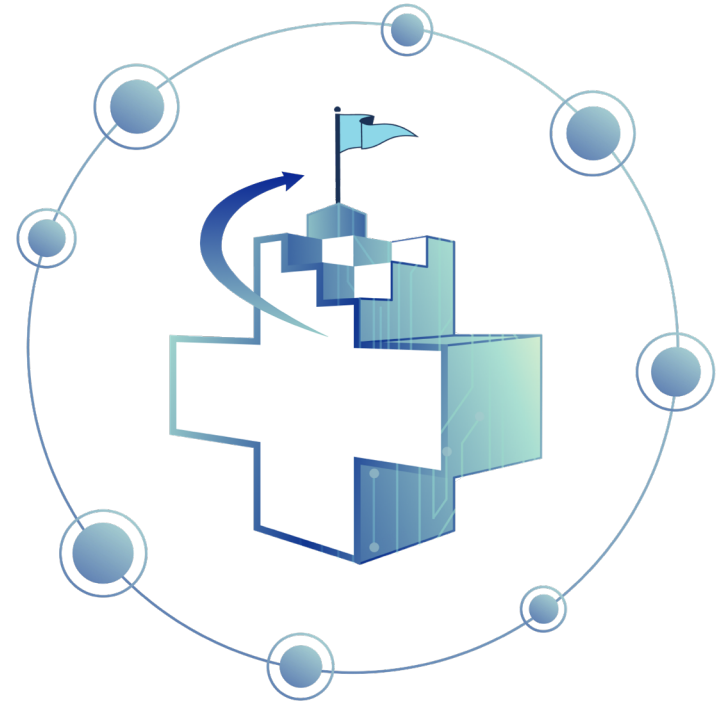# CMS Interoperability and Patient Access Final Rule

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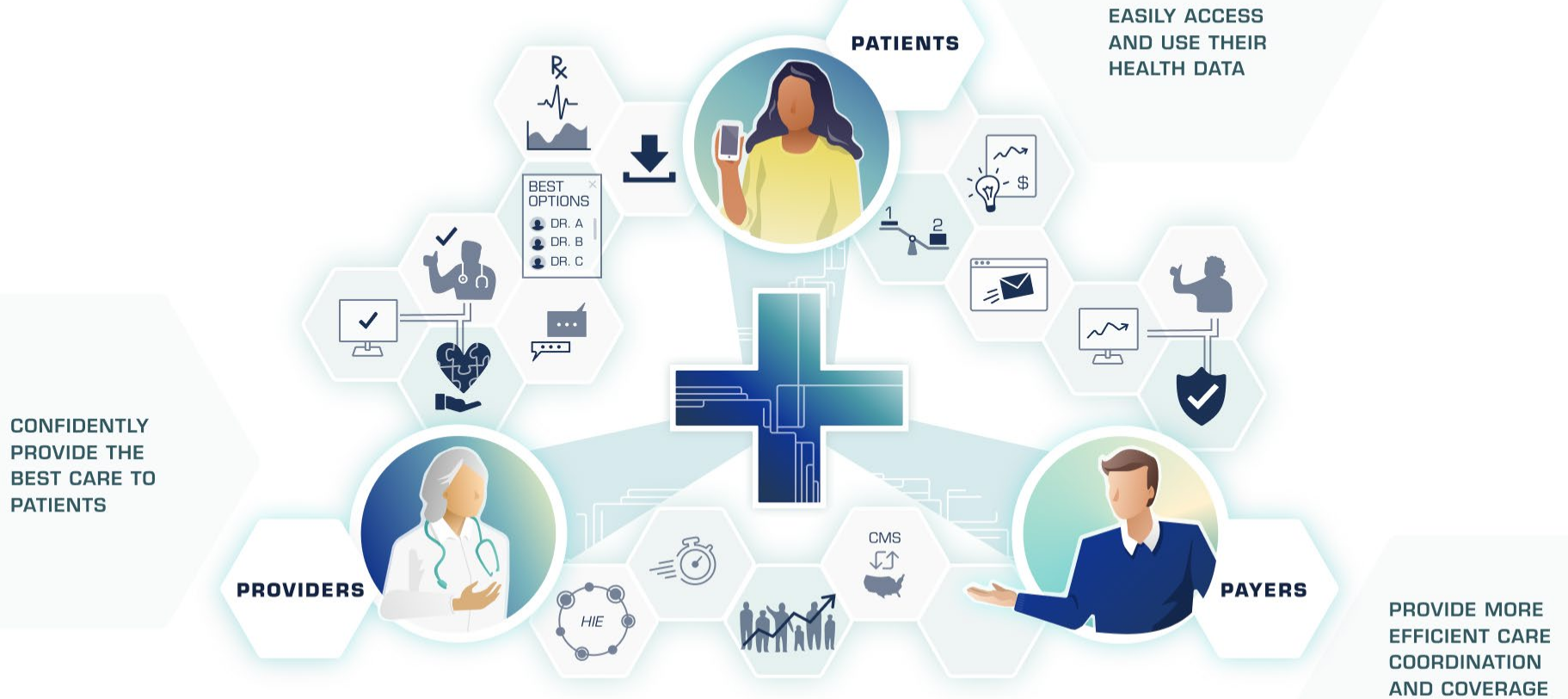
A LACK OF SEAMLESS DATA EXCHANGE IN HEALTH CARE...

PATIENTS

PROVIDERS

PAYERS

leads to disconnected care, worse health outcomes, and higher costs.

INTEROPERABLE HEALTH CARE DATA EXCHANGE...

PATIENTS

EASILY ACCESS AND USE THEIR HEALTH DATA

CONFIDENTLY PROVIDE THE BEST CARE TO PATIENTS

PROVIDERS

PAYERS

PROVIDE MORE EFFICIENT CARE COORDINATION AND COVERAGE

enables coordinated care, improved health outcomes, and reduced cost.

PATIENT ACCESS

Empowering patients by giving them access to their health information so they can make the best informed decisions about their care, all while keeping that information safe and secure.

CONNECTING HEALTHCARE THROUGH DATA EXCHANGE

Driving to value-based care by promoting seamless data exchange across the care continuum.
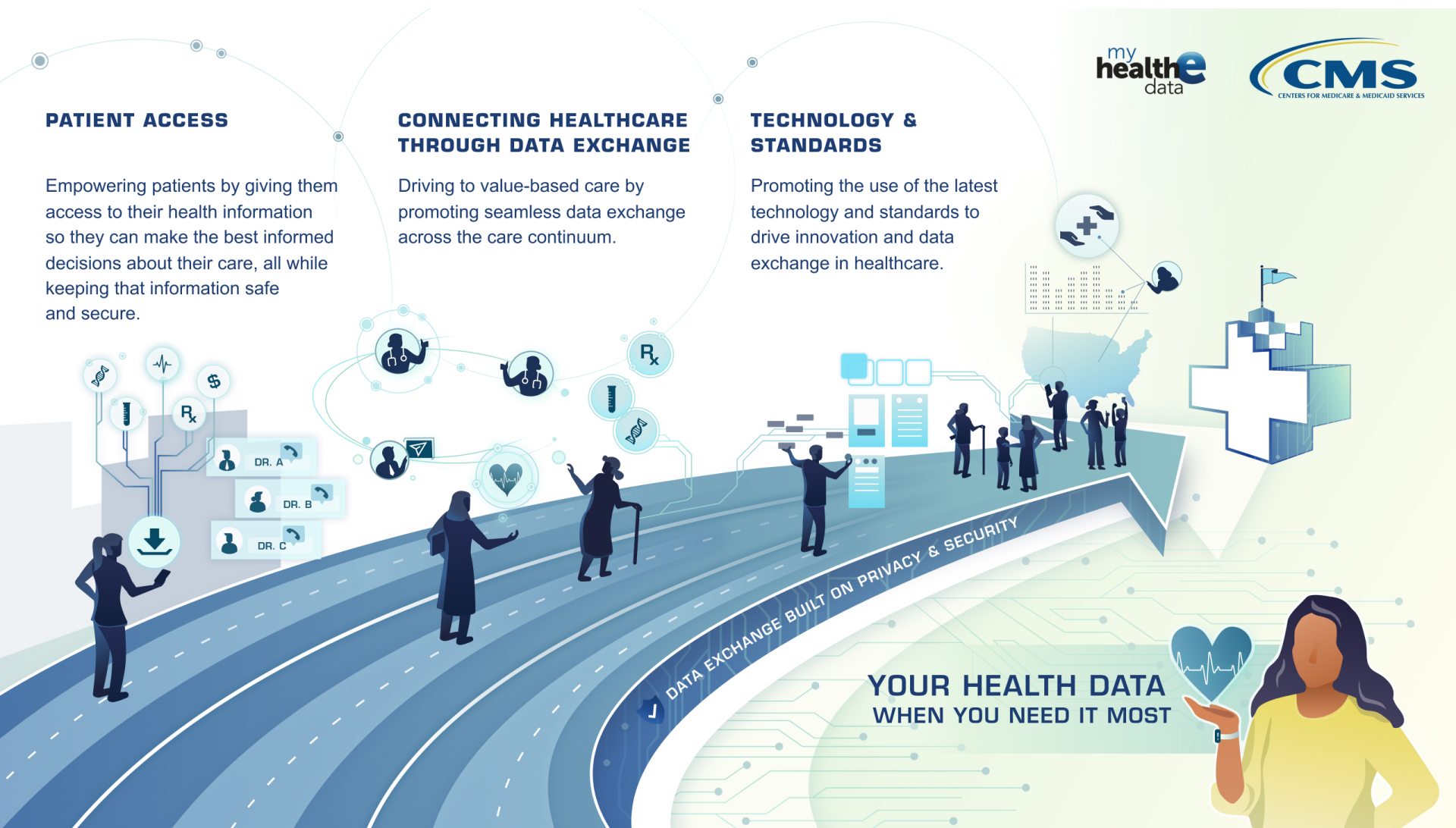
TECHNOLOGY & STANDARDS

Promoting the use of the latest technology and standards to drive innovation and data exchange in healthcare.

my health**e** data

CMS
CENTERS FOR MEDICARE & MEDICAID SERVICES

DR. A
DR. B
DR. C

DATA EXCHANGE BUILT ON PRIVACY & SECURITY

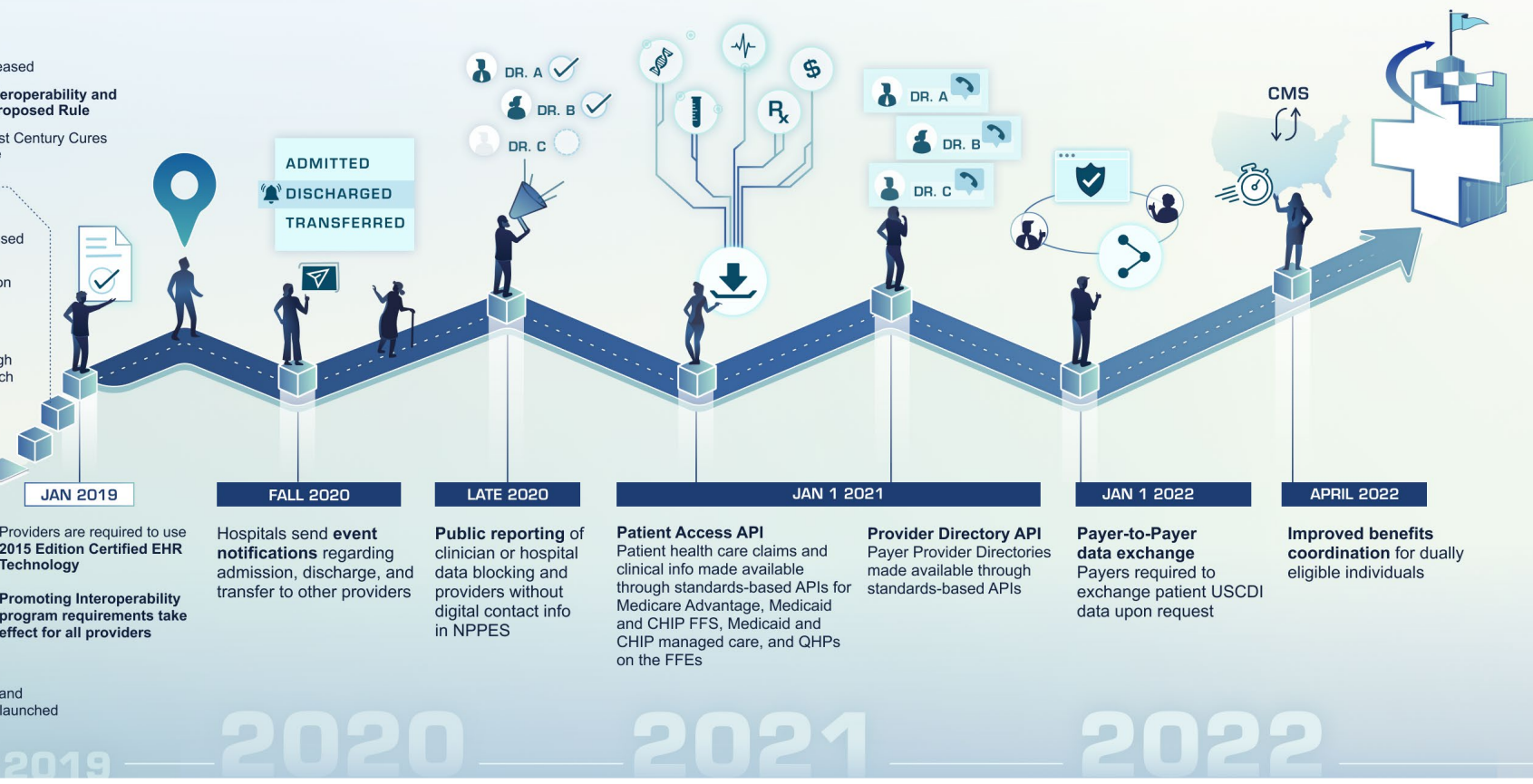**YOUR HEALTH DATA**
WHEN YOU NEED IT MOST

CMS INTEROPERABILITY & PATIENT ACCESS FINAL RULE

my health**e** data

CMS CENTERS FOR MEDICARE & MEDICAID SERVICES

2019
- Draft 2 TEFCA released
- CMS publishes **Interoperability and Patient Access Proposed Rule**
- ONC publishes 21st Century Cures Act Proposed Rule

2018
- Draft TEFCA released
- White House Executive Forum on Interoperability
- CMS made data available to researchers through the Virtual Research Data Center

March 2018

MyHealthEData and **Blue Button 2.0** launched

ADMITTED

DISCHARGED

TRANSFERRED

DR. A

DR. B

DR. C

R$_x$

DR. A

DR. B

DR. C

CMS

JAN 2019

Providers are required to use **2015 Edition Certified EHR Technology**

Promoting Interoperability program requirements take effect for all providers

FALL 2020

Hospitals send **event notifications** regarding admission, discharge, and transfer to other providers

LATE 2020

Public reporting of clinician or hospital data blocking and providers without digital contact info in NPPES

JAN 1 2021

Patient Access API
Patient health care claims and clinical info made available through standards-based APIs for Medicare Advantage, Medicaid and CHIP FFS, Medicaid and CHIP managed care, and QHPs on the FFEs

Provider Directory API
Payer Provider Directories made available through standards-based APIs

JAN 1 2022

Payer-to-Payer data exchange
Payers required to exchange patient USCDI data upon request

APRIL 2022

Improved benefits coordination for dually eligible individuals
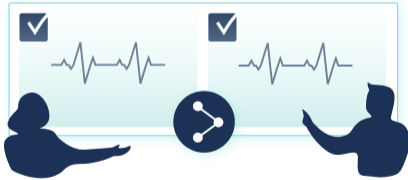
2019   2020   2021   2022

HOW WILL THESE REQUIREMENTS IMPACT ME?

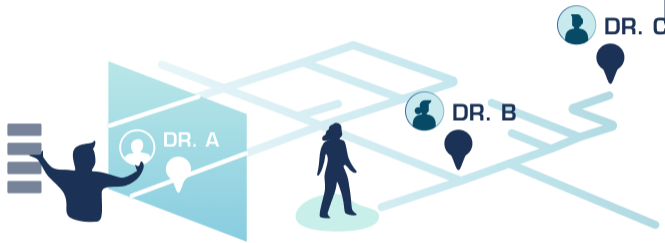**1** **Sharing health information** with patients better engages them and strengthens our relationship.

2 **Historical claims data** helps patients understand their health care and expenses.

4 **Offering a provider directory through an API** helps my patients find the doctors they need.

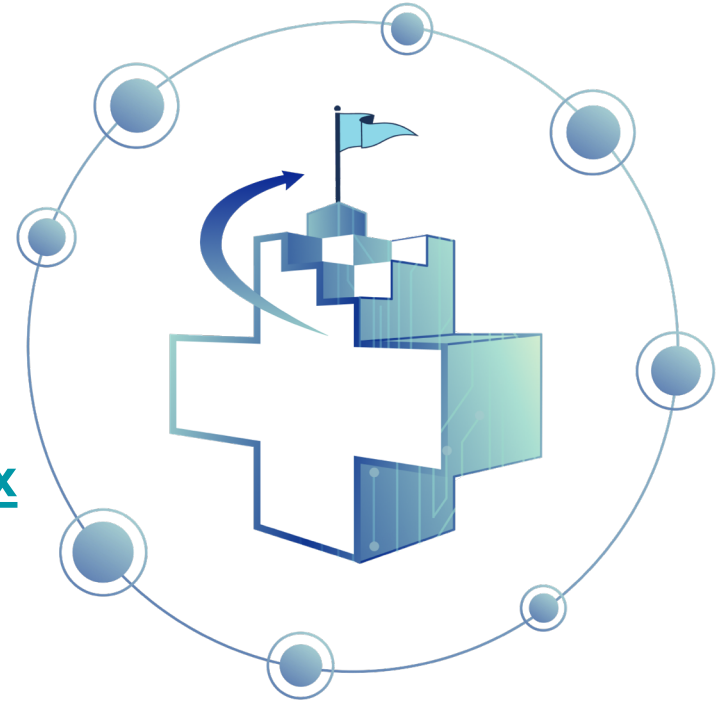**3** **Care Coordination** in a payer-to-payer data exchange helps me provide coverage to get my patients the best outcomes.

PAYERS

DR. C

DR. B

DR. A

OPEN APIs

These policies will increase my ability to provide more efficient and coordinated coverage.

More information and implementation support:

https://www.cms.gov/Regulations-and-Guidance/Guidance/Interoperability/index

Questions?

- To Submit or Withdraw Questions by Phone:

  - *If you are listening through your computer speakers and want to submit a question by phone, dial* 1-866-391-5945 *and enter your unique six-digit PIN, then dial "star(*) pound(#)" on your phone's keypad.*

  - *If you are already dialed in by phone and want to submit a question, then dial "star(*) pound(#)" on your phone's keypad.*

  - *If you would like to withdraw a question and you are dialed in by phone, then dial "star(*) pound(#)" on your phone's keypad.*

- To submit questions by webinar:

  - *Type your question in the text box under the "Q&A" tab and click "Send."*

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