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August 29, 2024

Chiquita Brooks-LaSure
Administrator, Centers for Medicare & Medicaid Services
U.S. Department of Health and Human Services
7500 Security Boulevard
Baltimore, MD 21244

RE: CMS-1809-P

Dear Administrator Brooks-LaSure,

On behalf of our 29 member companies, the HIMSS Electronic Health Record (EHR) Association appreciates the opportunity to provide feedback to CMS on the Medicare hospital Outpatient Prospective Payment System (OPPS) and the Medicare Ambulatory Surgical Center (ASC) payment system for calendar year 2025 (CMS-1809-P).

The EHR Association is dedicated to enhancing the quality and efficiency of care by promoting the adoption and use of innovative, interoperable health information technology. As such, we actively encourage open dialogue on the development and implementation of meaningful and accessible standards. In this context, we strongly support CMS' proposal to extend the voluntary reporting of core clinical data elements (CCDEs) and linking variables for the Hybrid Hospital-Wide Readmission (HWR) and Hybrid Hospital-Wide Standardized Mortality (HWM) measures for the performance period from July 1, 2023, to June 30, 2024.

CMS indicates in the proposed rule that 75% of voluntarily participating hospitals, mostly larger hospitals with more robust resources, would have failed to meet the required metrics for associated clinical data. As all hospitals attempt to transition to mandatory reporting, many are struggling to meet the reporting requirements and are concerned about the impact of expected penalties. In addition to giving CMS time to analyze the root causes of CCDE collection challenges, this proposed extension would provide relief for those hospitals whose inadequate resources would be further impacted by noncompliance penalties.

Secondly, a significant timing issue currently exists. The performance period ran through June 30, 2024, with the reporting deadline for hybrid measures set for October 1, 2024. However, the OPPS rule, which determines the reporting requirements, will not be finalized until early November. Consequently,

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Altera Digital Health	EndoSoft	Harris Healthcare	Nextech	STI Computer Services
Athenahealth	Experity	MatrixCare	NextGen Healthcare	TruBridge
BestNotes	Epic	MEDHOST	Office Practicum	Varian – A Siemens Healthineers Company
CureMD	Flatiron Health	MEDITECH, Inc.	Oracle Health	
eClinicalWorks	Foothold Technology	Modernizing Medicine	PointClickCare	Veradigm

hospitals will not know whether the submission is voluntary or mandatory until after reporting has been submitted. Further, it is important to note the delays and issues encountered this year: CMS's measure feedback was issued in July rather than May, there have been discrepancies between CMS's validation and its own specifications, and a significant number of unresolved issues related to hybrid measures have been reported by developers on JIRA.

Given these challenges, the proposed extension of the voluntary submission period is not only warranted but essential. The EHR Association recognizes the need for full adoption of these new measures, but we wholeheartedly support CMS's judicious pause to identify issues in the current process and allow hospitals, large and small, to implement the measures needed to meet the necessary requirements.

We appreciate this opportunity to provide input. As always, the EHR Association stands ready to assist. Sincerely,

Stephanie Jamison Chair, EHR Association Greenway Health

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