August 30, 2011

Dr. Donald Berwick  
Administrator  
Centers for Medicare & Medicaid Services  
Department of Health and Human Services,  
Attention: CMS–1524–P, Mail Stop C4–26–05  
7500 Security Boulevard  
Baltimore, MD 21244–1850.

Re: File Code CMS–1524–P

Dear Dr. Berwick:

The American Health Information Management Association (AHIMA) welcomes the opportunity to comment on the Centers for Medicare & Medicaid Services’ (CMS’) proposed changes to the Medicare Program; Payment Policies under the Physician Fee Schedule and Other Revisions to Part B for CY 2012 notice of proposed rulemaking (NPRM), as published in the July 19, 2011 Federal Register. Our comments focus on those areas of particular interest to our members.

AHIMA is a not-for-profit professional association representing more than 60,000 health information management (HIM) professionals who work throughout the healthcare industry. AHIMA’s HIM professionals are educated, trained, and certified to serve the healthcare industry and the public by managing, analyzing, reporting data vital for patient care, while making it accessible to healthcare providers and researchers when it is needed most. AHIMA and its members also participate in a variety of projects with other industry groups and agencies Department of Health and Human Services related to the use of secondary data for a variety of purposes including quality monitoring, reimbursement, public health, patient safety, biosurveillance, and research.

§ 414.90 Physician Quality Reporting System.

The proposed rule discusses the possibility of eliminating the 6-month reporting period on page 76FR42842 for claims and registry previously available under the Physician Quality Reporting System (PQRS). AHIMA does not support this potential change as our members have expressed concern that elimination of the 6-month reporting period for those using claims-based or registry-based reporting could be burdensome for small practices. Our recommendation is that CMS does not eliminate the 6-month reporting period for these participants.

AHIMA supports CMS’ intention of disallowing previously qualified registries from submitting data of PQRS quality measures if it is determined the data is inaccurate. We strongly encourage CMS to ensure there is a communication process or method that allows the eligible professionals to be notified of registries being disallowed from the program. By notifying the professionals,
this will enable them to address the issue in a timely manner and reduce the negative impact of their reporting.

On page 76FR42846 the proposed rule discusses the intent to explore ways to further align the PQRS and Medicare electronic health record (EHR) Incentive Program in order to satisfy both program reporting requirements. We strongly support this proposal and look forward to the integration of PQRS quality measurement activities with those activities under the EHR incentive program and the continued momentum toward EHR reporting for PQRS. AHIMA has historically supported the movement toward uniformity and consistency in repurposing data and aligning programs where possible. There is much to be gained not only in improved comparability of data among peers, but also in reduced reporting burdens, increased standardization, and decreased costs associated with administrative requirements.

As a criteria for qualifying vendors who wish to submit 2012 PQRS quality measure data, AHIMA supports CMS’ decision to select and implement the use of Quality Reporting Data Architecture (QRDA) for patient level data submission. We believe this will also facilitate additional testing of the standard to inform the transition of QRDA from a draft standard for trial use to a normative standard.

Regarding the 2012 PQRS measures’ requirements as outlined on page 76FR42861, AHIMA supports the use of measures that have been NQF endorsed or those that have undergone rigorous testing.

If AHIMA can provide any further information or if there are any questions regarding this letter and its recommendations, please contact me at (202) 659-9440 or allison.viola@ahima.org, or AHIMA’s vice president, policy and government relations, Dan Rode, at (202) 659-9440 or dan.rode@ahima.org. If we can be of further assistance to you in your efforts, we would welcome the opportunity to provide support.

Sincerely,

Allison Viola, MBA, RHIA
Director, Federal Relations

cc: Dan Rode, MBA, CHPS, FHFMA, Vice President, Policy and Government Relations