

CMS Urged to Reduce EHR, Meaningful Use Burden on Doctors



Difficulty in meeting documentation requirements is a common complaint among physicians. Thus, the call by various medical groups for the U.S. federal government to reduce the burden and penalties associated with EHRs and meaningful use does not come as a surprise.

The American Medical Association, the Medical Group Management Association and dozens of other healthcare organisations have also suggested that the government loosen requirements under the Physician Quality Reporting System and Value-Based Payment Modifier.

"We urge the Administration to take a series of steps to address challenges in MU, PQRS and VM prior to their replacement by MACRA and minimise the penalties assessed for physicians who tried to participate in these programmes," they wrote in a letter to newly-confirmed Centers for Medicare and Medicaid Services Administrator Seema Verma. "As directed by the 21st Century Cures Act, CMS must establish a strategy to relieve the electronic health record documentation burden."

The groups recommended that CMS create a new category within the existing hardship exemptions specifically for administrative burdens, not penalise eligible providers because of "arbitrary 'check the box' requirements" under meaningful use, and offer relief for providers impacted by these programmes that predate MACRA. They also called for hardship exemptions for PQRS and the VBPM.

"As indicated in the MACRA law and final regulations, policymakers in Congress and the Administration clearly understand that fair and accurate measurement of physicians' performance will not be possible until better tools become available," the groups wrote. "We also believe the steps we have outlined are in keeping with President Trump's efforts to reduce regulatory burden."

In addition to AMA and MGMA, the American College of Physicians, American Academy of Family Physicians, American Psychiatric Association, the Medical Society of the District of Columbia and 43 state medical societies were among those signing the letter to CMS.

Source: [Healthcare IT News](#)

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