

## DDPHSS-DMI Consortium Meeting: Executive Summary June 15, 2022

### **Purpose**

The purpose of this session was to seek individual perspectives and experiences, not group consensus advice, to inform planning, engagement, and strategies in the identification and development of sustainable and efficient solutions for interoperable and streamlined data flows, shared solutions, and health data analysis for public health purposes.

This meeting was convened as a group of multisector public health partners (government, public health, industry) to increase dialogue, prioritize goals, and vet real life solutions to achieve a desired future state PH data ecosystem that provides timely, secure, adaptable access and transfer of data and information to effectively drive public health action.

# Centers for Medicare and Medicaid Services (CMS) Inpatient Prospective Payment System (IPPS) Implications for Public Health Reporting

Presenter(s): Paula Braun

## **Examples of How CMS's Proposed IPPS Rule Prioritizes Public Health**

#### Requires reporting to public health

- ☐ Increases the Public Health and Clinical Data Exchange Objective from 10 to 25 points
- Requires and reinforces importance of <u>ELR</u>, <u>ECR</u>, <u>syndromic surveillance</u>, and <u>immunization reporting</u>
- Adds a new <u>Antimicrobial Use and Resistance</u> (AUR) Surveillance measure, which is also required
- Provides 5 optional bonus points for <u>reporting to public health</u> <u>registries</u> and <u>clinical data registries</u>

#### > Promotes emergency preparedness

- Requires hospitals and critical access hospitals, after the conclusion of the current COVID-19 public health emergency, to <u>continue</u> <u>COVID-19</u> and <u>seasonal influenza reporting</u>
- Establishes new reporting requirements for future declared public health emergencies related to a specific infectious disease or pathogen. Gives the option to report these kinds of declared emergencies to NHSN or other CDC-supported surveillance systems.
- Provides flexibility to achieve required, bi-directional exchange of health information
  - Supports electronic referral loops, participating in HIEs, or enabling exchange under TEFCA
- > Includes protections for controlled substances
  - ☐ Requires <u>e-prescribing of controlled substances</u> and <u>query of PDMPs</u>

#### Proposes new health equity-focused measures

- Assesses a hospital's commitment to establishing a culture of equity and delivering more equitable health care by capturing concrete activities across five key domains: <u>strategic planning</u>, <u>data</u> <u>collection</u>, <u>data analysis</u>, <u>quality improvement</u>, and <u>leadership</u> <u>engagement</u>
- □ Captures screening and identification of patient-level, healthrelated social needs—such as food insecurity, housing instability, transportation needs, utility difficulties, and interpersonal safety
- Seeks public input on how to optimally measure health care quality disparities, including what to prioritize in data collection and reporting as well as approaches to consider in driving provider accountability

#### > Drives improvements in maternal health

- Proposes a <u>new hospital designation to identify "birthing friendly hospitals"</u> based on the Maternal Morbidity Structural Measure
- Introduces a <u>measure of low-risk Cesarean deliveries</u> and a <u>measure of severe obstetric complications</u>

#### > Includes requests for information

- ☐ Help <u>improve care for people experiencing homelessness</u> and <u>documenting social determinants of health</u>
- ☐ Ways to <u>advance quality measurement</u> and <u>use of FHIR</u>

CDC presented Centers for Medicare and Medicaid Services (CMS)' proposed rules for the Promoting Interoperability Program, which includes many public health reporting requirements in their hospital Inpatient Prospective Payment System (IPPS). The proposed rule would highlight and

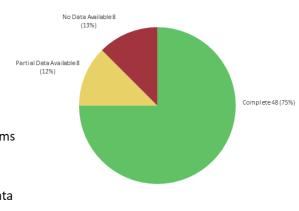
mandate requirements to prioritize public health needs, notably around reporting requirements and flexibility for bi-directional exchange of health information, which support broader data modernization initiatives. The content of the (forthcoming) interim final rule may differ from the proposed rule based on public comment. CDC will provide updates as they become available.

# State, Territorial, Local, and Tribal (STLT) Public Health Capabilities and Needs Assessment

Presenter(s): Jim Kucik

# **Overview**

- Represents the status of 64 funded recipients as of May 2, 2022.
- Assessments were completed on a rolling basis between November 2021 and May 2022.
- Three categories summarizing the quantitative responses:
  - General Current State: current state of activities and systems related to data modernization efforts (including data exchange processes and systems)
  - Workforce: workforce capacity and capability related to data modernization efforts
  - Challenges & Opportunities: qualitative data that highlights key challenges and opportunities identified throughout jurisdictional Assessment responses



N = 64

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CDC provides jurisdictions with direct funding to build foundational DMI capacity. Conducting a DMI capability and needs assessment is a required activity for recipients, and CDC presented preliminary findings from the assessments. CDC noted that a majority of jurisdictions are still in progress with most of their DMI activities, with some significant progress being made with receiving electronic lab results, electronic test ordering and reporting, and electronic case reporting; however, more than 80% of jurisdictions reported having insufficient staffing to meet DMI needs.

### **Quick Wins for Data Modernization Efforts**

Presenter(s): Dan Jernigan

CDC also led the discussion on possible quick wins to demonstrate success of DMI efforts. Consortium participants are interested in optimizing data visualization, increasing staffing efforts, and leveraging existing technology to maximize capabilities with the data and tools already available. Additional funding can enable them to achieve these potential quick wins, demonstrating quick turnarounds for a tangible success.

For questions regarding the CDC DDPHSS-DMI Consortium, please contact <a href="mailto:DMIconsortium@cdc.gov">DMIconsortium@cdc.gov</a>.