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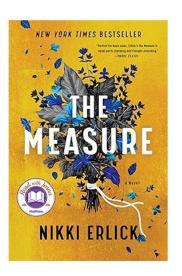


Chelsea:

- Listening to Still Waters by Matt Goldman (one of my favorite authors) on Audible, and just finished reading The Measure by Nikki Erlick (LOVED THIS BOOK)
- Streaming/watching (eagerly awaiting), Season 3 of The Bear (Hulu, June 27)

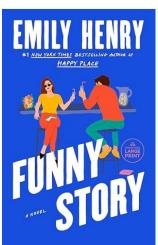
Cassie:

- Watching Season 2 of House of the Dragon (Max)
- Reading soon: Funny Story by Emily Henry









June Resources & Social

- CHIME comments to Centers for Medicare & Medicaid Services (CMS) on the fiscal year (FY) 2025 inpatient prospective payment system (IPPS) rule, here
- Cheat Sheet: 2024 and Beyond Federal Health IT Compliance Deadlines, here
- Cheat Sheet Cybersecurity Incentives and Penalties Under Consideration by Policymakers, here
- Check out (and feel free to like!) our LinkedIn Post here, the Public Policy team
 attended the CyberMed Summit in DC and caught up with our friend, AEHIS member,
 and Summit speaker Nate Couture!
- LinkedIn Post <u>here</u> on a CHIME sponsored Congressional briefing on the MATCH IT
 Act, and special thanks to the amazing Terri Ripley, who is also a member of our Policy
 Steering Committee Member for being a panelist!
- ICYMI a LinkedIn Post, which is a letter to our members here. We appreciate you!



Congressional Update – MATCH IT Act

- CHIME sponsored a Congressional Briefing on June 5th on the MATCH IT Act
- One-pager on the bill
 - Terri Ripley, CIO from OrthoVirginia, represented CHIME as a panelist
 - Goals for briefing?
- Meeting with E&C and Ways and Means offices on the bill
- Current MATCH IT Act cosponsors
 - 4 Rs: Mike Kelly, Blaine Luetkemeyer, David Schweikert, and James Baird
 - 4 Ds: Bill Foster, Eleanor Holmes Norton, Wiley Nickel, and Seth Moulton
- Reps. Kelly and Foster are actively seeking additional co-sponsors for the MATCH IT Act. Your voice matters! If you want to advocate for this vital legislation, reach out to your Member of Congress here.





Congressional Update – Cures 2.0 RFI

- Reps. Diana DeGette (D-CO) and Larry Bucshon (R-IN) issued a request for information (RFI) on additional reforms and follow-up legislation to the 21st Century Cures Act.
- Key questions outlined in the RFI include:
 - o Do the policies included in Cures 2.0 that have advanced through legislation or executive action meet the needs that the original Cures 2.0 bill aimed to address?
 - O What elements might be missing that are essential for further progress?
 - What additional reforms, support mechanisms, or incentives are needed to enhance or improve the effectiveness of the steps already taken, including any structural reform to agencies, offices, or programs involved?
- Responses to this RFI are due by close of business on Friday, Aug. 2, 2024.



Congressional Update – Change Healthcare Breach

- A few notable items following hearings in the House Energy and Commerce Committee and the Senate Finance Committee:
 - UnitedHealth Group (UHG) submitted their written responses following the May 1st <u>hearing</u> in the Senate Finance Committee and can be <u>found here</u>.
 - These are known as "QFRs"
 - June 7th: Senators Maggie Hassan (D-NH) and Marsha Blackburn (R-TN) sent a <u>letter</u> to UHG CEO
 Andrew Witty to urge UHG and its subsidiaries, including Change Healthcare, to immediately notify all
 affected patients and providers, as well as federal and state regulators, about the impact of the ransomware
 attack on Change Healthcare.
 - Senate Finance Chairman Ron Wyden (D-OR) sent letters to HHS on June 5th (<u>link</u>) and the FTC on May 30th (<u>link</u>)
 - The first letter asks HHS to enforce mandatory cybersecurity measures for major healthcare entities
 - The second letter called on the FTC to investigate UHG's "negligent cybersecurity practices"



Federal Update – Change Breach

- CHIME-led stakeholder letter to the Department of Health & Human Services' (HHS) Office for Civil Rights (OCR), here
- OCR updated the Change Healthcare Cybersecurity Incident Frequently Asked Questions (FAQs) page on May 31; you can find the press release here and the FAQs here

The updates address questions OCR has received – including those from CHIME and over 100 other provider stakeholders – concerning who is responsible for performing breach notification to HHS, affected individuals, and where applicable the media

- Updated FAQs state that:
- 1) Covered entities affected by the Change Healthcare breach may delegate to Change Healthcare the tasks of providing the required HIPAA breach notifications on their behalf;
- 2) Only one entity which could be the covered entity itself or Change Healthcare needs to complete breach notifications to affected individuals, HHS, and where applicable the media; and
- 3) If covered entities work with Change Healthcare to perform the required breach notifications in a manner consistent with the HITECH Act and HIPAA Breach Notification Rule, they would not have additional HIPAA breach notification obligations



Federal – IPPS Comment Letter

 Submitted comments on fiscal year (FY) 2025 inpatient prospective payment system proposed rule; you can read them here

Comments on Proposed Changes to the Promoting Interoperability (PI) Performance Program

- Proposal to Change Scoring Methodology Beginning with the EHR Reporting Period in CY 2025
- CHIME strongly opposes raising the minimum threshold scoring threshold to 80 points at this time and recommends a scoring threshold of 70 points
- Clinical Quality Measurement for Eligible Hospitals and CAHs Participating in the Medicare PI Program & Proposal to Adopt eCQMs
 - CHIME is concerned that CMS's ongoing goal to align the eCQM reporting periods and criteria in the Medicare PI Program with the Hospital Inpatient Quality Reporting (IQR) Program is inadvertently causing significant regulatory burden
 - We believe this goal is well-intentioned, in order to reduce the burden of aligning these programs, CHIME requested that CMS adding no more than one new eCQM per reporting period





Federal – IPPS Comment Letter Cont'd...

- Status of Updates to SAFER Guides
 - CHIME applauds CMS for undertaking the update of the Safety Assurance Factors for EHR Resilience (<u>SAFER</u>) Guides; our members remain staunch champions for promoting safety and the safe use of EHRs
 - Without knowing what and how the updates to them will be, we request that CMS
 consider a step-wise approach (i.e., glidepath) before requiring our members to attest to
 the updated versions of Guides
 - At minimum, CMS should provide an additional two-year period without penalty before a review and annual self-assessment of the updated SAFER Guides is required for eligible hospitals and CAHs to attest "yes" to the SAFER Guides measure
 - Eligible hospitals and CAHs have grown familiar and spent millions of dollars and hours to complete the complex process of attesting to each of the nine SAFER Guides; therefore, we recommend that CMS offer flexibility with future attestation requirements as well as an incentive for "early adopters"
 - It is critical that regulations do not inadvertently create overly duplicative requirements, penalize healthcare providers unfairly, and add burden





Federal Update

- White House announcement on initiative with Google & Microsoft to improve security and resilience of rural hospitals, Fact Sheet here & Microsoft press release here
 - The Microsoft Cybersecurity Program for Rural Hospitals in the United States is immediately available; details <u>here</u>
- Upcoming proposed regulations we're watching & waiting for include:
 - Centers for Medicare & Medicaid Services' (CMS) Calendar Year (CY)
 2025 Revisions to Payment Policies Under the Physician Fee Schedule
 (PFS);
 - Regulation that will include the Department of Health and Human Services' Cybersecurity Performance Goals (<u>HHS-CPGs</u>);
 - Office of the National Coordinator for Health IT (ONC) "HTI-2" (Health Data, Technology, and Interoperability: Patient Engagement, Information Sharing, and Public Health Interoperability)



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