CMS Condition of Participation: Patient Event Notifications

Health Current C3 Support

What Arizona Hospitals Need to Know
CMS Condition of Participation (CoP): Health Current’s C3 Support Services

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Agenda

• CMS Patient Event Notifications CoP Overview

• HIE as Intermediary to Support Hospitals

• New HIE CMS CoP Compliance (C3) Support Services

• Next Steps: How to Sign Up?
Introduction

Melissa Kotrys
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Explanatory White Paper

Deeper dive into relevant legal/regulatory topics, including specifics on how HIEs can serve as an intermediary to support hospitals in meeting their requirements

Developed with Mel Soliz, Partner with Coppersmith Brockelman, PLC.

Available at: www.healthcurrent.org/cms2021
Purpose & Objectives

• Establish **understanding** of new CoP for all Arizona hospitals

• Identify how Health Current can support your organization **today**

• Describe Health Current’s comprehensive community effort to implement required alerts **statewide**

• Provide new C3 Support **services** to all interested hospitals
Questions We Pondered

• How does your organization interpret the “reasonable efforts” requirement to alert all relevant PCPs and PACs?
• What aspects is your organization able to handle internally? What are you looking for external support to provide?
• Are there other aspects of the rule that you need support to achieve?
• How would you like Health Current to support your organization?
CMS CoP Patient Event Notifications Overview

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CMS Condition of Participation (CoP):
To Whom it Applies and Compliance Deadline

Hospitals (including psychiatric and critical access hospitals) that participate in Medicare/Medicaid programs and that have electronic medical or administrative systems that can support HL7 2.5.1 content (or higher) must meet requirements by the May 2, 2021 compliance deadline,

• CMS does NOT require hospitals to purchase new systems if their current ones cannot support HL7 2.5.1 (or higher)
• CMS does NOT require the use of certified health IT to send the ADT alert (but the ADT alert must be sent electronically)
CMS Condition of Participation (CoP):
What does it require?

Under the new CoP, a covered hospital must demonstrate it:

- Sends minimum patient information, including patient name, treating practitioner name, and sending institution name
- Sends “patient event notifications” (ADT alerts) either directly or through an intermediary at the time of ED registration or inpatient admission, and either immediately prior to or at the time of discharge/transfer to the providers specified in the CoP
- Has made a reasonable effort to send alerts to all providers specified in the CoP to the extent it is:
  - Permissible under applicable federal and state law and regulations
  - Not inconsistent with the patient’s expressed privacy preferences
CMS Condition of Participation (CoP):
Minimum alert content and technical requirements

An alert must, at a minimum include (though hospitals are not precluded from adding more information):

1. Patient Name
2. Treating Practitioner (i.e. attending physician)
3. Sending Institution (i.e. hospital)

Examples of acceptable transport protocols mentioned by CMS include (but are not limited to) Direct messaging and FHIR-based API.

CMS also suggests that hospitals may employ mix of methods to meet the CoP requirements.
CMS Condition of Participation (CoP):
Which events trigger the alert requirement?

**Required Alert Triggers**

1. ED registration (including for observation)
2. Hospital inpatient admission
3. Discharge from the hospital’s ED
4. Transfer from the hospital’s ED (i.e., to the hospital’s inpatient services)
5. Discharge or transfer from the hospital’s inpatient services
**CMS Condition of Participation (CoP):**
Other alert details…

**Alerts are not required for:**
1. Other transfers within the hospital, such as from one inpatient department to another
2. Outpatient procedures (e.g. radiology, catheterization, outpatient surgery)

**Alert timing:**
1. For admission or registration, at the time of the event (i.e. real time)
2. For discharge or transfer, immediately prior to, or at the time of the event

**Alerts should not be sent:**
1. To a provider where not permissible under federal or state law
2. Where sending the alert would be inconsistent with the patient’s expressed privacy preferences
CMS Condition of Participation (CoP):
To whom alerts must be sent

Hospitals must make “reasonable efforts” to send alerts to:

A. All “applicable” post-acute care services providers and suppliers (PACs), including:
   1. The PAC from which the patient was transferred to the hospital
   2. The PAC to which the patient is being transferred or referred from the hospital

B. All patient’s “established” PCP practitioner group(s), or other practitioners group the patient identifies as primarily responsible for patient’s primary care including:
   1. The PCP who has a care relationship that the patient recognizes as primary
   2. The PCP evidenced by documentation of the relationship in the patient’s record
   3. The PCP who referred the patient to the hospital
CMS Condition of Participation (CoP):
Can PACs and PCPs restrict what alerts are sent to them?

Hospitals may, but are not required to, honor requests from recipient PACs and PCPs to limit, modify and/or customize alerts.

CMS recognizes in the preamble that HIEs can also manage recipient requests on behalf of hospitals.
CMS CoP Compliance (C3) Support Services

Peter Steinken
Director, Community Engagement
Health Current
Value-Added Benefits of Using HIE to Meet CoP

Using a uniform approach for hospitals and providers, Health Current can:

• Leverage existing connections from nearly every hospital in Arizona
  • Receiving inbound ADTs from 97% of inpatient and ED took 10 years and significant investment to develop
• Expand outreach to connect to PCPs and PACs statewide
  • Enable providers to manage the alerts they receive from hospitals
• HIE participants today represent over 10,000 providers and counting

As of Sept. 30, 2020
Health Current C3 Support Services

Health Current, Arizona’s health information exchange (HIE), has developed the CMS CoP Compliance (C3 Support) services to assist hospitals in meeting the new CMS Patient Event Notifications requirement.

**HIE C3 Support services include:**

- **Alerts** (also referred to as CMS Patient Event Notifications)
- CMS CoP Compliance (C3) **Report**
- **Recruitment** Collaboration
HIE C3 Support Services: Alerts
Leveraging the Health Current HIE as an Intermediary

858 HIE Participants as of Feb. 18, 2021

+ ACOs & Clinically Integrated Networks
+ Behavioral Health Providers
+ Community Health Providers
+ Emergency Medical Services
+ FQHCs & Rural Health Clinics
+ Hospitals & Health Systems
+ Labs, Imaging Centers & Pharmacies
+ Long-Term & Post-Acute Care
+ State & Local Government
HIE C3 Support Services: CMS CoP Compliance (C3) Report

The CMS CoP Compliance (C3) Report is part of Health Current’s new C3 Support services to assist hospitals in meeting the new CMS Patient Event Notifications requirement. Figure 1 represents the number of each different ADT message the hospital has sent to the HIE, and how many ADT messages contained Treating Provider. The Compliance % is calculated by taking the number of ADT messages with Treating Provider and dividing that by the number of Total Messages. Figure 2 shows where the hospital’s ADT alerts are flowing within the healthcare community. For more information or to sign up for Health Current’s C3 Support services, contact Peter Steinken, Director of Community Engagement, at peter.steinken@healthcurrent.org.
Compliance % = ADTs sent with Treating Provider divided by Total Messages (over 3-month period)

Figure 1 shows each ADT Event Type (A01 - A04) and the number of messages that contain Treating Provider

C3 Report can include other ADT message types, such as A06s or A07s (depending on what the hospital uses for admits, discharges, and transfers)
HIE C3 Support Services: CMS CoP Compliance (C3) Report

- Figure 2 shows the total number of **Alerts Sent** by Health Current (aka Patient Event Notifications) as well as all **Destinations** that received the hospital’s ADT alerts (over 3-month period)
- Health Current will provide hospital with all Destinations in supplementary document
HIE C3 Support Services: Recruitment Collaboration

• Recommend that hospitals use C3 Report to determine which PCP and PAC providers did not receive ADT alerts

• Hospitals collaborate with Health Current to identify which PCP and PAC providers are not currently HIE participants (Note: It is possible that a PCP or PAC could be an HIE participant but not be on list of receiving hospital’s ADTs, due to their Alert preferences)

• Health Current and hospital will then collaborate on recruitment to ensure all relevant PCP and PAC providers are signed up with the HIE and subscribed to receive ADT alerts – Health Current will provide substantive recruitment support

• Hospitals to provide Health Current with regular updates on changes to which PCP and PAC providers should receive their ADTs, so that Health Current can continue its provider outreach and get them signed up with the HIE
Interested in C3 Support? Sign up today!

Contact: Peter Steinken
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Visit healthcurrent.org/CMS2021 to download:
• CMS CoP Flyer
• CMS CoP White Paper
Key Takeaways

• Due to long-term participation in and support of the statewide HIE, Arizona hospitals have the interoperable infrastructure via Health Current that is needed to meet the new CMS CoP requirements.

• Health Current’s new C3 Support services provide substantive progress towards meeting the CMS “reasonable efforts” requirement.

• There is no additional charge for the C3 Support services, so Arizona hospitals are encouraged to take advantage of the new functionality to enhance their internal CMS CoP compliance efforts.
Questions?
Imagine fully informed health.