

FEDERAL SUPPORT NEEDED FOR PROVIDERS TO BOLSTER CYBERSECURITY

CHIME supports a collaborative approach to improving the cybersecurity posture of our sector including working with the Health Sector Coordinating Council's Cybersecurity Working Group (HSCC CWG), a joint public-private partnership that strives to improve cybersecurity in healthcare settings. Funding from the federal government and establishing federal policies that support cybersecurity as a shared responsibility are needed.

PROTECTING PATIENT DATA

CHIME firmly believes a national privacy law is needed to safeguard health data and protect patient and consumer rights. The proliferation of data sharing – including sensitive and health related information, often without knowledge of data owners and users – makes this a critical issue for all Americans. An increasingly complex regulatory landscape coupled with a patchwork of state laws and the use of artificial intelligence make this issue a priority.

MAINTAINING ACCESS TO TELEHEALTH SERVICES

During the COVID-19 pandemic, the policies around when telehealth could be used to treat Medicare patients were significantly expanded. While providers and the patients they care for can continue to utilize these flexibilities, most will expire at the end of 2024 without Congressional action. CHIME strongly supports the CONNECT for Health Act which makes permanent a majority of the Medicare flexibilities implemented during the COVID-19 PHE including the permanent removal of the geographic and originating sites restrictions, allowing federally qualified health centers and rural health clinics to provide telehealth services, and allowing more eligible health care professionals to utilize telehealth services.

REDUCING PROVIDER BURDEN AND ADMINISTRATIVE COMPLEXITIES

CHIME members are required to comply with a myriad of requirements including regulations under the Health Insurance Portability and Accountability Act (HIPAA), the Health Information Technology for Economic and Clinical Health (HITECH) Act, and the 21st Century Cures Act, to name a few. CHIME supports policies that do not inadvertently create overly duplicative requirements, penalize healthcare providers unfairly, and add burden to an already highly regulated sector.

IMPROVING PATIENT IDENTIFICATION

CHIME supports the removal of the ban on using federal funds to create a unique patient identifier. CHIME also supports the MATCH IT Act which would create an industry standard definition for the term “patient match rate” and would improve standardization of patients’ demographic elements used in certified health IT products to protect patients by ensuring they are accurately matched with their correct medical record.

DATA INTEROPERABILITY

Providers continue to make significant investments that foster interoperability. Collectively, providers have invested billions of dollars over the past decade, and yet there remain significant issues around safe and secure data sharing. Providers such as long-term post-acute care (LTPAC) providers who never received HITECH funding continue to lag in health IT investments and data sharing between acute care providers and LTPAC remains challenged. Further, new financial penalties for those found to be “information blocking” are imminent. To advance health data exchange and achieve true, secure nationwide interoperability any additional federal policies must not add additional workforce and financial burden.

ARTIFICIAL INTELLIGENCE (AI) & EMERGING TECHNOLOGIES

CHIME continues to work with federal policymakers urging them to coordinate with each other and engage with the healthcare sector to ensure that efforts to regulate AI do not stifle innovation, add redundancy, and impose additional burden on providers. While government oversight is needed, excessive regulation can inadvertently impede progress and hinder the development of, and the potential benefit AI can bring to patients, providers, and the healthcare system. Innovative approaches and the use of AI will play a crucial role in addressing the evolving challenges and complexities of the healthcare landscape.