



Pennsylvania Coalition of Affiliated  
Healthcare & Living Communities

# Practical Application of Information Blocking and Interoperability Rules

April 13, 2021

---


---

---

# Disclaimer

This presentation, and any ensuing discussion, does not constitute as legal advice and does not establish an attorney-client relationship.

This presentation provides general information and is merely intended for educational purposes and does NOT override your need to exercise sound professional judgement in specific circumstances.



# Today's Speakers



Robert "Bob" Latz, PT, DPT, CHCIO  
Chief Information Officer



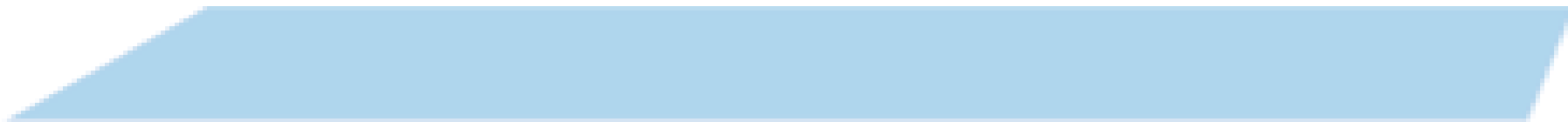
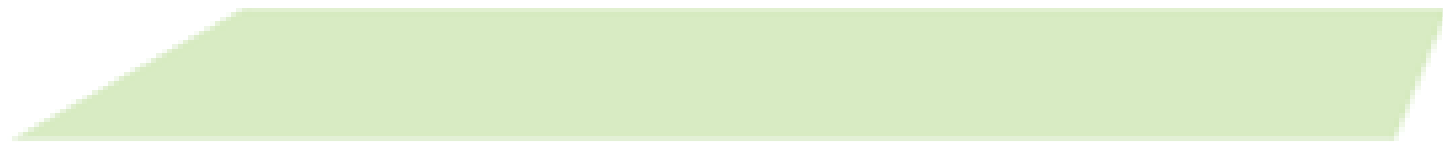
Kara Gainer, JD  
Director of Policy and  
Regulatory Affairs



Alan Swenson  
Executive Director, Carequality  
VP of Interoperability, Kno2



# Information Blocking 101



# Information Blocking Defined

- Cures defines “information blocking” as *practices* that:
  - Prevent or materially discourage the access, exchange or use of electronic health information (EHI); and
  - For which the **Actor** knows, or [for some actors] should know, are likely to interfere with EHI access, exchange or use

# Actors Subject to Information Blocking

Who are the “actors” covered by information blocking?



**Health Care  
Providers**



**Health IT  
Developers of  
Certified Health IT**




**Health Information  
Networks (HIN)/  
Health Information  
Exchanges (HIE)**

# Definition of Electronic Health Information

- Up to October 6, 2022: EHI is represented by the data elements in the United States Core Data for Interoperability (USCDI)
  - [https://www.healthit.gov/isa/sites/isa/files/2020-10/USCDI-Version-1-July-2020-Errata-Final\\_0.pdf](https://www.healthit.gov/isa/sites/isa/files/2020-10/USCDI-Version-1-July-2020-Errata-Final_0.pdf)
- On and after October 6, 2022: EHI includes electronic protected health information that would be included in a designated record set as defined by HIPAA

# Information Blocking Revolves Around Practices

- Information blocking practices may include:
  - Restricting authorized access, exchange or use of EHI
  - Implementing health IT in nonstandard ways
  - Implementing health IT in ways that are likely to:
    - Restrict access, exchange or use of EHI, including for exporting complete information sets or transitioning between health IT systems; or
    - Lead to fraud, waste, or abuse, or impeded innovations and advancements in access, exchange and use
- 





**PREVENTING  
HARM  
EXCEPTION**



**PRIVACY  
EXCEPTION**



**SECURITY  
EXCEPTION**

**EXCEPTIONS THAT INVOLVE**  
not fulfilling requests to access,  
exchange, or use EHI



**INFEASIBILITY  
EXCEPTION**



**HEALTH IT  
PERFORMANCE  
EXCEPTION**

**8**

**EXCEPTIONS TO THE  
INFORMATION  
BLOCKING  
PROVISION**



**LICENSING  
EXCEPTION**



**COSTS  
EXCEPTION**



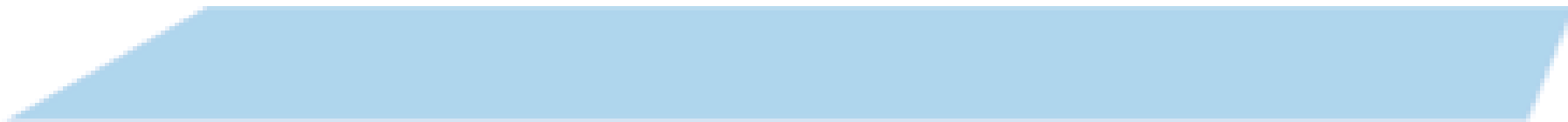
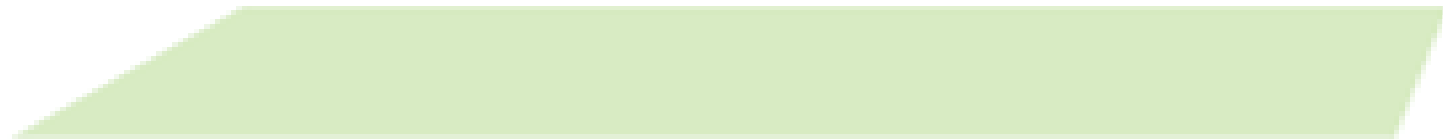
**CONTENT AND  
MANNER  
EXCEPTION**

**EXCEPTIONS THAT INVOLVE**  
procedures for fulfilling requests  
to access, exchange, or use EHI

# Information Blocking: Penalties and Enforcement

- Health care providers: Enforcement by CMS and HHS OIG based on CMS incentive program attestations – penalties for false attestations
  - Other disincentives
- Health IT Developers and HIEs/HINs: Enforcement by ONC and/or HHS OIG—Penalties for not meeting certification conditions or false attestations (certified health IT developers) and up to \$1 million civil monetary penalties (CMPs) per violation (developers, HIEs, HINs)

# Practical Scenarios



# Scenario 1: Obtaining Data from Hospital

Our SNF has been trying to improve transitions of care from Hospital. One issue is receiving data—timely and complete data. Our head of IT shared that this Information Blocking Rule took effect last week.

Can we 'use' this rule to get information?



# Scenario 2: Attorney Medical Request Delayed

Attorney asks for electronic documents for a patient treated in the ALF for the SNF. Records not received in several days. Attorney claims SNF is creating unnecessary delays that limit timeliness of access to EHI.

Is the attorney correct?



# Scenario 3: Lab Report Access to POA/Patient

Physician in our SNF orders a lab test. Results come back in the afternoon and POA wants results. MD asked us not to share the results until they see them first.

Is this information blocking?



# Scenario 4: Changing EHR Vendors

SNF is changing EHR vendors & wants electronic download of data from current vendor. Vendor says they can only provide info in PDF, even though they have a way to electronically share data with others.

Is this information blocking?



# Scenario 5: HIPAA Requirements

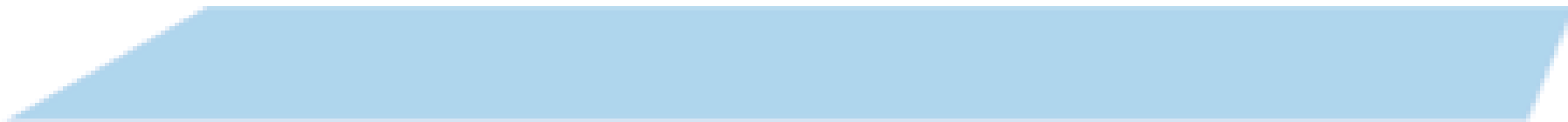
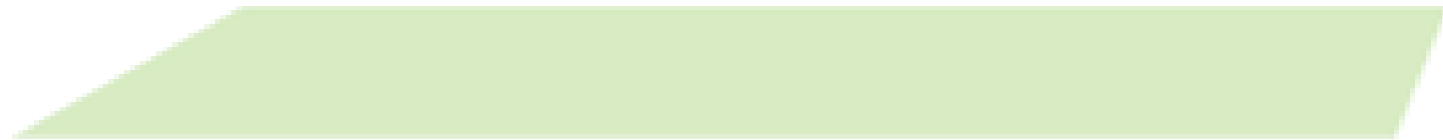
Resident discharged from SNF and returning home. Also going to Senior Center for 'Adult Day Care Services'. Senior Center requests medical information from SNF and SNF says not able to send, claiming this is due to HIPAA.

Is this information blocking?






# Tips and Tools to ensure Compliance



# Key Takeaways

- Identify your actor type and review ONC regulations
  - Examine how you currently respond to requests for EHI
  - Review and update your personnel and training policies and procedures
  - Review and update data access and compliance policies
  - Evaluate your IT system
  - Evaluate your vendors
  - Review and update your vendor and contractor agreements
  - Identify ways to make compliance easier and data sharing more consistent
- 

# Resources

- ONC final rule and accompanying resources: <https://www.healthit.gov/curesrule/>
- ONC Information Blocking Definitions: <https://www.healthit.gov/sites/default/files/cures/2020-03/InformationBlockingActors.pdf>
- APTA Resources: <https://www.apta.org/your-practice/compliance/health-information-technology-and-patient-privacy/information-blocking>
- Reference Tool to Educate and Assist Provider Organizations Subject to the Information Blocking Rule: <https://infoblockingcenter.org/>

**Thank You!**



Pennsylvania Coalition of Affiliated  
Healthcare & Living Communities

