Podcasts Entries:

*May 30- New Episode of CMS: Beyond the Policy. The Centers for Medicare & Medicaid Services (CMS) is releasing the latest episode of our podcast, CMS: Beyond the Policy. Today’s edition is titled “CMS Innovation Center: Where we are, How Models are Developed and the Next Steps in Value.” Find the new episode on the CMS Podcast page here: [https://www.cms.gov/podcast](https://www.cms.gov/podcast). You can listen to the podcast here as well as on [Google Play](https://play.google.com/store) and [iTunes](https://itunes.apple.com).

News Releases

*May 24- [HHS Proposes to Revise ACA Section 1557 Rule to Enforce Civil Rights in Healthcare, Conform to Law, and Eliminate Billions in Unnecessary Costs](https://www.cms.gov/Newsroom/Media-Release- Archive/News-Releases). The U.S. Department of Health and Human Services (HHS) proposed regulatory reform related to regulations issued under Section 1557 of the Affordable Care Act (ACA). The proposed rule would maintain vigorous civil rights enforcement on the basis of race, color, national origin, disability, age, and sex, while revising certain provisions of the current Section 1557 rule that a federal court has said is likely unlawful. The proposal also would relieve the American people of approximately $3.6 billion in unnecessary regulatory costs over five years.

*May 28- [CMS Modernizes Care for Frail, Elderly Individuals Enrolled in PACE](https://www.cms.gov/Newsroom/Media-Release-Archive/News-Releases). The Centers for Medicare & Medicaid Services (CMS) finalized a rule to update and modernize requirements for the Programs of All-Inclusive Care for the Elderly (PACE). The PACE program provides comprehensive medical and social services to certain frail, elderly individuals who qualify for nursing home care but, at the time of enrollment, can still live safely in the community. The policies finalized in this rule reflect the latest standards in caring for PACE participants – many of whom are “dually eligible” for both Medicare and Medicaid – and will strengthen patient protections, improve care coordination, and provide administrative flexibilities and regulatory relief for PACE organizations.

report on acute and chronic pain management best practices, calling for a balanced, individualized, patient-centered approach.

Fact Sheets

*May 24- New HHS Fact Sheet on Direct Liability of Business Associates under HIPAA. The HHS Office for Civil Rights (OCR) has issued a new fact sheet that provides a clear compilation of all provisions through which a business associate can be held directly liable for compliance with certain requirements of the HIPAA Privacy, Security, Breach Notification, and Enforcement Rules (“HIPAA Rules”), in accordance with the Health Information Technology for Economic and Clinical Health (HITECH) Act of 2009. In 2013, under the authority granted by the HITECH Act, OCR issued a final rule that, among other things, identified provisions of the HIPAA Rules that apply directly to business associates and for which business associates are directly liable. The new fact sheet may be found at https://www.hhs.gov/hipaa/for-professionals/privacy/guidance/business-associates/index.html along with OCR’s guidance on business associates.

*May 28- Programs of All-Inclusive Care for the Elderly (PACE) Final Rule (CMS-4168-F). The Centers for Medicare & Medicaid Services (CMS) is finalizing a rule to update and modernize the PACE program. This rule—the first major proposed update to the Programs of All-Inclusive Care for the Elderly (PACE) since 2006—reflects updates based upon best practices in caring for frail and elderly individuals.

Upcoming Events and Items of Interest:

*June 4- CMS National Training Program Monthly Update Webinar, 2:30pm-3:30pm ET. This webinar will feature overviews of: Accountable Care Organizations (ACOs) and 2019 National training Program Workshops. Registration is required to attend. Visit our learning management system at CMSnationaltrainingprogram.cms.gov/moodle/course/view.php?id=59 and log in to enroll. Upon registration, you'll receive an email and appointment.

*June 4- Special Open Door Forum: Prior Authorization Process for Certain DMEPOS: Required Prior Authorization of Pressure Reducing Support Surfaces, 2pm-3:30pm ET. The Center for Program Integrity (CPI) will host a Special Open Door Forum (ODF) to invite Durable Medical Equipment, Prosthetics, Orthotics and Supplies (DMEPOS) suppliers, physicians and other Medicare stakeholders to discuss the addition of Pressure Reducing Support Surfaces (PRSS) to the Required Prior Authorization List. This link will take you to our DMEPOS Prior Authorization page where slides will be posted in advance of the ODF: www.go.cms.gov/DMEPOSPA. You can find the Federal Register Notice here. Feedback and questions for the Required Authorization for Pressure Reducing Support Surfaces and other DMEPOS items can be sent to: DMEPOSPA@cms.hhs.gov. We look forward to your participation. To participate dial: 1-800-837-1935 Conference ID: 5960428

*June 7- First Friday Clinician Outreach, Washington, DC. This will be an in-person Q&A with Tom Corry, the CMS Director of the Office of Communications. Mr. Corry wants to meet attendees, share some of his thoughts about the Office of Communications and hear about clinician communications with CMS. It is preferred to attend this meeting in-person at the Hubert Humphrey Building (200 Independence Ave SW Washington, DC 20201). Please RSVP via email with the names of the in-person attendees to partnership@cms.hhs.gov. If you must participate via phone, dial 800-837-1935 Conference ID 1944149. No RSVP is required to participate via phone. For more information please email partnership@cms.hhs.gov