Key Ingredients

• **ONC Regulatory Provisions**
  
  » Base EHR Definition
  
  » Common Clinical Data Set (CCDS)
  
  » API certification criteria
  
  » Certified Health IT Product List (CHPL)

• **CMS Regulatory Provisions**

  » CMS Payment programs
    
    – Meaningful Use “Stage 3” for Eligible Hospitals/Medicaid
    
    – Merit-based Incentive Payment System (MIPS) for eligible clinicians

  » Certified EHR Technology Definition
ONC Regulatory Provisions (1) – Base EHR Definition

- Required by law (HITECH Act refers to it as “Qualified EHR”)
- ONC links specific certification criteria to functionality that is described in HITECH definition
- 2015 Edition Base EHR means an electronic record of health-related information on an individual that:
  - (1) Includes patient demographic and clinical health information, such as medical history and problem lists;
  - (2) Has the capacity:
    - (i) To provide clinical decision support;
    - (ii) To support physician order entry;
    - (iii) To capture and query information relevant to health care quality;
    - (iv) To exchange electronic health information with, and integrate such information from other sources; and
  - (3) Has been certified to the certification criteria adopted by the Secretary in §170.315(a)(1), (2), or (3); (a)(5) through (9); (a)(11); (a)(14); (b)(1) and (6); (c)(1); (g)(7) through (9); and (h)(1) or (2);
ONC Regulatory Provisions (2) – CCDS

• Replaced the “MU Common Data Set”

• Serves as shorthand (regulatory equivalent of a method/function call in programming)

• Lists 21 data types/categories and (as applicable) terminology/vocabulary bindings
ONC Regulatory Provisions (3) – API Certification Criteria & CHPL

• 45 CFR 170.315(g)(7) through (g)(9) & referenced in the Base EHR definition

• 3 criteria overall – Why are there three?
  
  » (g)(7) – focuses on patient selection/identification/token provision

  » (g)(8) focuses on individual data requests from within all of the data listed in the CCDS

  » (g)(9) focuses on response to request for patient data with a C-CDA response containing the CCDS data

• All three criteria require that the technical documentation associated with them be publicly accessible via hyperlinks, which are also available on ONC’s CHPL website where the product is listed.

  » chpl.healthIT.gov
CMS Regulatory Provisions

• Set the CEHRT definition = Base EHR criteria + CMS prioritized extras

• So what impact does that have?

  » All providers participating in a CMS program that references CEHRT will need to have in their possession health IT with certified API functionality.

    - For general use by the provider

    - In specific to address MU/MIPS measures related to patient access

  » For example, MIPS “Provide Patient Access”

    - For at least one unique patient seen by the MIPS eligible clinician: (1) The patient (or the patient authorized representative) is provided timely access to view online, download, and transmit his or her health information; and (2) The MIPS eligible clinician ensures the patient's health information is available for the patient (or patient-authorized representative) to access using any application of their choice that is configured to meet the technical specifications of the Application Programming Interface (API) in the MIPS eligible clinician's certified EHR technology.
In conclusion

- Investments already made/in the process of to include API functionality in health IT systems

- ONC certification criteria do not mandate FHIR, but are FHIR friendly

- Deployment will pick up pace and be strong in 2017 leading into 2018