



National Association of State Medicaid Directors
an affiliate of the American Public Human Services Association

Mr. Kerry N. Weems
Acting Administrator
Centers for Medicare and Medicaid Services
Department of Health and Human Services
200 Independence Avenue, SW
Washington, DC 20201

Dear Mr. Weems:

On behalf of the National Medicaid Electronic Healthcare Workgroup (NMEH), the Systems Technical Advisory Group (S-TAG), and the National Association of State Medicaid Directors (NASMD), we ask that you refocus the resources currently being used to develop and enhance electronic data interfaces between State Medicaid Agencies and the Centers for Medicare and Medicaid Services (CMS) with regard to the Minimum Data Set for Nursing Homes and the Medicaid Statistical Information System (MSIS).

Toward that end, we request that CMS and State Medicaid Agencies form a collaborative, joint workgroup to establish common data definitions and standard formats that comply with existing industry standards, thereby reducing the need to use multiple definitions for standard data elements common used throughout the healthcare industry. This workgroup, with both state and federal partners, would collaboratively define the accepted methodologies for data exchange between States and CMS based upon the Health Industry's standardized interoperability¹ guidelines.

Currently, States are required to develop and upgrade interfaces to exchange information with CMS systems that utilize vocabularies and standards which do not conform with current industry standards. In particular, the Medicaid Statistical Information System (MSIS) Tapes and the Nursing Home Quality Initiative, Minimum Data Set 3.0, utilize proprietary standards and vocabularies that are unique to CMS. We feel that these, and other, information systems standards are not in line with the Federal Executive Order: Promoting Quality and Efficient Health Care in Federal Government Administered or Sponsored Health Care Programs, dated August 22, 2006². This Order directs Federal agencies to develop, "health information technology systems and products that meet recognized interoperability standards". The interoperability requirement pertains to any Agency that develops, acquires or upgrades technology used to exchange health information with other Federal or non-Federal partners.

¹ "Interoperability" means the ability to communicate and exchange data accurately, effectively, securely, and consistently with different information technology systems, software applications, and networks in various settings, and exchange data such that clinical or operational purpose and meaning of the data are preserved and unaltered.

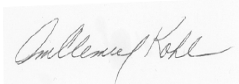
² <http://www.whitehouse.gov/news/releases/2006/08/20060822-2.html>

At a time when states and CMS are looking for ways to save taxpayer dollars, the resources currently being used to develop and implement systems that do not meet these interoperability standards would be better spent on upgrading the systems to meet recognized industry protocol. While we understand and support data exchanges, we believe that diverting resources from the long term goal of standardized interoperability in order to update non-standard interfaces is counterproductive.

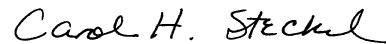
The direction given to the States by the Department of Health and Human Services' Office of the National Coordinator for Health Information Technology within the Office of the Secretary has been to move our systems toward the use of national standards with a goal of interoperability. States are committed to working with CMS to develop effective ways to implement interoperable technology for Medicaid data exchange. We would like the opportunity to work with CMS, other State and Federal Agencies, and standards development organizations (SDOs), in a federal workgroup tasked with developing implementation strategies. We suggest that the workgroup begin with the MSIS and Nursing Home Quality Initiative, but not be limited to only those requirements. State and Federal governments would greatly benefit from reviewing each interface – as upgrades are needed – and that we utilize existing SDOs, to create technology neutral, standards-based interactions.

Thank you for considering our recommendations regarding standards-based interoperability. If you have any questions, please contact Ann Kohler at (202) 682-0100 x299 or akohler@aphsa.org.

Sincerely,



Ann Clemency Kohler
Director
National Association of State Medicaid Directors



Carol Steckel
Executive Committee Chair
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