
Changes Ahead for 'Confusing' Meaningful Use



The Centers for Medicare and Medicaid Services Acting Administrator Andy Slavitt has hinted at changes as the healthcare industry embraces the value-based reimbursement scheme. For one, 2016 would likely see the end of the Meaningful Use programme — an electronic health records mandate and incentive programme that healthcare providers put millions into.

"The Meaningful Use programme as it has existed, will now be effectively over and replaced with something better," Slavitt said. "Since late last year we have been working side by side with physician organisations across many communities — including with great advocacy from the AMA [American Medical Association] — and have listened to the needs and concerns of many."

New regulations, such as the Medicare Access & CHIP Reauthorisation Act of 2015, aimed at value-based payment models demand a more streamlined regulatory approach, Slavitt noted.

While offering few specifics, the acting administrator said CMS "will be putting out the details on this next stage over the next few months." A report from Internal Medicine News, meanwhile, quoted him as saying that, "We have to get the hearts and minds of physicians back. I think we've lost them."

Despite less than a year ago describing Stage 3 as "what everybody will be doing ... in 2018 and beyond," and declaring, as recently as this past October, that Stage 3 would proceed as planned, CMS looks to be changing its tune. According to Slavitt, the focus will move away from rewarding providers for the use of technology and towards the outcome they achieve with their patients.

John Halamka, MD, Chief Information Officer at Beth Israel Deaconess Medical Center, said that meaningful use has served its purpose.

"Stage 1 created a foundation of functionality for everyone. That was good," Dr. Halamka wrote in a recent blog post. "Stage 2 tried to change too much too fast and required an ecosystem of applications and infrastructure that did not exist. Clinicians struggled to engage patients and exchange data because they could send payloads but there were few who could receive them. Stage 3 makes many of the same mistakes as Stage 2, trying to do too much too soon."

With so many new regulations coming from CMS, he thinks that now could be a good time to reconsider the six-year-old programme.

"The layers of requirements in Meaningful Use, the HIPAA Omnibus Rule, the Affordable Care Act, ICD-10 and (MACRA) are so complex and confusing that even government experts struggle to understand the implementation details," Dr. Halamka pointed out. "Each of the regulations leads to various audits. My experience is that even the auditors do not understand the regulatory intent and ask for documentation that far exceeds the capabilities of existing technology."

Source: [Healthcare IT News](#)

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