

[HEALTH IT, HOSPITALS](#)

Being “complaint proof” on information blocking won’t be easy for providers, vendors

The HHS' information blocking rule goes into effect Monday, and for nearly a year, providers and IT vendors have been racing to prepare. But they have faced several hurdles along the way, including figuring out how to handle scenarios that could make them non-compliant.

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The federal information blocking rule is set to go into effect Monday. But the expansive nature of the regulation and a lack of clarity around what could be considered information blocking is making it hard for providers and health IT developers to comply.

That’s according to Josh Mast, [Cerner’s](#) lead regulatory strategist, and Dr. Joseph Schneider, chair of the Texas Medical Association’s Committee on Health Information Technology. Mast and Schneider spoke about some of the challenges their organizations are facing navigating the rule at the virtual [2021 ONC Annual Meeting](#) Tuesday.



Information blocking [is the practice of](#) interfering with access to, exchange or use of electronic health information. Last March, the Department of Health and Human Services [issued historic rules focused](#) on expanding interoperability and preventing information blocking. Since then, providers and IT vendors [have been working](#) to ensure they will be ready to comply with the rules set to go into effect on April 5.

But, as stakeholders have learned, ensuring compliance has its own unique set of challenges.

Among the biggest is the scope of the information blocking rule and all the data that could fall into its framework, Mast said.

“The definition of electronic health information is any information contained in a designated record set,” he said. “And that is a whole lot of information.”

North Kansas City, Missouri-based Cerner is looking at all of its products and services to determine where those pieces of information live, so when they get a request, they can pull the data needed with ease, Mast said.

For health IT developers, requests for information can come from anywhere — clients, patients or even third-party entities. So, Cerner is also working to identify where requests are coming from, Mast said. They are trying to tag each request they receive, as well as how they respond, to build out their operational framework before the rules officially take effect.

Providers, on the other hand, are more concerned with the various scenarios that could be considered information blocking, Texas Medical Association’s Schneider said.

For example, Schneider recalled how a physician recently went to the [Texas Medical Association](#) to sort out a data conundrum. The doctor’s office had asked a local hospital for information on the clinic’s patients that were also admitted at that facility. The office requested that the hospital send the information directly or via the local health information exchange as it had a non-Epic EHR. But the hospital’s Epic system could neither coordinate with the office’s EMR, nor was it set up to integrate with the local HIE, resulting in potential information blocking.

This example illustrates one of the hurdles providers could face while trying to comply with the rule, Schneider said.

There could be all sorts of other challenges that providers are not prepared for.

“One of the other things that we will be doing [to combat this issue] is collecting scenarios,” he said. “There is a large void of ‘what I should do’ material that is specific enough for an individual physician or physician practice to be able to implement these things.”

Collecting and sharing scenarios can also help determine how things should be handled, rather than the issue going to the courts and being decided there.

“Our members want to be complaint proof,” Schneider said. “That is incredibly challenging given the way this is being rolled out, because you cannot necessarily put a case out to the ONC and ask, ‘is this is information blocking?’ They will not tell you. We have to step in as much as possible.”

Ultimately, compliance with the rules is a work in progress, as they are expected to change the shape of the health IT landscape for decades to come, Cerner’s Mast said.

“I will say that I think this is a marathon,” he said. “[The rules are] an ongoing thing that will be with us as long as HIPAA is with us.”