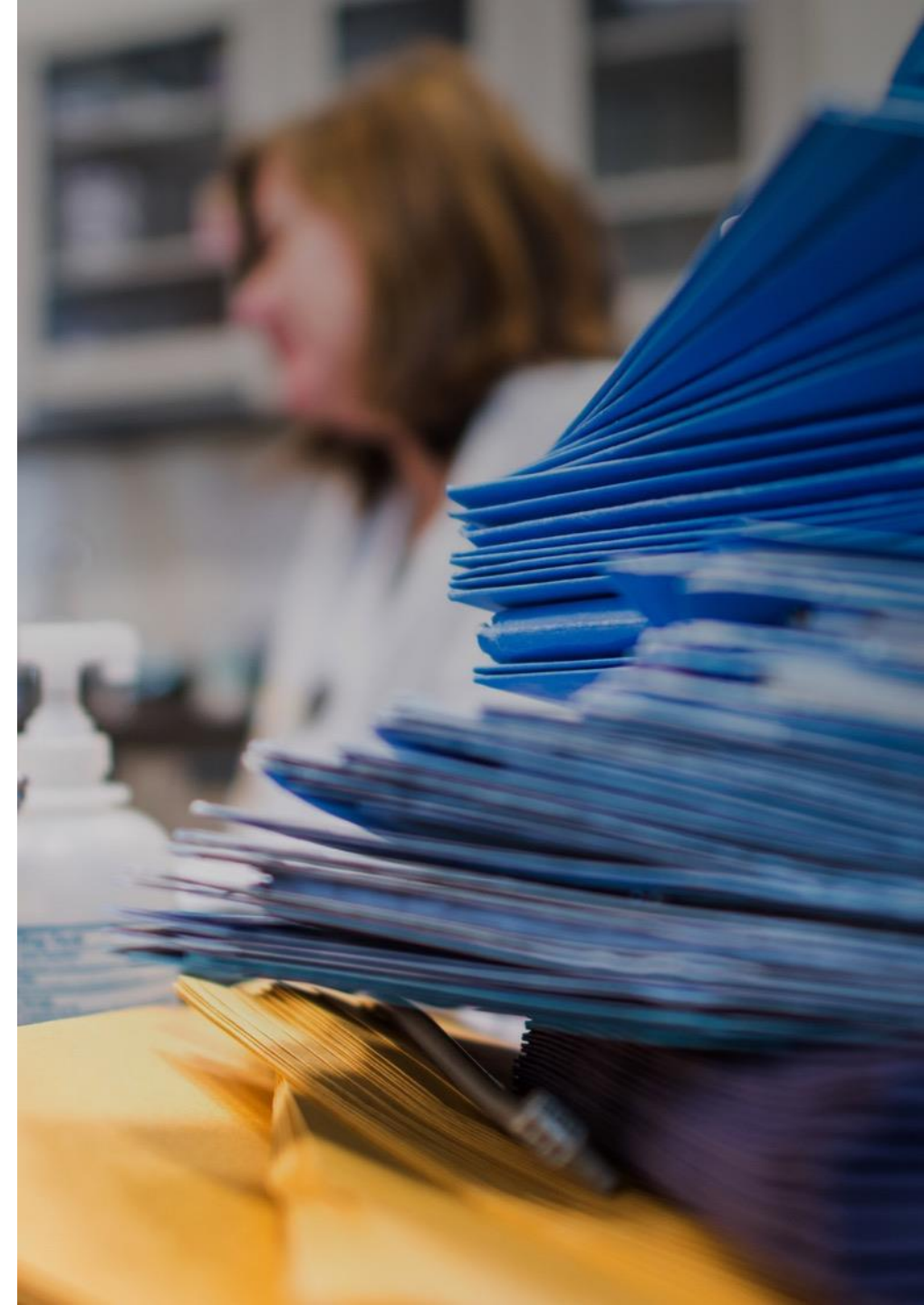
1. Directed **surveyors of LTC Facilities to focus on education** rather than penalties related to implementation of Requirements of Participation (RoPs) for 18 months.
2. **Simplified the submission requirements** for providers writing **CoP Plans of Correction**. Providers can now just submit their plans as a Word attachment.



# **PATIENTS** **OVER PAPERWORK**

## **Documentation Requirements Simplification Accomplishments**

- E/M Med Student Documentation
  - Now allow teaching physicians to verify in the medical record student documentation of E/M services, rather than re-documenting the student's notes
- Signature Requirements
  - Claims won't be denied if support staff forget to sign part of the record
- When MACs should check for Proof of Delivery
  - Will not be requested for every item
- Therapeutic Shoe Inserts
  - Now allow payment for inserts made with digital technology, without an actual impression of the foot
- IRF Medical Review Policy
  - Claims won't be denied just because a certain number of therapy hours weren't met



# PATIENTS OVER PAPERWORK

## Improving Provider-to-Payer Interoperability:

### The Medicare Documentation Requirement Repository

CMS is **working with:**

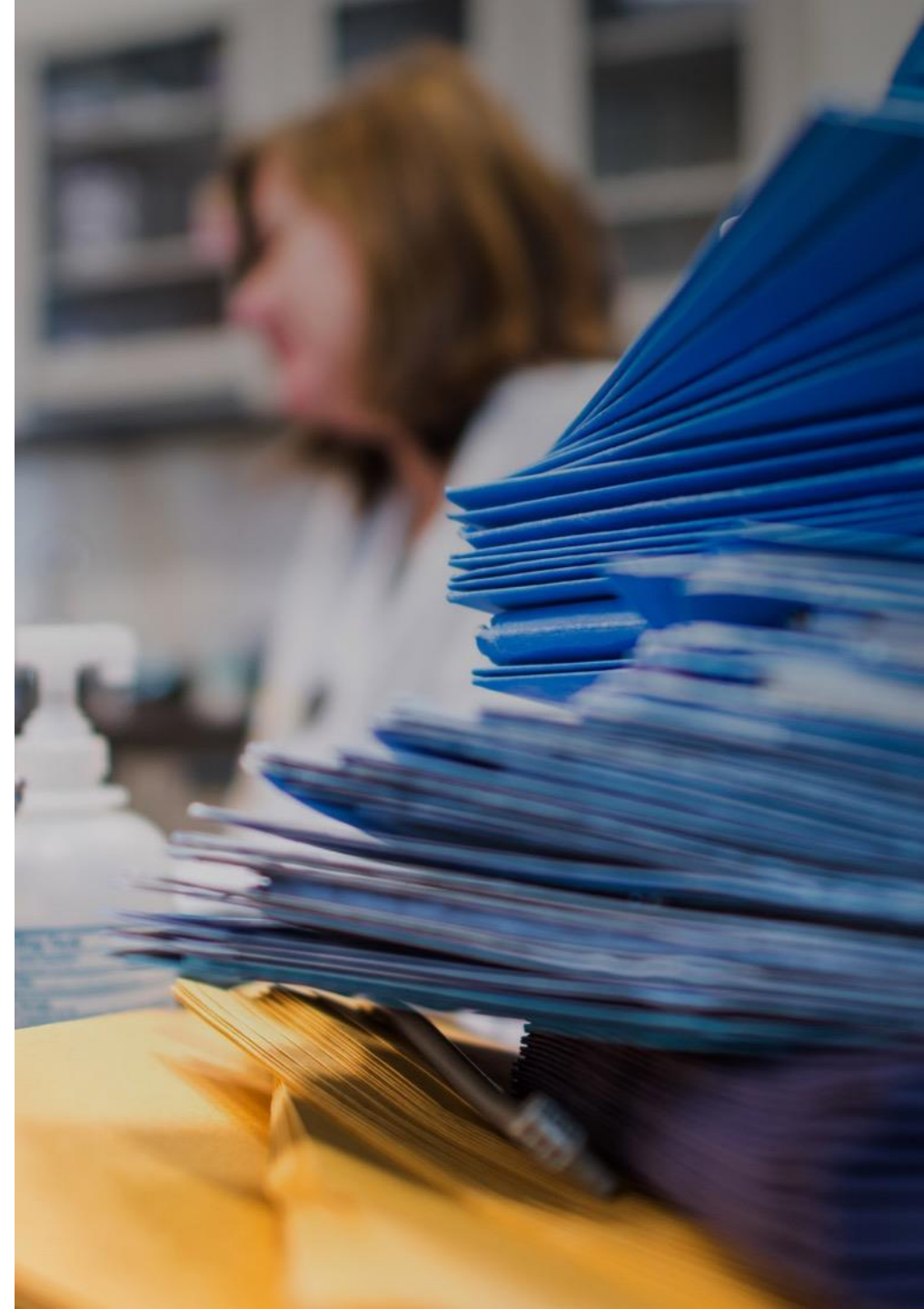
- standards development organizations,
- other payers, and
- EHR vendors

to develop **libraries** of:

- when prior authorization is required
- documentation requirements, and
- documentation templates

that a provider could access:

- right at the **point of service**
- right in their **EHR** or practice management system





# **PATIENTS** **OVER PAPERWORK**

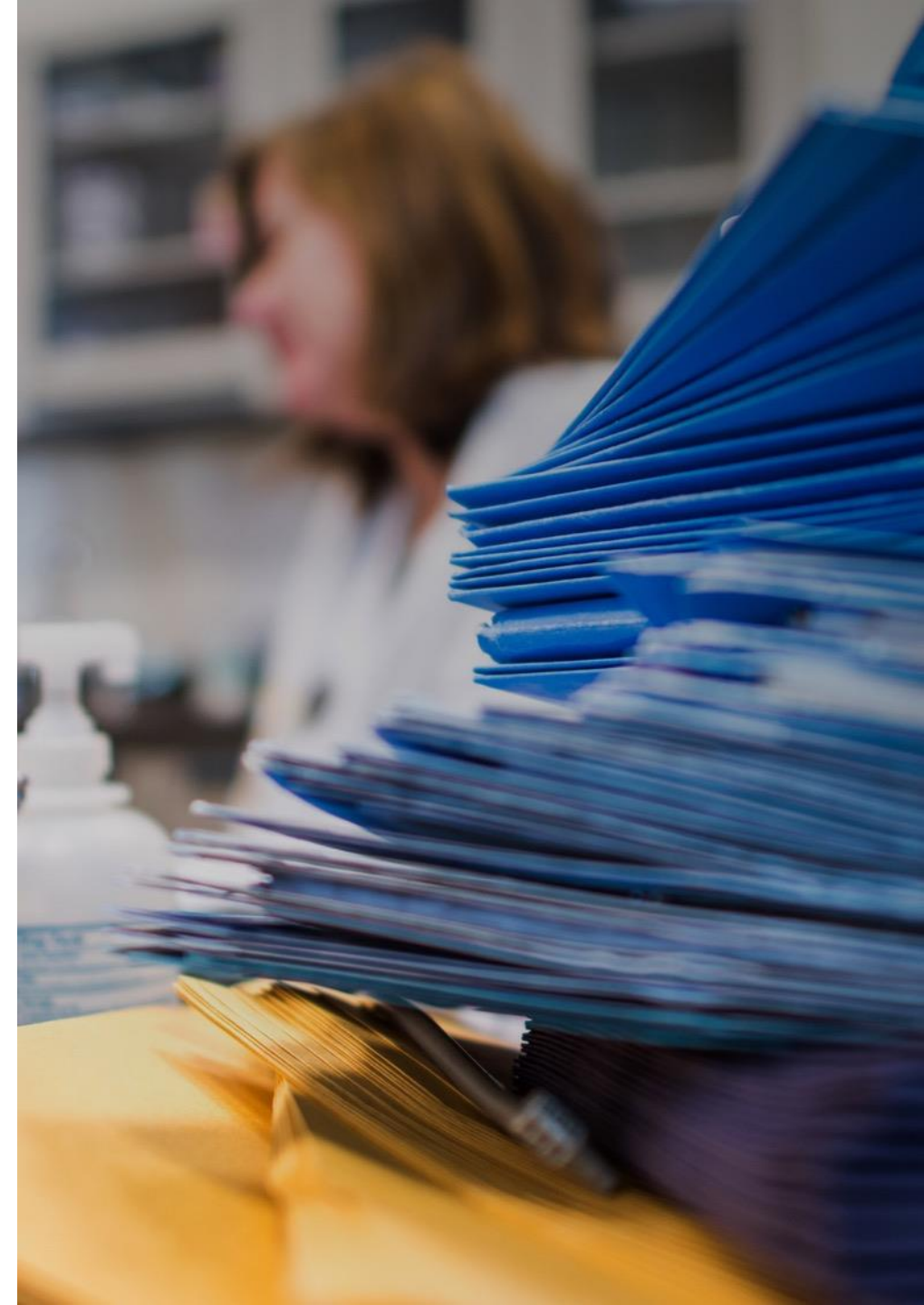
## **Improving Provider-to-Provider Interoperability**

### **Let's Kill The Fax Machine!**

- Allow an ordering clinician to send:
  - orders, progress notes,
  - lab results,
  - discharge summary
- Allow the supplier/HHA/other provider to request:
  - Additional parts of the medical record
  - Signature on the Plan of Care

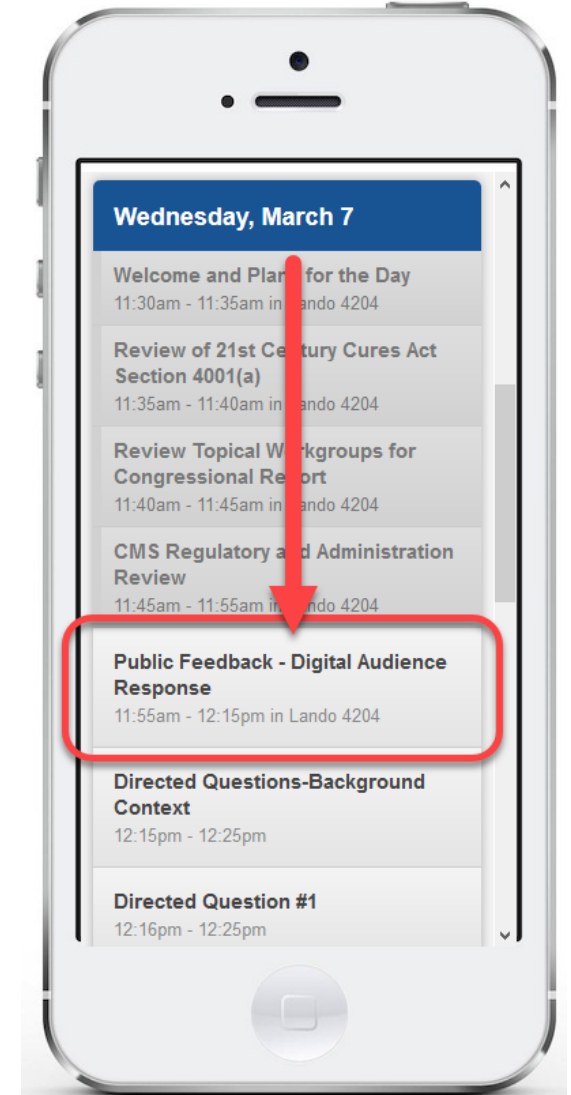
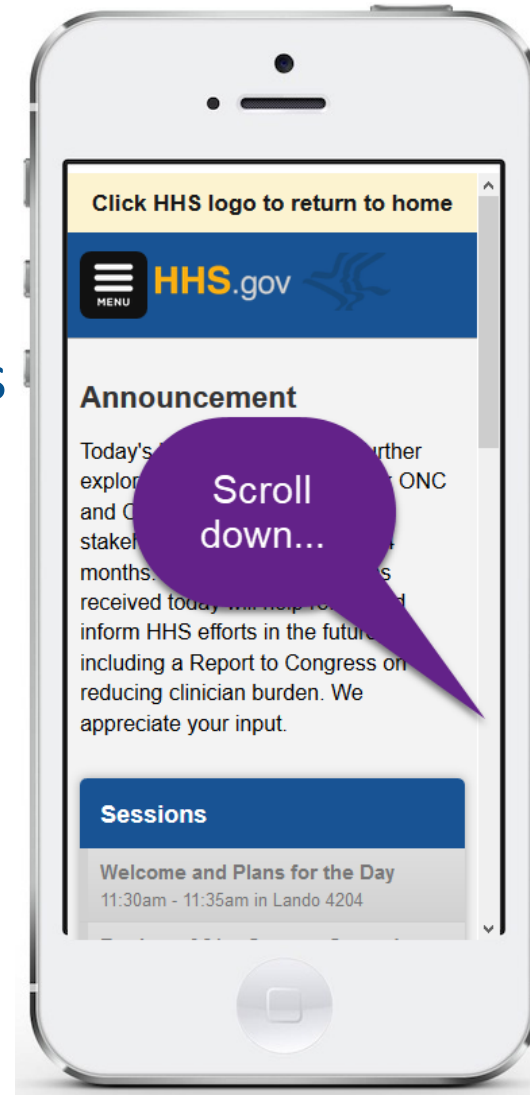
### **How will CMS and the SDOs Accomplish these Goals?**

- Create or revise:
  - Standards (FHIR),
  - Implementation guides, and
  - Reference implementations (sample code)
- Launch pilot projects to test solutions



# Connect to Meeting Digital Audience Response

- Go to: <https://onc.cnf.io>
- Select the “Public Feedback – Digital Audience Response” session
- “*You’re almost there...*” follow the prompts to enter your information
- Access through smartphones, laptops, or other electronic devices
- Click on the HHS Logo at the top to return to the home screen





## Recap of Session Discussion

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John Fleming, MD, Deputy Assistant Secretary for Health Technology Reform | HHS







## Comments to HHS

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Technology Reform | HHS**

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