



HIMSS[®]16

Conference & Exhibition

FEB 29 – MAR 4, 2016 | LAS VEGAS

TRANSFORMING
HEALTH THROUGH IT



CMS Person and Family Engagement: Incentivizing Advances that Matter to Consumers March 3, 2016

Jean Moody-Williams, Deputy Director, Center for
Clinical Standards and Quality, CMS

Lance Coss, Program Director, CGC, BFCC-QIO,
Livanta

Jerilyn Crain, K.P. National Patient Advisor So.
Calif. Region/Downey & Cerritos Med. Ctrs.

DISCLAIMER: The views and opinions expressed in this presentation are those of the author and do not necessarily represent official policy or position of HIMSS.

 #HIMSS16

www.himssconference.org

Conflict of Interest

Jean D. Moody-Williams, RN, MPP;
Lance Coss, MS, MEd, and;
Jerilyn Crain

Have no real or apparent conflicts of interest to report.

Speakers for Today's Presentation

- Jean Moody-Williams, Deputy Director, Center for Clinical Standards and Quality, CMS
- Lance Coss, Program Director, CGC, BFCC-QIO, Livanta
- Jerilyn Crain, K.P. National Patient Advisor So. Calif. Region/Downey & Cerritos Med. Ctrs.

Learning Objectives

1. Explore ways to incentivize advances in health IT to reach patients.
2. Discuss application of patient-generated data to drive system change.
3. Examine patients' perspectives on current engagement in healthcare.

Jean Moody-Williams

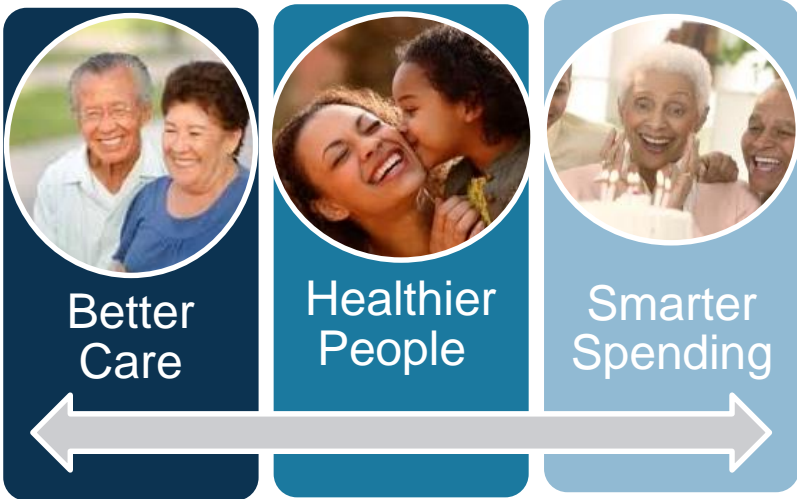
Deputy Director, Center for Clinical Standards and Quality, CMS

Patients at the Center of Care



- Admitted to Hospital – Electronic Health Records
- Hospital Acquired Pressure Ulcer
- Discharged to a Skilled Nursing Facility
- Readmitted within 10 Days
- Drug Reaction Diagnosed
- Discharged to a Skilled Nursing Facility
- Readmitted within 7 Days
- Stage 3 Pressure Ulcer
- Catheter - Urinary Tract Infection
- Continuity of Care
- Central Line
- Discharged to a Skilled Nursing Facility
- Discharged to Hospice Care

CMS Quality Strategy



- Foundational Principles
- Enable Innovation
 - Foster learning organizations
 - Eliminate disparities
 - Strengthen infrastructure and data systems

Goals
• Make care safer
• Strengthen person and family centered care
• Promote effective communications and care coordination
• Promote effective prevention and treatment
• Promote best practices for healthy living
• Make care affordable

What are the levers available to CMS to support Patient and Family Engagement?

- Policy, Programs and Quality Improvement
- Benefit Design, Value and Incentives
- Engagement in Decision Making, Care Coordination, Prevention and Treatment
- Family and Caregiver Support and Engagement



Policy, Programs and Quality Improvement

- CMS Quality Strategy
- Person and Family Engagement Affinity Group
- Measures Development Technical Expert Panels
- Focused Groups/Patients in the Room for Program Development
- Incorporating Public Comments
- Learning and Action Networks



Benefit Design, Value and Incentives

- Weighting of Patient Experience and Patient Reported outcomes in VBP Programs
- Innovations Models (e.g. Medicare Care Choice Models for Palliative Care; Premium design and co-pay innovations)
- Money Follows the Person
- “From Coverage to Care” Activities



EHR: 2009 to Current

2009 State of the World

- Fewer than 20% of physicians and hospitals using basic EHR
- Trivial adoption of value-based purchasing and alternative payment models
- No common standards or functionality of EHRs



HITECH

Today

- 97% of hospitals using EHRs
- 74% of physicians
- 300,000+ professionals received incentive payments
- Nearing 30% goal for APM adoption
- VBP becoming common place for physicians clinicians
- MIPS performance period as soon as 2017

EHR-MU: Policy Drivers

- Rewarding providers for the outcomes technology helps them achieve with their patients.
- Allowing providers the flexibility to customize health IT to their individual practice needs. Technology must be user-centered and support physicians.
- Leveling the technology playing field to promote innovation including for start-ups and new entrants by unlocking electronic health information through open APIs – technology tools that underpin many consumer applications
- Prioritizing interoperability by implementing federally recognized, national interoperability standards and focusing on real-world uses of technology by patients and physicians like ensuring continuity of care during referrals or finding ways for patients to engage in their own care.

MACRA – Merit Based Incentive Program

- Quality of Care
- Electronic Health Records
- Clinical Practice Improvement
- Resource Use

Electronic Health Records for Patient Safety and Quality

- **Comprehensiveness:** EHRs can offer a more complete picture of a patient's health.
- **Speed:** In critical moments, EHRs can provide instant access to a patient's information.
- **Flagging potential conflicts:** EHRs incorporate warning systems to inform clinicians when they order a medication that could interact with another medication a patient is taking.
- **Verifying medications and dosages:** Similarly, many e-prescribing systems incorporate a verification system to check the barcode on a medication against a drug name.
- **Reducing the need to repeat risky tests and procedures:** All medical tests and procedures—even those that are safe—carry risk. A comprehensive EHR can reduce that risk.

Engagement in Decision-making, Care Coordination, Prevention and Treatment

- CMS Compare Sites
- Early Elective Delivery Reduction Initiative
- Every person with Diabetes Counts
- Transforming Clinical Practice Initiative
- Use of Decisions Support Tools in HIT
- Eliminating Barriers to Sharing Information



Family and Caregiver Support and Engagement

- Families in the Room opportunities
- Learning and Action Network Participation
- Respite Programs
- Medicaid Family Counseling Programs
- Caregiver resources on Medicare.gov



CMS Affinity Groups

CMS established Quality Affinity Groups to facilitate alignment and coordination across the agency on topics that crosses multiple components.



Lance Coss

Program Director, CGC, BFCC-QIO, Livanta

Beneficiary and Family Centered Care Quality Improvement Organization (BFCC-QIO)

Activities:

- Toll-Free Beneficiary HelpLine
- Beneficiary Complaint/Quality of Care Review Program
- Immediate Advocacy
- Sanctions
- Emergency Treatment and Active Labor Act (EMTALA) Investigations
- Notices of Non-Coverage Expedited Appeals Review
- Discharge/ Termination of Service Appeals
- Medicare Administrative Program Compliance
- Hospital Coding and Billing Payment Validation
- Medical Necessity and Utilization Review
- Higher-Weighted DRG Review
- Redetermination Reviews (*a.k.a. 2 Midnight Rule*)
- Patient and Family Engagement
- Medicare Outreach

Jerilyn Crain

K.P. National Patient Advisor So. Calif. Region/Downey & Cerritos Med. Ctrs.







Incentives for Health IT Engagement

- 24/7 Online access to view test results, medical records, emailing your provider, and order prescriptions online.
- Check in kiosks can be used to check in when lines to the reception areas are long.
- Resources are available in multiple languages.

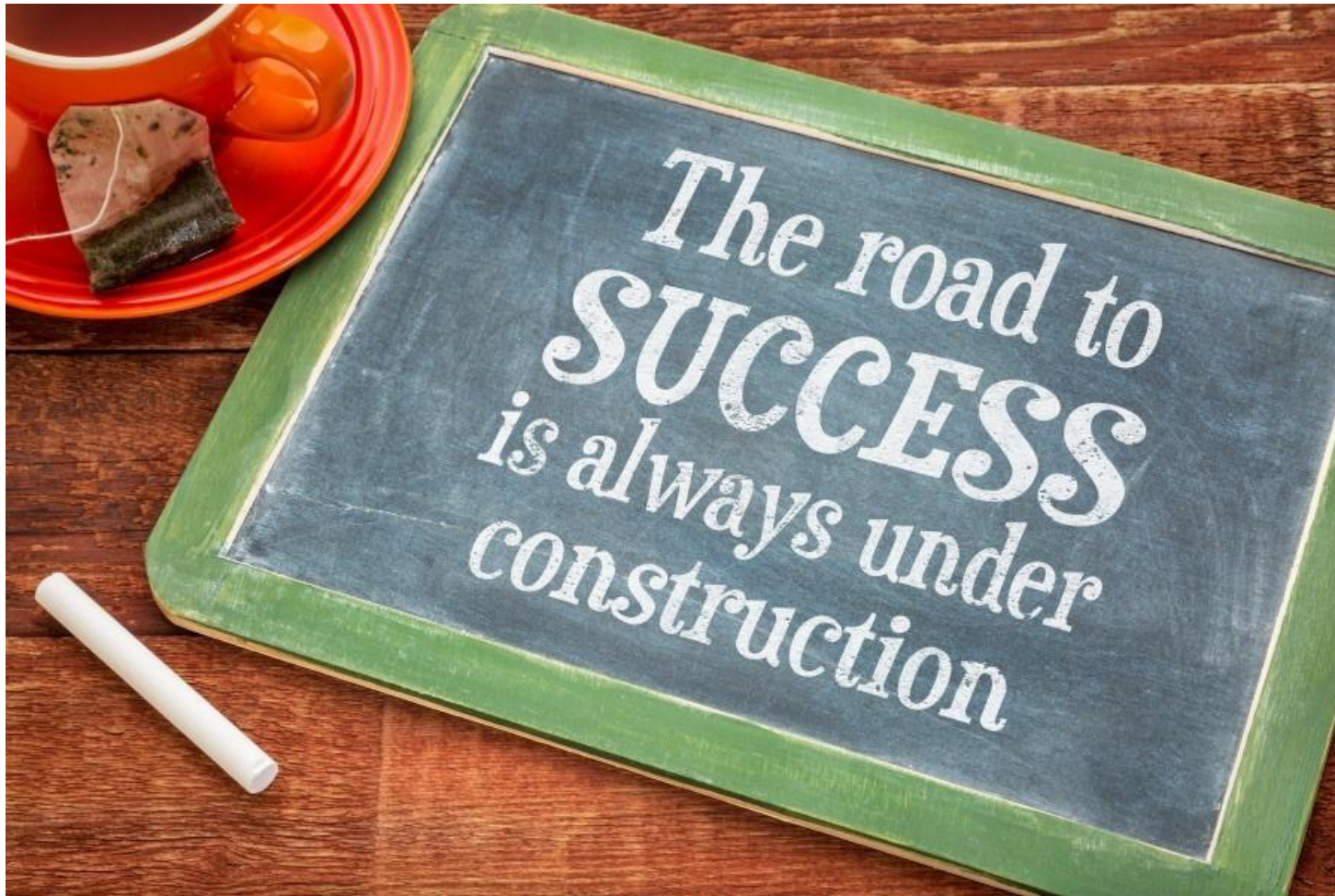
Want to Dream IT Features

- Out of State Access
- Tele Health
- Convenience of sending your provider pictures of your wounds/injuries.

Patient/Healthcare Provider Relationship



The Road to Success...



Thank You

Questions?