Health Information Compliance Alert

Policy: Feds Propose Big Changes for Promoting Interoperability Programs

Warning: 2022 IPPS rule suggests ramping up eCQM reporting.

If you thought COVID-inspired policymaking would slow down as vaccination rates went up, you would be wrong. In fact, a recent proposed rule utilizes lessons learned from the public health emergency (PHE) to update quality-backed IT initiatives.

Details: In its fiscal year (FY) 2022 Inpatient Prospective Payment System (IPPS) proposed rule, the Centers for Medicare & Medicaid Services (CMS) announced a laundry list of payment rate and policy changes "for hospitals, including significant modifications to the Promoting Interoperability Program requirements," explain attorneys **Jennifer Nelson Carney** and **Joshua Gilbert** with law firm Bricker & Eckler LLP in online analysis.

Several of the proposals aim to fix issues uncovered during the COVID-19 PHE as well as realign policies with the recent 21st Century Cures Act final rule.

"The rule's provisions seek to sustain hospital readiness to respond to future public health threats, enhance the health care workforce in rural and underserved communities, and revise scoring, payment and public quality data reporting methods to lessen the adverse impacts of the pandemic and future unplanned events," says a CMS fact sheet on the proposals.

The proposed rule was published in the Federal Register on May 10.

Refresher: In an effort to boost EHR usage and promote data sharing among healthcare providers, CMS created the Medicare and Medicaid EHR Incentive Programs, nicknamed Meaningful Use (MU), in 2011. With the establishment of MU, CMS encouraged providers to "adopt, implement, upgrade, and demonstrate meaningful use of certified EHR technology (CEHRT)," an agency release says. But despite the best intentions, the program had mixed reviews, uneven success, and so-so adoption.

Then in 2018, the feds devised a revamp to cut providers' administrative burdens while tying requirements with other quality initiatives. This resulted in a CMS rebrand of MU as PI Programs, which shouldn't be confused with the Merit-Based Incentives Payment System (MIPS) performance category Promoting Interoperability (see Health Information Compliance Alert, Vol. 18, No. 5).

Check Out What's on the Table

During the pandemic, many providers have relied heavily on virtual care and certified EHR technology (CEHRT) to care for and maintain communication with their patients. The proposed rule focuses on changing PI programs' policies and measures that will specifically impact new and returning eligible hospitals and critical access hospitals (CAHs).

Take a look at the top five PI Programs' items that CMS suggests modifying:

1. EHR reporting period: CMS suggests keeping the EHR minimum reporting period, which is currently any continuous 90 days, through calendar year (CY) 2023. However, the agency wants to increase the reporting period to 180 days for

CY 2024.

2. Attestations: CMS proposes to alter two attestation policies. First, the agency wants to add a new attestation: an annual assessment of all nine guides in the SAFER Guides measure, under the Protect Patient Health Information objective, indicates the fact sheet. Second, "CMS proposes to tweak attestation requirements, including removing attestation statements 2 and 3 from the preventing information blocking attestation," mention **Miranda Franco**, senior policy advisor, and **Suzanne Michelle Joy**, senior public affairs advisor, with law firm Holland & Knight in online analysis.

3. PHE-related measures: "The IPPS Proposed Rule would require hospitals to report on all four measures under the Public Health and Clinical Data Exchange objective, rather than the previous pick-and-choose option," Carney and Gilbert point out. The four measures that CMS would require hospitals to report on include: Syndromic Surveillance Reporting, Immunization Registry Reporting, Electronic Case Reporting, and Electronic Reportable Laboratory Result Reporting.

"These four measures would put PHAs on better footing for future health threats and a long-term COVID-19 pandemic recovery by strengthening three important public health functions: (1) Early warning surveillance, (2) case surveillance, and (3) vaccine uptake," the proposed rule says.

4. Score: The feds want to bump up the minimum required score for measures and objectives from 50 to 60 points to reach meaningful EHR user status; the total possible score is out of 100.

5. eCQM alignment: Starting with the CY 2023 reporting period, CMS proposes the adoption of two new electronic clinical quality measures (eCQMs) to the Medicare PI Program's eCQM measure set, says the fact sheet. The agency also wants to nix four eCQMs from the measure set in CY 2023 to better align with proposed changes to the Hospital Inpatient Quality Reporting (IQR) Program.

Timeline: If you'd like to weigh in on the proposed PI Programs' changes**,** CMS is accepting public comments on the rule through June 28.

Resource: View the IPPS rule and comment at www.govinfo.gov/content/pkg/FR-2021-05-10/pdf/2021-08888.pdf.