February 6, 2015

Centers for Medicare & Medicaid Services
Department of Health and Human Services
PO Box 8013
Baltimore, MD 21244-8013

Re: Comments on Medicare Shared Savings Program; Accountable Care Organizations (CMS-1461-P)

Dear Sir or Madam:

On behalf of the membership of the Pharmacy Health Information Technology Collaborative (Collaborative), we are pleased to submit comments in response to your proposed rules addressing changes to the Medicare Shared Savings Program; Accountable Care Organizations (ACO).

The Pharmacy Health Information Technology Collaborative (Collaborative) supports the intent of the proposed changes, particularly those changes to §425.112(b)(4)(ii)(C). As health care providers, pharmacists provide patient-centered care and services; use electronic health records (EHRs); maintain various secure patient care records; and as part of the integrated health care team, they are directly involved with other health care providers and patients in various practice settings, including ACOs.

The Collaborative supports the addition of the new requirements under §425.112(b)(4)(ii)(C), which would require an ACO to describe in its application how it will encourage and promote the use of enabling technologies for improving care coordination for beneficiaries. Although the proposed requirement states that such enabling technologies and services may include electronic health records and other health IT tools, we recommend that EHRs be made a requirement for the ACO application rather than indicating that the application may include EHRs.

Requiring EHRs as part of the ACO application would be in alignment with the national health IT framework being developed by the Office of the National Coordinator for Health IT and its most recently proposed federal strategic plan for 2015-20. Such a requirement would help increase the adoption and effective use of health IT products.
systems, and services, as well as expand health IT adoption and use to other populations. This is currently required in the CMS Meaningful Use EHR Incentives Program. Expanding EHRs to ACOs in the Medicare Shared Savings Program would be a logical step.

As mentioned initially, pharmacists are part of the integrated team approach of health care providers. Although not all pharmacists are partners with ACOs, they still work with health care providers (e.g., physicians) who are part of ACOs. Pharmacists also provide patient-centered care services to the ACO’s beneficiaries, even though the pharmacist may not be part of the ACO. In this regard, it is vitally important that EHRs be a required part of ACOs. Requiring such would help greatly in connecting pharmacists to health care providers in ACOs. Pharmacists are demonstrated meaningful users of EHRs.

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The Pharmacy HIT Collaborative’s vision and mission are to assure the nation’s health care system is supported by meaningful use of HIT, the integration of pharmacists for the provision of quality patient care, and to advocate and educate key stakeholders regarding the meaningful use of HIT and the inclusion of pharmacists within a technology-enabled integrated health care system. The Collaborative was formed in the fall of 2010 by nine pharmacy professional associations, representing 250,000 members, and also includes eight associate members from other pharmacy-related organizations. The Pharmacy HIT Collaborative’s founding organizations represent pharmacists in all patient care settings and other facets of pharmacy, including pharmacy education and pharmacy education accreditation. The Collaborative’s Associate Members represent e-prescribing and health information networks, a standards development organization, transaction processing networks, pharmacy companies, system vendors and other organizations that support pharmacists’ services. For additional information, visit www.pharmacyhit.org

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On behalf of the Pharmacy HIT Collaborative, thank you again for the opportunity to comment on the Request for Comments to Medicare Shared Savings Program; Accountable Care Organizations (CMS-1461-P).

For more information, contact Shelly Spiro, Executive Director, Pharmacy HIT Collaborative, at shelly@pharmacyhit.org.

Respectfully submitted,

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