



A messy end to a chaotic 2017 in Washington

By Greg Carey | December 7, 2017

With a week remaining in session for Congress, the push to the end of 2017 is in full swing.

One year after Congress passed a major piece of healthcare legislation – the 21st Century Cures Act – and with a new administration in place, implementation of provisions of the Cures Act are being closely watched by the health IT policy world.

Here are the activities on our watch list for the final weeks of 2017:

- Tasked by Congress to develop “a trusted exchange framework” for information sharing, the Office of the National Coordinator for Health Information Technology (ONC) will release its draft rule, the Trusted Exchange Framework and Common Agreement, in late December. Feedback from the health IT industry to date has focused on not disrupting progress in the private sector to build interoperability. The agency also announced that the information blocking rule required under Cures is slated for spring 2018.
- ONC plans to restructure in anticipation of a \$22 million budget cut. Currently organized into 10 divisions, the new organization will pare down to two: one focused on interoperability and data sharing, the other on lowering physicians’ IT burdens.
- The Centers for Medicare and Medicaid Services is also looking at measures to reduce requirements for physician documentation.
- After passing its tax overhaul bill last week, the Senate is going to work to reconcile it with the House version. Healthcare policy followers will note that while the Senate version includes a repeal of the Affordable Care Act’s individual mandate, the House version does not.
- Alex Azar, nominee for secretary of Health and Human Services, presented his four priorities for HHS to the Senate Committee on Health, Education, Labor and Pensions: Improved use of health IT, addressing high drug prices, making

healthcare more affordable, and stopping the opioid epidemic. “We can better channel the power of health information technology, and leverage what is best in our programs and in the private, competitive marketplace,” he said, “to ensure the individual patient is at the center of decision making and his or her needs are being met with greater transparency and accountability.” Azar has not worked in health IT and, if confirmed, may bring a fresh perspective.

- Senator Orrin Hatch (R-UT) pledged to fund CHIP. Despite the program missing its deadline for funding by two months, Hatch remains committed, saying, “Nobody believes in the CHIP program more than I do.”

Check back in with us in January for a look at what’s next in healthcare on the Hill.

Greg Carey is technology standards & policy manager at athenahealth.



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