Medicare Fee for Service (FFS) Documentation Requirement Lookup Service (DRLS) Prototype

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Special Open Door Forum
June 25, 2020
2:00 – 3:00 PM EDT
Introductions

Speakers

• **Connie Leonard, Acting Director**
  Provider Compliance Group (PCG), Center for Program Integrity (CPI), Centers for Medicare & Medicaid Services (CMS)

• **Ashley Stedding, DRLS Government Task Lead**
  PCG, CPI, CMS

• **Larry Decelles, DRLS Project Technical Lead**
  MITRE, operator of the CMS Alliance to Modernize Healthcare (Health Federally Funded Research and Development Center or Health FFRDC)

• **Robert Dieterle, DRLS Project Technical Advisor**
  Health FFRDC

Additional Resources

• **Nalini Ambrose, DRLS Project Lead**
  MITRE, operator of the Health FFRDC
Agenda

• Medicare Fee for Service (FFS) Documentation Requirement Lookup Service (DRLS) Prototype Review

• DRLS Current Status

• DRLS Next Steps

• DRLS Resources and Links

• Question and Answer Session
Medicare FFS
DRLS Prototype Review
Why is CMS Interested in DRLS?

• What we heard from providers and clinicians ...

  Documentation requirements are too hard to find!

  "From a physician standpoint, I want to know what I need to do while the patient is here."

• What we are aiming for ...

| The American Medical Association: Prior Authorization and Utilization Management Reform Principles | “Utilization review entities should publicly disclose, in a searchable electronic format, patient-specific utilization management requirements, including prior authorization, applied to individual drugs and medical services. Additionally, utilization review entities should clearly communicate to prescribing/ordering providers what supporting documentation is needed to complete every prior authorization and step therapy override request.” |
This contributes to:

- Clinician burden/burnout
- CMS burden and rework
- Inconsistent requirements
- Delayed services to beneficiaries
- Errors in claims processing
- Increased improper payments
- Barriers to interoperability
- Customer dissatisfaction
What is DRLS?

The Medicare FFS DRLS prototype is software that will allow healthcare providers to discover prior authorization and documentation requirements at the time of service in their electronic health record (EHR) or integrated practice management system through electronic data exchange with a payer system.

DRLS Objectives

- Reduce Provider Burden
- Improve Provider-to-Payer Information Exchange
- Reduce Improper Payments and Appeals
HL7 Da Vinci Project

• Convened by Health Level 7 International (HL7), a healthcare standards developing organization

• Da Vinci is an industry-led effort to:
  – Establish a rapid multi-stakeholder process to identify and implement critical use cases for the exchange of information between payers and providers
  – Minimize the development and deployment of unique solutions
  – Focus on reference architectures that will promote industry-wide standards and adoption

**Coverage Requirements Discovery (CRD):** The provider EHR asks the payer system if there are documentation and/or prior authorization (PA) requirements, receiving a “yes” or “no” response.

**Documentation Templates and Rules (DTR):** The EHR requests and receives documents and rules from the payer system.

From [https://confluence.hl7.org/display/DVP/Da+Vinci+Use+Cases](https://confluence.hl7.org/display/DVP/Da+Vinci+Use+Cases) updated March 17, 2020
Clinician assesses a patient and determines the need for an item or service.

**Clinician/Staff** initiates DRLS with entry into EHR to identify if Medicare FFS/Payer coverage or PA documentation is required.

If coverage or PA documentation is required, DRLS returns “Yes,” stating what is required and providing a link to request required documentation.

When clicked, DRLS retrieves required rules and the EHR extracts existing patient data.

Clinician/staff manually enters any missing information and completes the documentation.
DRLS Current Status
<table>
<thead>
<tr>
<th>Implementation Guide (IG)</th>
<th>Reference Implementation (RI)</th>
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<tbody>
<tr>
<td><strong>Document that identifies &amp; summarizes requirements for an implementation plan</strong></td>
<td><strong>Standard for developing all other implementations and customizations</strong></td>
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- **CRD IG current state**
  - Next ballot TBD
  - Target completion 2021
  - [http://build.fhir.org/ig/HL7/davinci-crd/](http://build.fhir.org/ig/HL7/davinci-crd/)

- **Completed developing DTR IG**
  - Completed two ballots (2019, 2020)
  - Next ballot TBD
  - Target completion 2021
  - [http://build.fhir.org/ig/HL7/davinci-dtr/](http://build.fhir.org/ig/HL7/davinci-dtr/)

- **Continuing to enhance both the CRD and DTR RIs**
  - Target completion for CRD 2021
  - Target completion for DTR 2021

- **RI source code site:**
  - CRD RI: [https://github.com/HL7-DaVinci/CRD](https://github.com/HL7-DaVinci/CRD)
  - DTR RI: [https://github.com/HL7-DaVinci/DTR](https://github.com/HL7-DaVinci/DTR)
1. **Point-to-Point**: a single provider uses DRLS to show that the EHR (with patient test data) can 1) confirm the need for coverage documentation, 2) request specific requirements and rules from the payer’s system, and 3) receive appropriate responses from the payer’s system.

2. **Multipayer**: a single provider uses DRLS to communicate with more than one healthcare payer.

3. **Provider Acceptance and EHR Testing**: a provider determines whether DRLS fits into the workflow, reduces burden, and delivers the information needed.
DRLS Prototype Status

PROGRESS MADE

• Pilot tested/demonstrated the DRLS prototype at Connectathons (three in-person and one virtual) and via remote interactions from September 2019 through May 2020
  – DTR correctly showed interoperability with other systems once versions and technologies aligned
  – DRLS supported some older versions of key technologies (e.g., FHIR)
  – DRLS showed interoperability with CQL

• Continuing to collaborate with healthcare providers and clinicians, EHR vendors, and other payers
• Successfully tested the CRD use case; continuing to test the DTR use case to make ongoing improvements
DRLS Pilot Testing Experience

LESSONS LEARNED

• Most EHR vendors are still developing the functionality required for DRLS

• Healthcare providers and clinicians are demonstrating interest in pilot testing DRLS, but need to have the necessary staff and IT resources to participate

  ▪ DRLS prototype pilot testing with healthcare providers remains critical to development
    – Vetting prototype in EHR vendor’s developer sandbox can alleviate provider concerns, even for piloting in test environments
    – Individual instances of deployed EHR can differ significantly from the EHR vendor’s own developer sandbox
# Provider/EHR Checklist for Pilot Participation

<table>
<thead>
<tr>
<th>Healthcare Provider</th>
<th>EHR Vendor</th>
<th>Required Responsibilities</th>
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<tbody>
<tr>
<td>✓</td>
<td>✓</td>
<td>Offers care to Medicare FFS patients involving items and services in current rule sets</td>
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<tr>
<td>✓</td>
<td>✓</td>
<td>Has an electronic health record (EHR) system that:</td>
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<tr>
<td></td>
<td></td>
<td>• Supports CDS Hooks, the HL7 CRD IG, the HL7 DTR IG, SMART on FHIR, and FHIR R4 or STU 3</td>
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<td>• Can change workflow, deploy new technologies, create test patients and update vocabularies in a test/staging environment</td>
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<tr>
<td>✓</td>
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<td>Can volunteer:</td>
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<td></td>
<td>• Clinician to place synthetic orders using test data and give feedback</td>
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<td></td>
<td>• IT staff time to troubleshoot integration issues and involve EHR vendor</td>
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<tr>
<td>✓</td>
<td>✓</td>
<td>Will share pilot results and experiences with CMS/CPI and the HL7 Da Vinci Project</td>
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**DRLS Rule Sets for Pilot Testing**

**What are rule sets?**
Specific sets of data requirements for what needs to be documented in the medical record to support coverage for a given item or service.

The DRLS team is developing Medicare FFS rule sets for select topics based on improper payment rates and other factors.

- Home Oxygen Therapy
- Positive Airway Pressure (PAP) Device
- Non-Emergency Ambulance Transport (NEAT)
- Home Blood Glucose Monitor
- Respiratory Assist Device (RAD)
- Ventilators
- Home Health Services
- Immunosuppressive Drugs
- Urological Supplies
- Hospital Beds and Accessories
DRLS Pilot Testing Activities

- Completed DRLS pilot testing at HL7, Da Vinci, and CMS Connectathons, September 2019 through May 2020
  - Pilot tested with CMS, Rush Medical and its instance of Epic, and developed demonstrations of DRLS in ordering home oxygen therapy
  - Engaged with multiple payers, HIT vendors and other industry stakeholders, refining and enhancing the IGs and RIs for CRD and DTR
  - Some attending organizations demoed versions of DRLS based on RIs or observed demos to learn how to integrate DRLS to meet their needs
  - Explored newest versions of Clinical Decision Support (CDS) hooks, Clinical Quality Language (CQL), Value Set Authority Center (VSAC) repository/authoring tools

<table>
<thead>
<tr>
<th>HL7 Connectathon</th>
<th>CMS Connectathon</th>
<th>HL7/Da Vinci Project Connectathon</th>
<th>HL7 Virtual Connectathon</th>
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<tr>
<td>Atlanta</td>
<td>Baltimore</td>
<td>Philadelphia</td>
<td>May 13-15, 2020</td>
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<td>Sep 14-15, 2019</td>
<td>Jan 7-8, 2020</td>
<td>Dec 11-12, 2019</td>
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DRLS Outreach and Education Forums

• **DRLS Stakeholder Leadership Group (SLG)**
  – 50+ members from state and federal government, commercial payers, healthcare providers, EHR vendors, DME suppliers, and associations
    ▪ Identifies DRLS challenges and provides feedback
    ▪ Builds industry awareness of and buy-in for DRLS
    ▪ Provides input on DRLS prototype and rule set development
    ▪ Supports pilot participation
  – Meets quarterly

• **Smaller DRLS Work Group (WG) conducts focused working sessions**
  – Dives deeper into priority areas and recommends actions
  – Meets monthly
Stakeholder Leadership Group Priorities This Year

Awareness and Adoption

- Prepare stakeholders for DRLS and encourage buy-in

Structuring and Mapping Data/Rules and Asymmetric Documentation

- Structure data rules to allow accurate mapping
- Ensure alignment between the data that providers document in the EHR and the data that payers want in order to make a coverage decision

Workflow and User Experience

- Fit DRLS activities effectively and seamlessly into the clinician’s workflow
DRLS Outreach & Education

• Conference/Event Participation – Distributed DRLS materials:
  – American Medical Informatics Association (AMIA) 2019 Annual Symposium in DC (November 2019)
  – Office of the National Coordinator (ONC) Annual Meeting in DC (January 2020)
  – CMS Quality Conference in Baltimore (February 2020)
  – Healthcare Information and Management Systems Society (HIMSS) 2020 virtual presentation through HL7 Da Vinci (March 2020)
DRLS Next Steps
Continued DRLS Development

• **Standards Development**
  – Continue developing CRD and DTR IGs and RIs through 2021

• **Rule Set Development**
  – Identify, develop, test additional rule sets

• **Pilot Testing**
  – Demonstrate the capability and readiness to deploy DRLS, and pursue end-to-end testing

• **Stakeholder Engagement**
  – Continue to engage stakeholders to drive DRLS awareness and buy-in
DRLS
Resources and Links
Get Involved

Get Involved: Payers, EHR/HIT Vendors, and Providers

Help establish standards: Follow FHIR-based standards efforts (for information on the newest FHIR version R4, visit https://www.hl7.org/fhir/overview.html)

Participate in DRLS pilot testing: Contact CMS at the following email address: MedicareDRLS@cms.hhs.gov

Keep informed on DRLS: Check out the CMS DRLS webpage and continue to attend upcoming CMS SODF events related to DRLS progress: go.cms.gov/MedicareRequirementsLookup

Learn more about the DRLS Stakeholder Leadership Group: Contact drls-work-group@mitre.org

Check into future HL7 Connectathon events and other related forums where DRLS development will continue (http://www.hl7.org/about/davinci/)
Relevant Links and Resources

- **CMS**
  - CMS
  - [go.cms.gov/MedicareRequirements](go.cms.gov/MedicareRequirements)

- **HL7 Da Vinci Project**
  - HL7 Da Vinci Project

- **Fast Healthcare Interoperable Resources (FHIR)**
  - HL7 FHIR DSTU2
  - HL7 FHIR STU3
  - HL7 FHIR R4
  - FHIR at Scale Task Force (FAST)

- **Clinical Quality Language (CQL)**
  - HL7 Clinical Quality Language
  - [https://cql.hl7.org/](https://cql.hl7.org/)

- **CDS Hooks**
  - CDS Hooks

- **Other**
  - HL7 CDS Knowledge Artifact Specification
  - Strategy on Reducing Regulatory and Administrative Burden Relating to the Use of Health IT and EHRs
  - CRD Implementation Guide (IG)
  - CRD Reference Implementation (RI)
  - DTR Implementation Guide (IG)
  - DTR Reference Implementation (RI)
Comments or Questions?

General Comments/Recommendations?

Feedback and suggestions on the Documentation Requirement Lookup Service can be sent to: MedicareDRLS@cms.hhs.gov

For more information, visit: go.cms.gov/MedicareRequirementsLookup