

21st Century Cures Act: Timelines

Regulatory Dates In The Upcoming Years

Updated- October 6, 2021 - The [21st Century Cures Act](#), released in March 2020, implemented new 2015 Edition Cures Update certification criteria that certified Health IT developers must adopt over the next few years. Additionally, the rule introduced Information Blocking provisions that all actors (healthcare providers, health IT developers, health information exchanges, and health information networks) must comply with. This document provides an overview of the important Cures Act milestones and MEDITECH's certification plans to ensure your organization is aware of what's to come in the next few years.

Date	Milestone
4/5/2021	Information Blocking provisions began; Electronic health information (EHI) is limited to the EHI identified by the data elements represented in the United States Core Data for Interoperability version 1 (USCDI v1). For additional details on USCDI and the methods available for sharing, reference the USCDI Crosswalk documentation (Acute , Amb , MPM 6.08 , MPM C/S , MPM MG) and MEDITECH's prior communications .
Q2 2021	MEDITECH software changes to add the new USCDI data elements to the C-CDA & API are complete. We highly recommend that organizations make it a priority to take this code as detailed in this communication .
Q1 2022 to Q2 2022	MEDITECH will certify our 2015 Edition Cures Update for all platforms and care settings throughout Q1/Q2 2022. We anticipate having updated CHPL listings available for all certified products by late spring/early summer 2022. Once certification is complete, it is anticipated that organizations will need a priority pack toffoff to receive the certified 2015 Edition Cures update.
10/6/2022	For Information Blocking provisions, EHI is no longer limited to the EHI identified by the data elements represented in the USCDI v1. After this date, EHI is defined as 45 CFR 171.102 .
12/31/2022	Vendors must have certified and made available their 2015 Edition Cures Updated technology.
01/01/2023	For the 2023 calendar year (CY), MIPS eligible clinicians, eligible hospitals, and critical access hospitals are required to use technology certified to the 2015 Edition Cures Update for the Promoting Interoperability program and QPP MIPS Promoting Interoperability category. This means the 2015 Edition Cures Update certified technology must be in place by the start of the 2023 performance period, which consists of a 12-month performance period (January 1, 2023 - December 31, 2023) for Clinical Quality Measure reporting and any continuous 90 days for objective reporting.

Note: This information is based on what we know today and is subject to change.

	For details, please see MEDITECH's 2022 PI Final Rule communication and the CY 2021 PFS final rule communication.
12/31/2023	Vendors must have certified and made available the EHI Export capability by 12/31/2023.

Information Blocking & EHI

During the period of April 5, 2021 through October 6, 2022, an actor must respond to a request for access, exchange, or use of electronic health information (EHI), with, at a minimum, the EHI requested that they have, that corresponds to any of the data elements represented in the US Core Data for Interoperability Version 1 ([USCDI v1](#)).

The USCDI v1 introduced several new data elements onto the 2015 Edition CCD, and the MEDITECH code changes to include these new USCDI v1 data elements on the C-CDA and the FHIR R4 (Release 4) API are complete. Including all of the USCDI data elements on the C-CDA provides a streamlined method of sharing EHI in a single file during the period of April 5, 2021 through October 6, 2022.

After October 6, 2022, actors must respond to a request for access, exchange, or use of EHI, with, at a minimum, the EHI requested that they have, that is represented in ONC's definition of Electronic Health Information at [45 CFR 171.102](#). No particular standard or functionality is required (i.e., CCD or API) to enable the access, exchange, or use of EHI. MEDITECH will provide guidance on the methods for sharing this expanded definition in a future communication.

2015 Edition Cures Certification Update

Overview Of Updates

Health IT developers are required to certify and make available 2015 Edition Cures Updated technology prior to December 31, 2022. The following are some highlights of the certification criteria that is new for the 2015 Edition Cures update.

- **USCDI v1:** The 2015 Edition Cures Update includes replacement of the CCDS with the USCDI v1* as the data elements included in the CCD-A. Certification criteria that currently references or includes the CCDS will be updated to the USCDI standard—which includes the C-CDA used for health information exchange and for view/download/transmit via the Patient Portal, patient access API, and Public Health Reporting.

Update (Oct 6, 2021): This functionality is currently available and we recommend that you begin configuration of the USCDI C-CDA as soon as possible, in preparation for the 2023 Promoting Interoperability reporting period. Transitioning to the USCDI C-CDA now will allow more time and resources to be dedicated to testing Cures certified code changes & eCR code (to be delivered during 2022). To get started, reference M Task titled MD U.S. Core Data for Interoperability (USCDI v1).

- **Electronic Prescribing** criteria has been revised, updated from NCPDP SCRIPT standard version 10.6 to NCPDP SCRIPT standard version 2017071.
- **The Standardized API For Patient And Population Services** using the R4 FHIR API standard is a new certification criteria. Also known as FHIR Bulk Data Access (Flat FHIR), this criteria requires that EHRs support the ability for a client to retrieve large volumes of data for a group of patients via FHIR API.

Note: This information is based on what we know today and is subject to change.

- **Application Access Revocation For FHIR API** will provide a mechanism for a patient to see what applications they have granted access to their data, and allow a patient to revoke that access.
- The **SMART App Launch Framework** connects third-party applications to Electronic Health Record data, allowing apps to launch from inside or outside the user interface of an EHR system.

Additional hardware storage and network changes will be needed to address new certification requirements for Bulk Data, Application Revocation, and SMART App Launch. Further evaluation is underway, and additional details will be provided prior to code deployment.

**Note: On July 9, ONC released [USCDI v2](#), which includes new data classes and elements that will support the sharing of gender identity, sexual orientation, social determinants of health (SDOH), and other data. The release of v2 makes it eligible for consideration as part of ONC's Standards Version Advancement Process ([SVAP](#)). If approved through SVAP, USCDI v2 would then be available for voluntary implementation by Health IT developers beginning in Spring 2022, until a new final rule is published requiring such an update. MEDITECH is in the process of evaluating the new USCDI v2 to determine our road map for this new version.*

MEDITECH's Certification Plans

MEDITECH will certify our 2015 Edition Cures Update for all platforms and care settings throughout Q1/Q2 2022. We anticipate having updated CHPL listings available for all certified products by late spring/early summer 2022. This will include certification of the USCDI v1 code changes that were made available in Q2 of 2021, along with additional criteria. All organizations will need a priority pack toff to receive the certified 2015 Edition Cures Update. We will work with your organization to schedule an update to receive the certified code.

Promoting Interoperability (PI)

As stated in the [CY 2021 PFS final rule](#) for MIPS eligible clinicians, and in the [IPPS Final Rule](#) for eligible hospitals and critical access hospitals, participants of the PI Program must use technology certified to the 2015 Edition Cures criteria for performance and reporting periods beginning in 2023. This means the 2015 Edition Cures Update certified technology must be in place by the start of the 2023 performance period, which consists of four calendar quarters for Clinical Quality Measure reporting and any continuous 90 days for objective reporting.

In addition, the ONC 21st Century Cures Act final rule updated the certification criterion for clinical quality measures "Clinical Quality Measures (CQMs) – Report" at § 170.315(c)(3). These updates remove the HL7 QRDA standard requirements from the criterion, and instead require support for the CMS QRDA Implementation Guides. MEDITECH's SQL reports will be updated to reflect this change for the 2023 reporting year.

Questions

Please contact the [Regulatory Mailbox](#).