

CMS' Approach to E-Health Connectivity

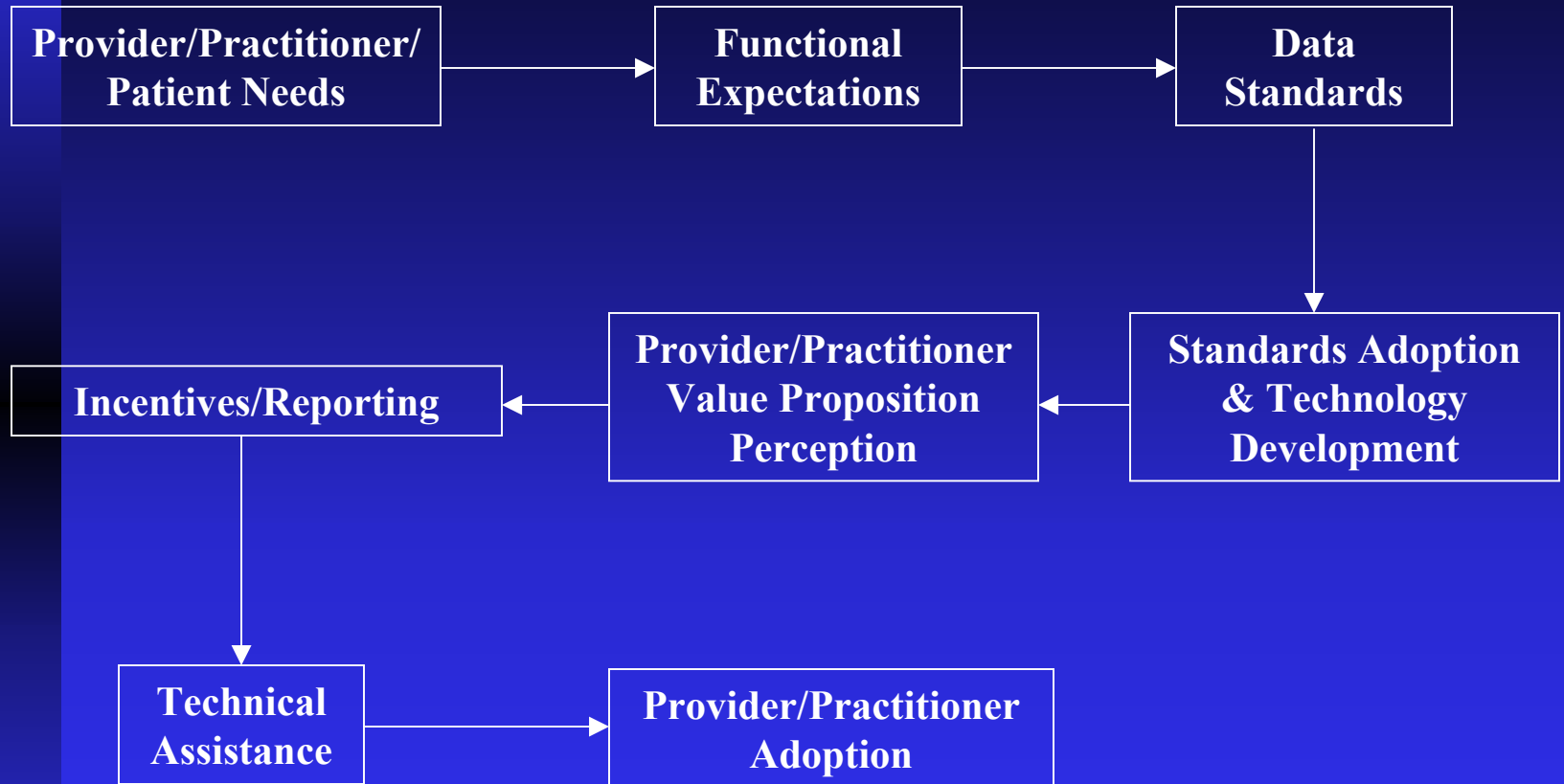
HIPAA Summit

October 30, 2002

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HEALTHCARE TECHNOLOGY ADOPTION



CMS Information Expectations

- Claims payment
 - ◆ Traditional FFS
 - ◆ Case-rate/prospective payment systems
- Enforcement/survey process
- Quality measurement
- Process improvement
- Research

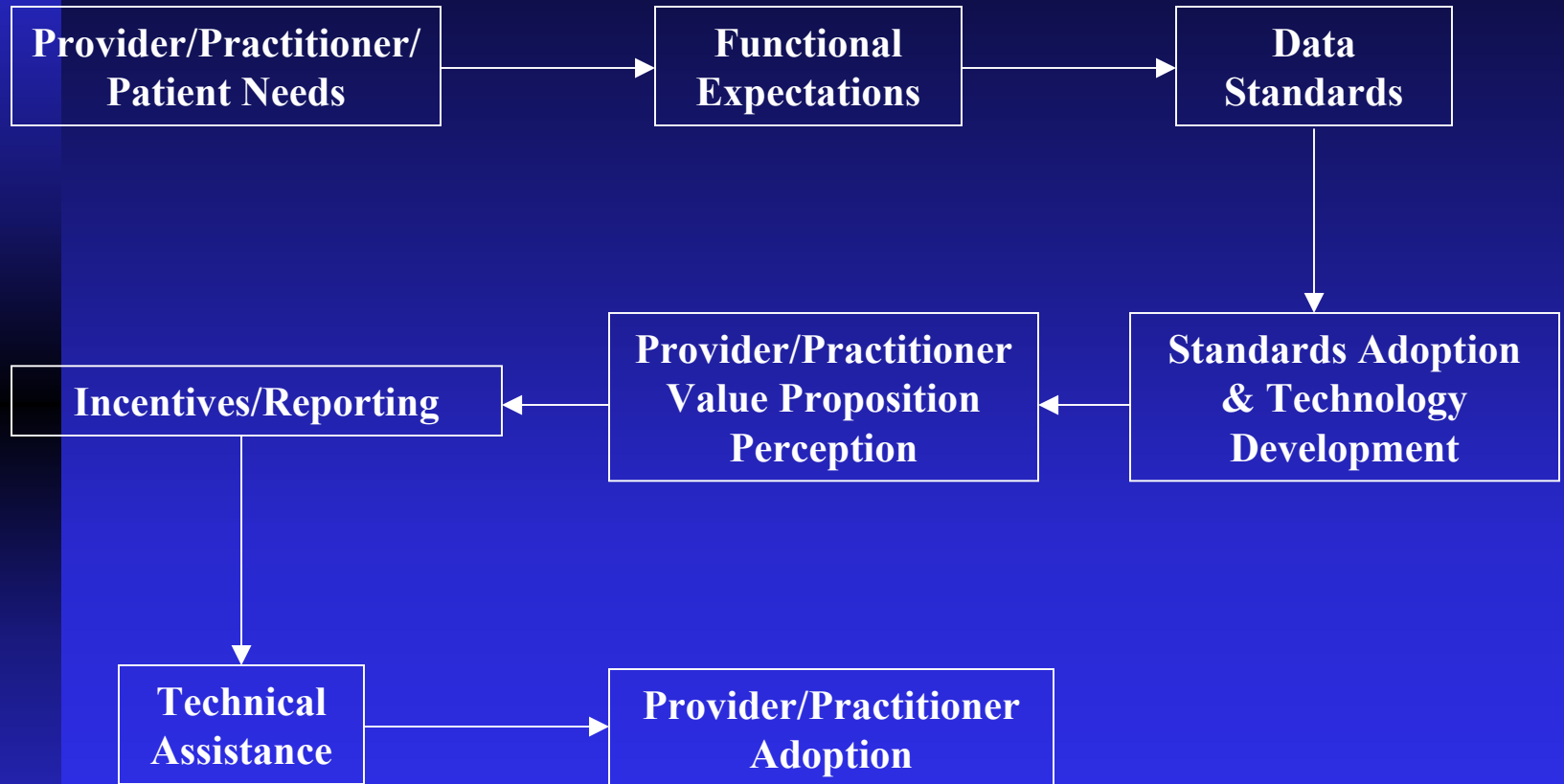
Quality Measurement

- Use by providers/practitioners in assessing performance
- Confidential use by QIOs in providing assistance to providers/practitioners
- Public reporting
- Examples: hospitals, physician offices, nursing homes, home health agencies, dialysis facilities

Process Improvement

- Systems which create the potential for substantial gains in performance
- Examples:
 - ◆ CPOE
 - ◆ EMR
 - ◆ E-lab ordering/results reporting
 - ◆ E-prescribing
 - ◆ Registries
- Guidelines written to create systems-implementable specifications

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Consolidated Health Informatics *Goals*

- To establish Federal health information interoperability standards as the basis for electronic health data transfer in all activities and projects and among all agencies and departments

CHI Participation

- About **20 partnering agencies** currently include HHS (CMS, CDC, IHS, FDA, etc.), DOD, VA as well as Department of State, SSA, GSA and others.
- Approximately **100** medical, technical, policy and management **subject matter experts**

CHI Objectives

- Adopt health information interoperability standards (a vocabulary that includes specific health data models and communication standards)
- Assure alignment with Health Insurance Portability and Accountability Act (HIPAA) administrative transaction records and code sets
- Assure alignment with HIPAA security and privacy solutions
- Successful change in the medical information sharing culture

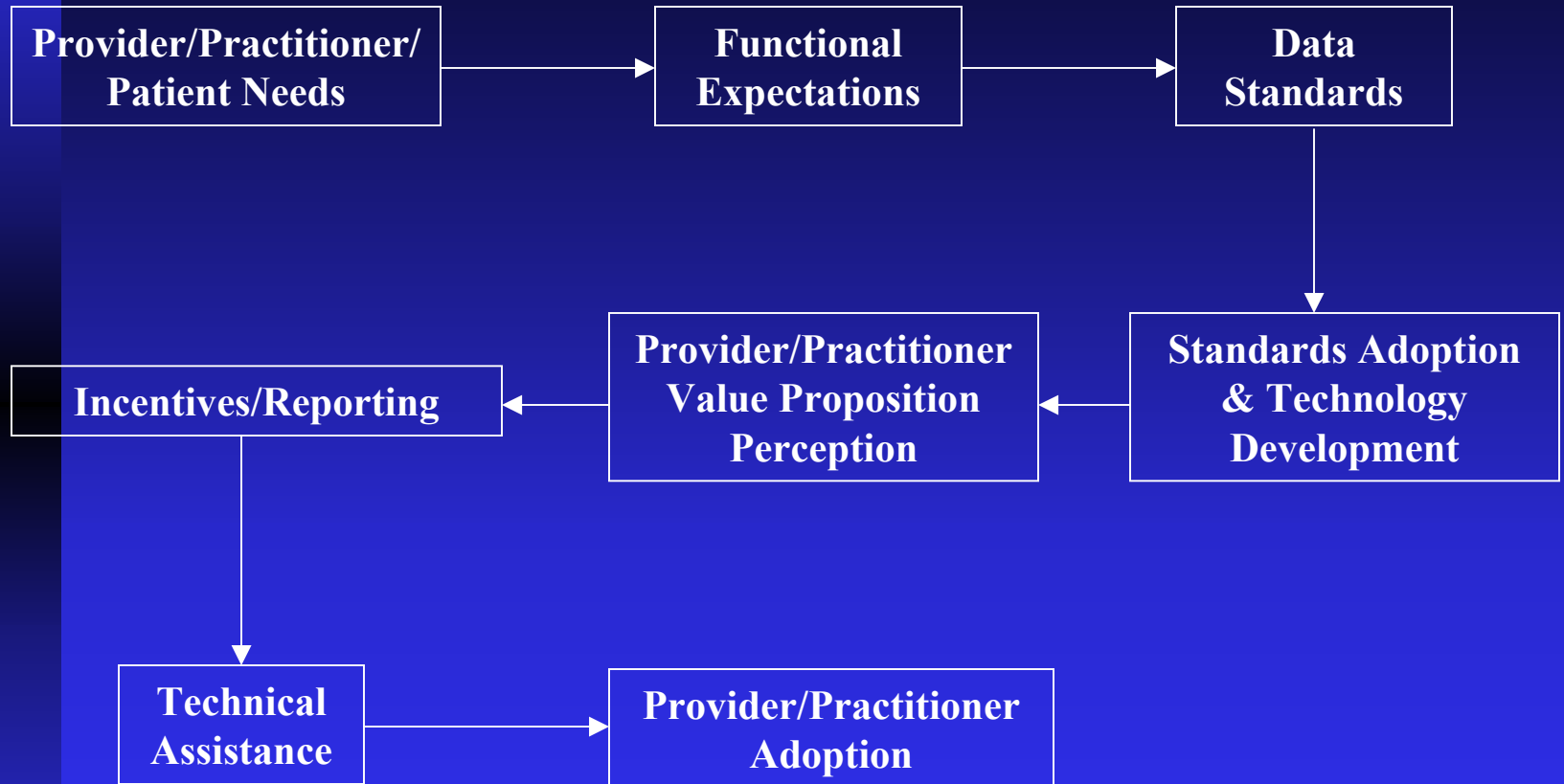
CHI Strategy

- Adopt common health information standards among all of the health-related Federal departments and agencies
- Encourage and attract adoption of similar standards by other public and private sector entities
- Create a “tipping point” to catalyze the widespread adoption of common health information standards

CHI Standards In Process

- Lab ordering – LOINC
- Messaging – HL7
- Others earlier in process:
 - ◆ Lab results
 - ◆ Medications
 - ◆ Imaging
 - ◆ Diagnoses, Procedures
 - ◆ Population reporting

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Reasons to Support Electronic Information

- Reduces the cost of data collection/reporting for providers/practitioners
 - ◆ QI
 - ◆ Research
- Standardizes data specifications
- Supports process changes leading to substantial improvements in care

Pull Strategies

■ Incentives

- ◆ Coordinated purchaser initiatives - Leapfrog, etc
- ◆ Payment demonstrations
- ◆ Consumer information/public reporting

■ Technical assistance

- ◆ Make public domain systems available
- ◆ Create initiatives which support learning and sharing about systems adoption and process improvement

Research

- www.cms.gov/data/default.asp
 - ◆ De-identified claims by provider type
 - ◆ Identified claims, enrollment, MDS, OASIS
- ResDAC – free assistance on accessing and using Medicare/Medicaid data
 - ◆ Workshops
 - ◆ Telephone consultation
 - ◆ www.resdac.umn.edu
- QIO – in process of developing ability to offer de-identified QIO data linked to claims data sets