

The quarterly newsletter of the CMS Office of Burden Reduction and Health Informatics

Director's Message

Dear Partners and Colleagues,

Welcome to CMS' Fall Burden Reduction Newsletter.

On November 15, CMS will be holding the 2023 CMS Conference on Optimizing Healthcare Delivery to Improve Patient Lives — a virtual event that will focus on opportunities across the healthcare enterprise to reduce administrative burden, strengthen access to quality care, and make it easier for clinicians to provide that care. Attendees will hear from expert panels and dynamic guest speakers from inside and outside of government who will share their ideas, strategies, lessons learned, and success stories.

I invite you to register now for what will be a vibrant exchange of ideas and a unique opportunity to meet and hear from your peers.

Below you will find links to access video presentations and materials from July's CMS HL7® FHIR® CONNECTATHON, information on the October 18th Enabling Patient Access to Health Data for Actionable Results event, and recently released guidance on National Provider Identifier (NPI) Enumeration. You will also find two

illustrations from CMS' Accountable Care Organization (ACO) Human-Centered Design Customer Engagement that provide a closer look at the human experience of ACO participants, and the barriers associated with reporting Clinical Quality Measures.

On a personal note, I will be retiring from federal service as of the end of September. I have enjoyed my time at CMS and establishing the Office of Burden Reduction and Health Informatics. It has been an honor to have served as Director, and to have worked with so many passionate and vibrant professionals inside and outside government dedicated to improving the delivery of healthcare. I believe the challenge of reducing burden, so that clinicians have more time to deliver high quality patient-focused care, is a challenge that's best addressed by working together. It has been a true pleasure to see a growing community of talented and dedicated professionals working on this. Stace Mandl, currently the Deputy Director of OBRHI, will step in as the office's Acting Director.

Thank you again for all of the passion and energy you bring to your work. CMS will continue to bring you the latest information and updates on efforts to improve healthcare delivery processes through this newsletter, our website, and other channels. We look forward to connecting with you on November 15th and hope you will join us!

Sincerely, Mary

Mary Greene, MD Director CMS Office of Burden Reduction & Health Informatics (OBRHI)



Register now for November 15!

This is a reminder to join us on **November 15** for the virtual 2023 CMS Conference on Optimizing Healthcare Delivery to Improve Patient Lives!

This event will convene leadership from the federal government, health provider organizations, and the patient advocacy community to focus on opportunities across the healthcare enterprise to reduce administrative burden, strengthen access to quality care, and make it easier for clinicians to provide that care.

After registering, your confirmation will come from CMSBurdenReductionConference@rippleeffect.com. If you do not see it in your primary inbox, please check your spam/junk folder.

For questions regarding the event or registration, please email CMSBurdenReductionConference@rippleeffect.com



CMS HL7® FHIR® CONNECTATHON Slides and Recordings

As part of its broader commitment to promoting interoperability, officials and subject matter experts from across CMS participated in education sessions at the 4th annual CMS HL7® FHIR® Connectathon, a virtual event held on July 18 – 20. During these sessions, CMS representatives provided federal health IT policy updates, and discussed the strategic initiatives their offices are focused on to enhance interoperability on a national scale. A recording of each session can be found below.

FHIR-ing Forward: CMS' Journey to Interoperability

- View Recording
- View Slides

Center for Clinical Standards and Quality Policy Update

- View Recording
- View Slides

Center for Medicare and Medicaid Innovation Policy Update

- View Recording
- View Slides

Emerging Innovation Group update on Medicare Fee for Service Requirements Modernization

- View Recording
- View Slides

State Medicaid Agency Interoperability Endpoint Directory

- View Recording
- View Slides

Blue Button 2.0 API update

- View Recording
- View Slides

CMS Update on Advanced Explanation of Benefits (AEOB) Rulemaking and Implementation

- View Recording
- View Slides

SDOH Data Update from the CMS Office of Minority Health

- View Recording
- View Slides

Demo of Measure Calculation Tool Prototype for CMS Digital Quality Measurement

• View Recording

Enabling Patient Access to Health Data for Actionable Results — October 18

Wednesday, October 18, 2023 from Noon-5pm

Register Now for the **Enabling Patient Access to Health Data for Actionable Results** virtual event.

Recent Department of Health and Human Services (HHS) policy is bringing patients unprecedented access to their health information. Join the Centers for Medicare and Medicaid Services (CMS) and the Office of the National Coordinator for Health Information Technology (ONC) for a virtual event focused on patient access to their health data. This event will bring together patients, providers, payers, and health IT developers to discuss how HHS policies are working in practice and how to maximize the impact of these policies. The event will also highlight educational tools and resources, such as patient-facing apps that enable the availability of patient information and make the health information easier to understand.

Attend the ONC and CMS patient access event to hear more about:

- Patients' experiences accessing their data, including the benefits and challenges they faced along this journey.
- How the next generation of apps are connecting across new health information sources to bring together patients' data and preferred tools to act on that data.
- Clinicians who are at the forefront of helping patients access and understand their data, recognizing patient preferences and privacy concerns.
- Innovative developers demonstrating how they are making patients' data actionable, and the implementation challenges they face as they connect sources across the care continuum
- Health care payers' successes and challenges with making data available to patients.

Don't miss this opportunity to learn about the latest developments in patient data access and how you can be a part of the path forward.

Click here for more information on the event and to register.





Guidance on National Provider Identifier (NPI) Enumeration; 45 Code of Federal Regulations (CFR) § 162.412(b)

The Office of Burden Reduction and Health Informatics (OBRHI) National Standards Group (NSG), on behalf of the Department of Health and Human Services, has issued a guidance letter to clarify that HIPAA *does not* preclude a health plan from requiring that a subpart of an organization provider obtain a unique NPI as a condition of enrollment with the plan.

NPIs are used to enumerate individuals and organizations that qualify as health care providers under the Health Insurance and Portability and Accountability Act of 1996 (HIPAA). Many health care providers are organization health care providers, which are made up of components and/or separate physical locations. The components and separate physical locations of organization health care providers are referred to as "subparts."

Should a subpart already have its own unique NPI, 45 CFR § 162.412(b) prohibits a health plan from requiring the subpart to obtain an additional NPI. It does not, however, prevent a health plan from requiring that a subpart that does not have a unique NPI obtain a unique NPI as a condition of enrollment with the health plan.

Should you have questions about this guidance, send inquiries to *AdministrativeSimplification@cms.hhs.gov* with the subject line: "NPI Enumeration."

Accountable Care Organization (ACO) Human-Centered Design Customer Engagement

As part of CMS' commitment to engaging the partners and the communities it serves, CMS recently released two illustrations representing insights from customers gained from our Accountable Care Organization (ACO) Human-Centered Design Customer Engagement. This engagement focused on identifying the human experience of ACO participants and other stakeholders by understanding barriers when reporting aggregate electronic Clinical Quality Measures (eCQMs) and Meritbased Incentive Payment System (MIPS) CQMs.

The ACO Customer Engagement supports and informs the development and direction of the CMS Quality Payment Program (QPP) Strategy. CMS is working to address barriers and reduce the burden ACOs face when reporting Clinical Quality Measures.

