

January 13, 2016

Andy Slavitt, Acting Administrator Centers for Medicare & Medicaid Services 200 Independence Ave., SW Washington, DC 20201

Dear Administrator Slavitt,

The American Academy of Family Physicians, which represents 120,900 family physicians and medical students, was pleased to learn of your recent comments at the JP Morgan Healthcare Conference in California regarding the Meaningful Use program. The AAFP shares your perspective that, while the Meaningful Use program may have "met its goals and served its usefulness", it should be "replaced with something better."

We also applaud your comments regarding the current frustrations of physicians. We commend you for acknowledging in such a public manner that CMS needs to "get the hearts and minds of physicians back." This statement will have a positive impact on our members who are facing the day-to-day frustrations of the administrative complexity of practicing medicine. But such a statement must be followed with thoughtful and meaningful actions.

We view, with great optimism, your comments that "[t]he Meaningful Use program as it has existed will now be effectively over and replaced with something better." The AAFP thanks you for making this comment and agrees with you that our national health information strategy must shift. We call on you and your staff to assure that not only the name of the program will change but that the current criteria will be definitively replaced. As we have stated in the past, and still believe, the Meaningful Use program needs to be stopped and replaced or revised. We have stated our many concerns with the program:

- It currently adds more burden than benefit to patient care,
- It lacks alignment with the requirements envisioned in the Merit Based Payment
- There is need to place a huge effort and focus on interoperability to further accelerate work in that domain.

We believe the something better needs to focus on:

- Accelerating robust interoperability to support continuity of care and care coordination,
- Eliminating burdensome requirements on practices that will siphon resources away from caring for our patients, and

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Integrating the numerous other initiatives and regulations governing patient care by the
federal government, which currently add significant administrative complexity and have
begun to interfere with the efforts of family physicians to improve the care they provide to
their patients.

Primary care is a finite resource, which is currently under-valued and under resourced. Our patients and our nation desperately need health care policy to enhance efficiency, complement workflow, and improve our ability to deliver the best patient care. We are not alone in believing the current Meaningful Use program and its criteria do not embody these principles. Retiring those policies and replacing them with policies that abide by these principles will take enormous strides toward regaining the hearts and minds of physicians. We look forward to working with you and CMS in achieving these goals.

Should you have questions, please contact Steven E. Waldren, MD MS, Director, Alliance for eHealth Innovations at 1-800-274-2237, extension 4100 or swaldren@aafp.org.

Sincerely,

Robert L. Wergin, MD, FAAFP

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