January 28, 2016

Andrew Slavitt
Acting Administrator
Centers for Medicare and Medicaid Services
Department of Health and Human Services
Attention: CMS-3323-NC
P.O. Box 8013
Baltimore, MD 21244-1850

311 Arsenal Street
Watertown, MA 02472

Re: CMS-3323-NC Certification Frequency and Requirements for the Reporting of Quality Measures Under CMS Programs

Submitted electronically through www.regulations.gov

Dear Administrator Slavitt,

athenahealth, Inc. ("athenahealth") appreciates the opportunity to provide comments on the Certification Frequency and Requirements for the Reporting of Quality Measures Under CMS Programs.

We provide electronic health record ("EHR"), practice management, care coordination, patient communication, data analytics, and related services to physician practices and hospitals, working with a network of over 72,000 healthcare professionals in all 50 states. All of our providers access our services on the same instance of continuously-updated, cloud-based software. Our clients' successes, exemplified by a Meaningful Use ("MU") attestation rate more than double the national average, underscore the very real potential of cloud-based health IT to improve care delivery and patient outcomes while increasing efficiency and reducing systemic costs.

athenahealth is committed to implementing effective Clinical Quality Measures ("CQM") and participating in a successful Certified Electronic Health Records Technology ("CEHRT") program. However, EHR developers are already subject to a certification process that is unnecessarily burdensome and complex. An increase in the frequency of certification for CQMs will reduce the value of the program and further limit the industry's ability to innovate. athenahealth does *not* support the proposed increase in certification frequency.

A requirement to recertify each new version of CEHRT and CQMs is simply not realistic under 21st century development models.   While some CEHRT developers may still have development cycles that take months or years, modern software development cycles release new versions in a matter of weeks and months. Health IT is rapidly evolving toward these modern development models and the innovation cycles for product enhancements are short.

athenahealth releases a new version of our single instance, cloud-based EHR monthly. These new versions frequently include changes that enable our provider clients to succeed under programs like MU, the Physician Quality Reporting System, the Value-Based Modifier, and alternative payment models. For example, a monthly release might include a small workflow change to better promote provider-patient communication through a patient portal. A monthly certification process is not only unnecessary and overly burdensome, but it would prevent companies like athenahealth from making these iterative updates and delay improvement in provider performance under these programs.

Certification of this frequency will generate a never-ending, repetitive cycle of "release, certify, release." The actual certification process will take four weeks or longer and proceed beyond the subsequent CEHRT version's release date. For example, January's certification will be incomplete when February's version of CEHRT is released and the process must begin anew.   In addition, the frequent recertification will divert developer resources away from responding to product improvements requested by providers. Resources often exceed $70,000 to certify on all measures, and more frequent certification requirements will increase this amount multiple times over, further diverting resources away from true solution design and toward the labor-intensive, check-the-box requirements of certification.

athenahealth strongly urges CMS to adopt a policy that requires certification only for significant, relevant changes to CEHRT and no more frequently than annually.   CMS should ensure that new programs and adjustments to existing programs encourage iterative innovation in health IT that enables provider success as our industry rapidly moves toward value-based payment models. Certification requirements that penalize rapidly innovating CEHRT developers are completely at odds with that goal.

We appreciate the opportunity to share our thoughts on certification frequency and quality measures under CMS. We look forward to continuing to work with you and your staff and would be happy to discuss any of our input.

Sincerely,

Stephanie Zaremba
Senior Manager, Government & Regulatory Affairs
athenahealth, Inc.