QUESTION AND ANSWER SESSION
HOW TO SUBMIT OR ASK QUESTIONS FOR THE PANEL MEMBERS?

• Submit or Ask Questions
• Submit your text question and comments using the Question Panel
• Please raise your hand to be unmuted for verbal questions.
CMS PROMOTING INTEROPERABILITY RULE UPDATES

September 12, 2019
3:00 – 4:00 p.m. ET
2020 Hospital Inpatient Prospective Payment System and Long-Term Acute Care Hospital Final Rule Update: Medicare Promoting Interoperability Program

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Division of Health Information Technology, CMS
2020 IPPS AND LTCH FINAL RULE: MEDICARE PROMOTING INTEROPERABILITY PROGRAM

- The 2020 Hospital Inpatient Prospective Payment System (IPPS) and Long-Term Acute Care Hospital (LTCH) Final Rule for the Medicare Promoting Interoperability Program was released on August 2, 2019.

- The final rule (CMS-1716) is available for review on the Federal Register.
MEDICARE PROMOTING INTEROPERABILITY PROGRAM: CURRENT REQUIREMENTS
MEDICARE PROMOTING INTEROPERABILITY PROGRAM REQUIREMENTS

- Performance-based scoring methodology that requires a minimum total score of 50 points to be considered a meaningful EHR user

- Mandatory use of 2015 Edition CEHRT

- An EHR reporting period for new and returning participants is a minimum of any continuous 90-day period

- Submit a “yes” to the Prevention of Information Blocking Attestation

- Submit a “yes” for the Security Risk Analysis measure
MEDICARE PROMOTING INTEROPERABILITY PROGRAM: FINAL CHANGES FOR CY 2020
2019 VS 2020 EHR REPORTING PERIOD

2019 EHR Reporting Period

• Required to report a minimum of any continuous 90-day period between January 1-December 31, 2019

2020 EHR Reporting Period

• Same requirements as 2019
2019 VS 2020 OBJECTIVES AND MEASURES

2019 Objectives and Measures

• Query of PDMP
  o Optional
  o Up to 5 bonus points
  o Yes/No attestation

• Verify Opioid Treatment Agreement
  o Optional
  o Up to 5 bonus points
  o Will remain optional in 2020
  o Numerator/Denominator

2020 Objective and Measure Modifications

• Query of PDMP
  o Will remain optional in 2020
  o 5 bonus points
  o Yes/No attestation (retroactive for 2019)

• Verify Opioid Treatment Agreement
  o Will be removed beginning in 2020
2019 VS 2020 CQM CHANGES

2019 CQM Requirements

• No changes to the CQM requirements in CY 2019

2020 CQM Requirements

• Reducing the number of CQMs available from 16 to 8
• Reporting period is one, self-selected calendar quarter
BRIEF NOTES: PUBLIC HEALTH AND CLINICAL DATA EXCHANGE OBJECTIVE

• Reminder that the objective is still scored by reporting a Yes/No attestation on any 2 of the 6 measures available (for up to 10 points):
  • Syndromic Surveillance Reporting
  • Immunization Registry Reporting
  • Electronic Case Reporting
  • Public Health Registry
  • Clinical Data Registry Reporting
  • Electronic Reportable Laboratory Result Reporting

• All 6 still have Exclusions available and, if claimed, points redistribution is as follows:
  • If one exclusion is claimed, but one measure is attested to, the 10 points will be granted for the Public Health and Clinical Data Exchange objective.
  • If two exclusions are claimed, then the 10 points will be redistributed to the Provide Patients Electronic Access to their Health Information measure.
ADDITIONAL RESOURCES

For more information to changes to the Medicare Promoting Interoperability Program:

• Review fact sheet on final rule (CMS-1716)
• View final rule CY 2020 (CMS-1716) on Federal Register (pg. 42592)
• Visit CMS website or view the current 2019 IPPS Medicare Promoting Interoperability Program Objectives Specification Sheets

For more information on the QPP/MIPS Promoting Interoperability performance category:

• CY 2019 PFS Final Rule on Federal Register (pg. 59798)
• CY 2020 PFS Proposed Rule on Federal Register (pg. 40766)