



The Office of the National Coordinator for
Health Information Technology



ONC – CMS Listening Session Accelerating Health Information Exchange

April 3, 2013



Welcome to the ONC-CMS Webinar!

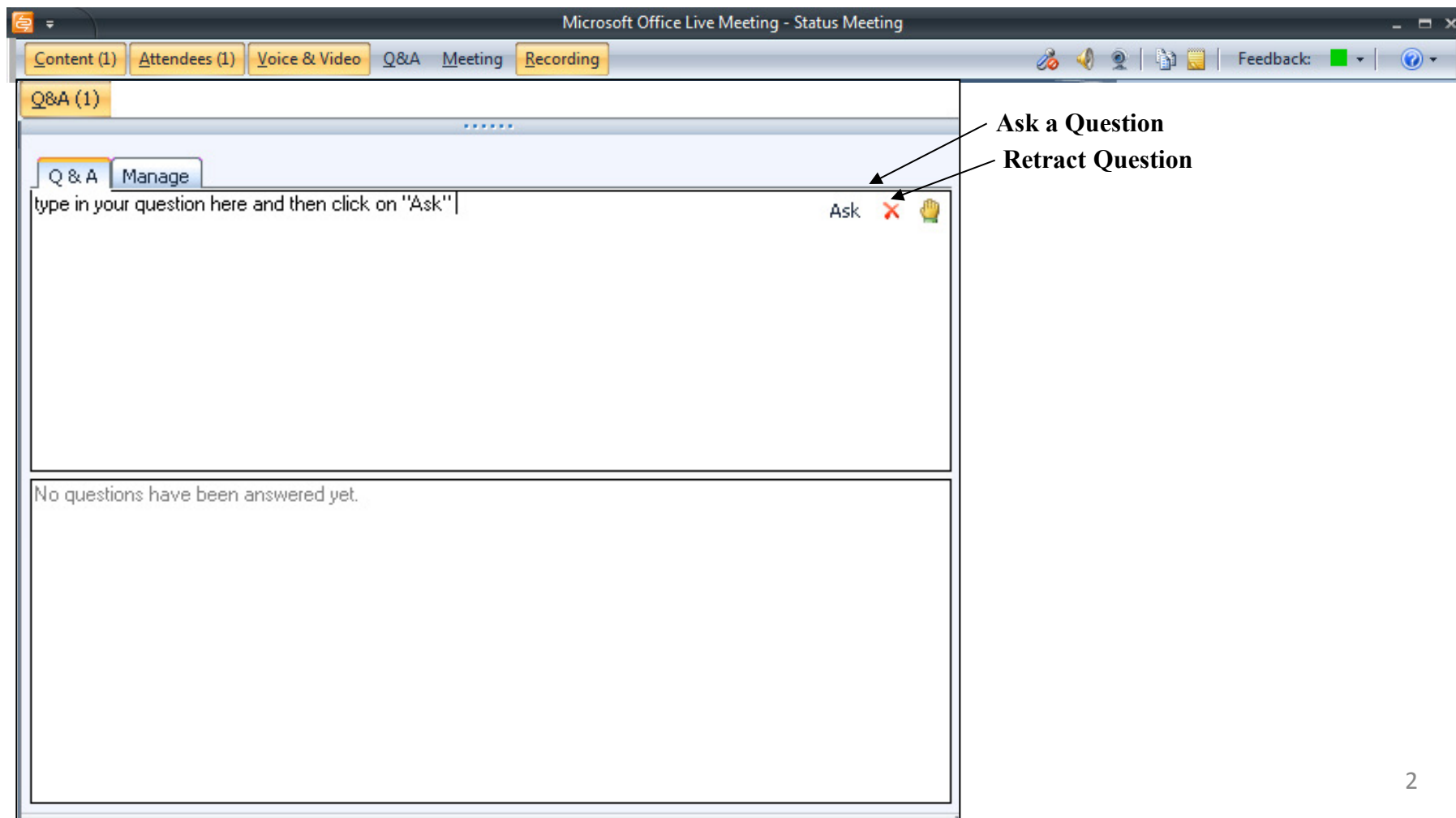


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Tools You Can Use

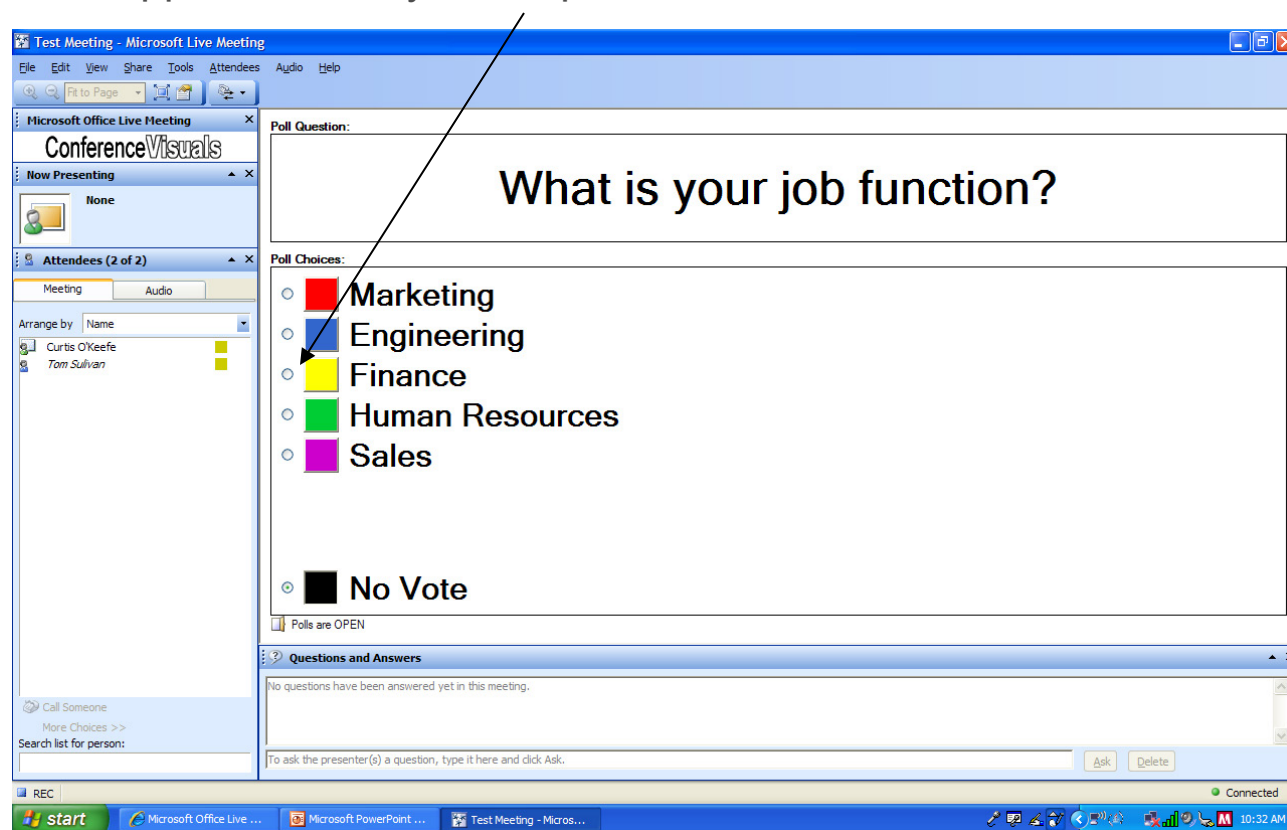
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Polling:

- Polling questions will appear in middle of your screen.
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Yes

Is this Webinar being recorded so that I or others can view it at a later time?

Yes



- Farzad Mostashari, MD, ScM
National Coordinator for Health Information Technology, ONC



- Jonathan Blum
*Deputy Administrator and
Director for the Center of Medicare, CMS*



- Patrick Conway, MD, MSc
*CMS Chief Medical Officer and
Director, Center for Clinical Standards and Quality, CMS*



- Robert Tagalicod
Director of Office E-Health Standards and Services, CMS



- Kelly Cronin
Health Care Reform Coordinator, ONC



- Moderated by Nora Super
Director, Public Affairs, ONC

- Request for information (RFI) - seeking public input about a variety of policies that will strengthen the business case for electronic health information exchange (HIE) across providers to ensure patients' health information will follow them seamlessly and securely wherever they access care.



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

- 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.
- FFS reimbursement and other business motivations are the stronger influencer of provider behavior, still no business imperative for HIE across all providers and settings of care has developed.
- We want stakeholders to help inform our policies and programs and to take action quickly as delivery and payment reform is depending on this capability.

Accelerating Exchange Capabilities



- The overarching goal is to develop and implement a set of policies and programs that would encourage providers to routinely exchange health information through interoperable systems in support of care coordination across health care settings.
- HHS intends to rely on all applicable and appropriate statutory authorities, regulations, policies, and programs to accelerate rapid adoption of HIE across the care continuum in support of delivery and payment reform.

1. What changes in payment policy would have the most impact on HIE, particularly those that are market competitors?

2. Which of the following programs are having the greatest impact on HIE?
 - Accountable care organizations (ACOs)
 - Hospital payment adjustments for high readmission rates
 - Value-based purchasing
 - Value -based Modifier under Physician Fee-for-Service Payment under Medicare Part B
 - Patient -centered medical homes (PCMHs)
 - Bundled Payments

Are there any aspects of the design or implementation of these programs that are limiting their potential impact on encouraging care coordination and quality improvement across settings of care and among organizations that are market competitors?

- Should CMS consider new ways of requiring or encouraging HIE among ACO providers in the Medicare Shared Savings Program?
- Should there be e-care transition measures incorporated in the CMS reporting programs and value-based purchasing?

3. To what extent do current CMS payment policies encourage or impede electronic information exchange across health care provider organizations, particularly those that may be market competitors?

Discussion

6. How can CMS leverage regulatory requirements for acceptable quality in the operation of health care entities, such as conditions of participation for hospitals or requirements for skilled nursing facilities, nursing facilities, and home health to support and accelerate electronic, interoperable HIE? How could new requirements for acceptable quality that involve HIE be phased in overtime?
7. How could the EHR Incentives Program advance provider directories that would support HIE?

Discussion

8. How can the new authorities under the ACA for CMS to test, evaluate, and scale innovative payment and service delivery models best accelerate standards-based electronic HIE across treating providers?
 - Should HIE strategies be included in their applications for new models of care and payment?
 - Should HIE be a part of program requirements or milestones?

Discussion

9. What CMS and ONC policies and programs would most impact patient access and use of their electronic health information in the management of their care and health?
 - How could Blue Button be further promoted?
 - Should CMS test new incentives for consumer engagement in their care?

Discussion

- Comments must be received no later than 5 p.m. on April 22, 2013
 - Federal eRulemaking Portal (Website)
 - Regular, Express, or Overnight Mail
 - Hand Delivery or Courier
- To access RFI announcement:
<https://federalregister.gov/a/2013-05266>

- 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.
- Please respond to this RFI to inform our policy actions necessary to achieve this vision we all share.

