

THE WASHINGTON DEBRIEF

CHIME PUBLIC POLICY
WORKING FOR YOU

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The Washington Debrief provides CHIME members weekly news and information related to important healthcare IT legislative, regulatory and political developments in Washington, D.C.

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Congressional Affairs

Oversight Committee Evaluates Opportunities to Advance Health IT

Key Takeaway: Congressional interest in health IT continues to grow as evidenced by [last week's hearing](#) by the House Oversight & Government Reform Committee.

Why it Matters: The [House Committee on Oversight and Government Reform](#) is the latest committee to dig into health information technology and interoperability. Among other things, committee members cited the lack of coordination among state and federal regulators and inconsistencies in the regulatory framework as top priorities for discussion during the hearing.

The subcommittees on Information Technology and Health Care, Benefits, and Administrative Rules heard from a panel of witnesses including the administration's top health IT official, [Karen DeSalvo, M.D.](#), national coordinator for health information technology and acting assistant secretary for health at the Department of Health and Human Services.

Committee members pointed to the likelihood that federal health privacy laws are hindering innovation and progress in health IT adoption. Lawmakers asked the witnesses how federal laws could be altered to improve consumer privacy and technology innovation.

Notably, DeSalvo asked lawmakers to grant the ONC authority to investigate instances of data blocking, per the agency's FY17 budget request. Similarly, [Jessica Rich](#), director of the bureau of consumer protection at the Federal Trade Commission (FTC), requested her agency be given new authority to fine organizations for data security and breach notice violations.

WORKING FOR YOU IN WASHINGTON



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Thoughts, Questions or Comments? Please contact [Leslie](#) or [Mari](#)

Federal Affairs

AHIMA Launches Pledge to Remove Patient ID Ban

Key Takeaway: Last week, the chorus of pleas to advance the conversation on the need for a national patient identification solution grew with a public petition, [MyHealthID](#), to the White House led by the American Health Information Management Association (AHIMA).

Why it Matters: The petition, [MyHealthID](#), open for signatures through April 19, calls for lifting the "federal budget ban that prohibits the U.S. Department of Health and Human Services from participating in efforts to find a patient identification solution."

Removing legislative language prohibiting HHS from moving forward with a national solution for patient identification is a top priority for CHIME. The existence of the ban, and the gradual, but slow progress being made on Capitol Hill, was the impetus for [the CHIME Healthcare Innovation Trust's National Patient ID Challenge](#), which launched on January 19, 2016.

AHRQ Money on the Table

Key Takeaway: The Agency for Healthcare Research and Quality is issuing hundreds of thousands of dollars in [grant money](#) to study health IT.

Why it Matters: "There is a need for improved approaches to health IT system design, usability, and implementation; to understand how users interact with the systems; to carefully monitor the systems' use and performance post-implementation; and to understand how to address causes of errors. In addition, many have called for the use of user-centered design, and human factors and ergonomics, sociotechnical systems theory, human-computer engineering, usability engineering, and other related frameworks and approaches to improve health IT safety," AHRQ stated. In describing the grants, AHRQ stated that it is "interested in funding applications that will conduct research on safe health IT practices specifically related to the design, implementation, usability, and safe use of health IT by all users, including patients. These projects would generate new evidence on safe health IT practices that could be used by the Office of the National Coordinator for Health IT, the Food and Drug Administration, the Centers for Medicare and Medicaid Services and others to inform health IT certification and other forms of policy guidance." Certain projects, "should include personnel from health IT vendors and health care delivery organizations in the project personnel."

Get the 411 on Becoming a Medicare Shared Savings ACO

Key Takeaway: May 2-31 is open to providers to file a notice of intent to apply to become a Medicare Shared Savings ACO.

Why it Matters: Whether your organization interested is already a Shared Savings ACO, is planning on filing to become one, or you just want to learn more, CMS is hosting a call on April 5 from 1:30-3pm ET. To register to listen go to [MLN Connects Event Registration](#). Space may be limited, register early. During this call, CMS will provide information on what you can do to prepare for the Medicare Shared Savings Program application process for the January 1, 2017, program start date. For more information go to the [Shared Savings Program Application](#) webpage prior to the call.

HIPAA Audits on the Way

Key Takeaway: The Office for Civil Rights has started the second phase of [HIPAA audits](#).

Why it Matters: OCR states, "In its 2016 Phase 2 HIPAA Audit Program, OCR will review the policies and procedures adopted and employed by covered entities and their business associates to meet selected standards and implementation specifications of the Privacy, Security, and Breach Notification Rules. These audits will primarily be desk audits, although some on-site audits will be conducted." The audits will begin with the verification of an entity's address and contact information. Organizations affected by this can expect to get emails from OCR and are expected to respond in a timely manner. Keep an eye out for ones that come from [OSOCRAudit@hhs.gov](#). Click [here](#) to view a sample email letter. Any HIPAA covered entity is eligible to be audited. OCR will start with desk audits; there will be some in person audits but fewer than there were in Phase 1.

HHS Needs your Input on Cybersecurity!

Key Takeaway: Harris Health System, which was awarded the first HHS cybersecurity grant in late 2015, is surveying providers on the topic to better inform HHS policy.

Why it Matters: The grant is extended under an executive order signed in February by President Barack Obama to encourage the development of information sharing and analysis organizations (ISAOs). [The survey](#) results are intended to help identify the cybersecurity information needs and gaps of hospitals and other healthcare organizations across the country, to better fend off cyber threats. In order to be a part of this nation effort please use the below link to the latest and greatest version of the survey. The survey itself is entirely anonymous, but feel free to include you organization name and contact information if you would like to be mentioned in the final report. You can learn more about the HHS grant and Harris Health's role as the designee [here](#). If you have any questions or would like to provide additional feedback outside of the survey, please email [Information_Security@harrishealth.org](#)