CMS: Advancing Care Information Will Replace Meaningful Use

The Centers for Medicare & Medicaid Services (CMS) has proposed replacing Meaningful Use in the physician office with a new effort that deemphasizes the use of information technology and more strongly supports patient care through better and more connected technology.

CMS Acting Administrator Andy Slavitt introduced the changes, which are part of a larger proposed regulation to implement the Medicare Access and CHIP Reauthorization Act (MACRA), during an April 27 press teleconference.

“The program, Advancing Care Information, is designed to be far simpler, less burdensome and more flexible. If this proposal is finalized, it will replace the current Meaningful Use Program for physician offices and will be effective January 1, 2017, along with the other components of MACRA,” Slavitt said.

MACRA will create two systems under which physicians will be paid for the quality of care they provide. The changes to the Meaningful Use Program will affect physicians who choose to participate in the Merit-based Incentive Payment System (MIPS). Under the proposed rule, efforts under the new Advancing Care Information program would account for 25% of the score used to determine pay for office-based physicians under Medicare.

In a related blog post, Slavitt and Dr. Karen DeSalvo, national coordinator for Health Information Technology, noted that the improvements “should increase providers’ ability to use technology in ways that are more relevant to their needs and the needs of their patients.”

The key difference between the proposed program and Meaningful Use is that physicians will no longer be faced with an all-or-nothing requirement for meeting criteria to qualify for extra payments under the MIPS program.

Advancing Care Information has been divided into two parts. The first, reporting measures, has been streamlined from 18 measures to 11, and reporting on computerized physician order entry and clinical decision support measures have been eliminated. The second part is based on performance measures, with multiple pathways to achieve those targets, which allow physicians to select the measures that best align with their needs.

There also is an opportunity to earn an extra point if a physician is reporting to more than one public health registry.

The proposal emphasizes interoperability, information exchange and security measures and requires that patients be able to access their health care information easily through the use of apps and other consumer-friendly technology, according to the blog post. It also emphasizes open data sharing and interoperability, something that has been a continual drag on the current Meaningful Use Program.

CMS has “taken this opportunity to really focus more on aligning quality, on seeing that we are streamlining workflow and creating opportunities for electronic health record and health IT developers to create products that really meet the needs and expectations of clinicians and providers on the front lines,” Dr. DeSalvo said during the April 27 call.