



**SAN ANTONIO
REGIONAL HOSPITAL**

Medical Staff

SARH MEDICAL STAFF NEWSLETTER

Volume 2, Number 2
May 2021

Dear San Antonio Regional Hospital Physicians and Healthcare Providers,

I would like to thank everyone for the hard work you put in every day for the care of our patients and appreciate the sacrifices you have all made. I hope that in the coming months you are able to find time to enjoy a vacation with your family. There are 3 things I would like to bring to your attention:

Physician Well-Being Survey:

Recent studies show almost half of all physicians show signs of burnout, and this was prior to the pandemic. Numerous adverse outcomes are linked to physician burnout including emotional exhaustion, detachment, depression, substance use disorder, suicide, lack of empathy for patients, reduced patient satisfaction and major medical errors. Reducing burnout can have a positive impact on all of us.

The Well-Being Committee has been tasked with a solution to address this issue. One of our first steps is to conduct a well-being survey amongst our members. The AMA is assisting us with this survey which will have not only a burnout assessment but also assessment of the working environment at SARH. *It is imperative that everyone participates in this survey as we cannot form specific interventions without data.*

Diversity, Equity and Inclusion:

At SARH we aim to create an organization that helps us all thrive and prosper and to do so we need to celebrate and nurture diversity and advance equity and inclusion for all our physicians and providers. Gender inequity has been a long standing problem in medicine and recent reports highlight such issue particularly in surgery. To improve gender equity for female physicians, we encourage increased participation of female physicians in medical staff governance. We welcome other ideas that support diversity, equity and inclusion at SARH.

MICRA:

MICRA is once again under attack. The lawyers are at it and have qualified their “Fairness for Injured Patients Act” for the November 2022 ballot. This Act, if passed, may effectively eliminate MICRA’s cap on non-economic damages. The proposed initiative would boost the current cap at \$250,000 to \$1.2M and allows judges and juries to exceed the limit in cases involving catastrophic injury and special circumstances; it would also eliminate the cap on attorney’s fees. You can read more about it in the following pages and review the medical malpractice premium savings under MICRA that may be gone if we lose this battle. I urge everyone to lend your support at protectmicra.org.

I hope to see you at the next quarterly Medical Staff meeting on June 15, 2021, and as always, please reach out to me if I can be of help.

Sincerely,
David Dang, MD
Medical Staff President



2021MEC

David Dang, M.D.,
President
Sara Khan, M.D., Past
President
Dennis Trigueros, M.D.,
President Elect
Mark Shiu, D.O.,
Treasurer
Basim Abdelkarim, M.D.,
Member at Large
Nedra Vincent, M.D.,
Member at Large
Ali Heidari, M.D., Member
at Large
Fadi Tahrawi, D.O.,
Anesthesia Chair
Faraaz Khan, M.D.,
Emergency Medicine Chair
Steven Barag, D.O.,
Family Medicine Chair
Roger Duber, D.O.,
Medicine Chair
Cecilia Phong, D.O.,
OB/GYN Chair
Antoune Saad, M.D.,
Pediatric Chair

John Goffigan, M.D.,
Radiology Chair
Deborshi Roy, M.D.,
Surgery Chair

Contact Us:

ljacobo@sarh.org

909-920-4942

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MPEC EXEMPLARY RECOGNITION

Arianjam, Afshin MD
Chang, Elbert MD
Du, Joanna MD
Ebrahimi, Benham MD
Engle, Jamie PA-C
Jahng, Kenneth MD
Johnson, Franklin DO
Leung, Anna MD
Mourani, John MD
Osorio-Flores, Martin MD
Phong, Cecilia MD
Pineda, Elmer MD

Rayes, Bilal MD
Rizvi, Abid MD
Rodriguez, Hellen MD
Sandhu, Rohinder MD
Samarany, Samir MD
Singh, Kuldeep MD
Sommer, Brenna DO
Spivack, Brian MD
Valenzuela-Gamm, Monica DO
Vu, Toni DO
Wagman, Larry MD

Provider Quality Performance and Updates:

Immediate Postop Note/Operative Report: Per The Joint Commission Standards, either an Operative Report or an Immediate Postop Note must be completed before the patient leaves the PACU.

Surgical Site Infection: Please describe actual findings of infection in the body (Procedure/Technique Description section) of the Operative Report, even if the boxes for infection are checked. This would prevent an existing infection from being counted as a postoperative complication. The boxes are there as reminders and for tracking. **The surgeon's narrative is necessary to determine whether infection was present at the time of surgery.**

Hand Hygiene: Perform hand hygiene with an alcohol-based hand gel or with soap and water when entering and before leaving a patient room/treatment area, and between patients regardless if gloves were worn. Hand hygiene must be performed before donning PPE. Gloves do not replace hand hygiene. **Hand hygiene must be performed before donning and after doffing gloves.**

Hand washing with soap and water is necessary when hands are visibly soiled with body secretions or when caring for a patient with C. difficile.

CURES: The CURES database is available through Cerner (without a separate login) for consultation prior to prescribing Schedule II-V medications. It can be accessed through the "Opioid Review" component on the Mpage Provider View.

EPCS: Electronic Prescription of Controlled Substance is now available through Cerner. Please contact Medical Staff office to initiate the process of validating your credentials and enrollment.

HCAHPS: Progress has been made to improve 3 targeted areas: 1) Communication with Doctors, 2) Care Transition and 3) Cleanliness & Quietness.

Rounding with Nurses: Please make every effort to round with nurses. One approach is for physicians to contact the unit secretary before rounding and the secretary would do their best to organize.

Use of White Boards: Nurses have been using the white boards in patient rooms to either write down questions from the patient or family or alert physicians that the patient has questions if the board is too small.

Ask Me 3 Campaign: This encourages patients to ask 3 questions: *What is my main problem? What do I need to do? Why is it important for me to do this?* Please consider incorporating the answers to these questions in daily rounds with patients.

One suggestion from the HCAHPS Physician Committee is that at each patient encounter we ask ourselves *whether we have spoken to the patient in a way that the patient could understand, listened to the patients carefully and treated the patient with courtesy and respect.*

Patient HCAHPS Comments: Positive comments from patients will be commended as usual for Exemplary Recognition. Negative patient comments now will be tracked and trended by the MPEC and reported to the MEC as needed, for improvement projects.

Cardiogenic Shock Team:

To strengthen the management of cardiogenic shock patients and to significantly reduce patient mortality, the Cardiology Division has initiated the process to develop a Cardiogenic Shock Protocol and a dedicated Shock Team. The on-call Shock Team will consist of:

- ED Physician
- Hospitalist
- Interventional Cardiologist
- Cardiothoracic Surgeon
- Critical Care Physician
- Imaging Cardiologist

Advanced Heart Failure: In partnership with Cedars Sinai, SARH has opened an Advanced Heart Failure Clinic. The Clinic is currently open once a month on the 2nd Monday with Dr. Robert Cole. Dr. Cole works with our local Cardiologists to provide patient evaluation, consultation, advanced treatment options, and access to additional expertise from Cedars Sinai care team. A few of the specialized services will include:

- Referral for LVAD (left ventricular assist device) evaluation as a bridge to transplant or as a destination therapy in terminally ill patients.
- Referral for transplant evaluation in patients with end-stage cardiac disease.
- Referral for CardioMEMS HF system for patients with recurrent heart failure admissions. This system remotely monitors changes in pulmonary arterial pressure, an early indicator of the onset of worsening heart failure.
- Referral for cardiac biopsy for confirmation of certain cardiomyopathies.

CME PROGRAMS/WEBINARS/LOCAL MEETINGS:

SARH CME Schedule: (Via Emailed Zoom Link)

May @ SARH

5/27/21: Mark Hanna, M.D., *Colorectal Cancer*

June @ SARH

6/10/21: Bhaveshkumar J. Patel, M.D., *GERD*

6/24/21: Hussein Abidali, M.D., *Management of Severe Acute Pancreatitis and its Complications*

San Bernardino County Medical Society: Visit sbcms.org/events

- June 24, 2021 @ 6:00pm-7:30pm
SBCMS Officer Installation & Award Recognition Dinner
Burrage Mansion; 1205 W. Crescent Ave., Redlands, CA 92373

Riverside County Medical Association: Visit rcmadocs.org/news-events/events.aspx

- June 22, 2021 @ 12:15
Reputation Matters – Managing your Practice’s Online Reputation - FREE
- July 16, 2021 @ 8:am to 12:15pm
33rd Annual Western States Regional “Virtual Conference” on Physicians’ Well Being

CMA: Visit cmadocs.org/aces

Adverse Childhood Experiences (ACEs)

California is taking aggressive steps to address ACEs and toxic stress through the first-in-the-nation ACEs Aware initiative, which aims to establish routine ACE screening in primary care and develop a network of care, including cross-sector coordination supports aligned with primary care.

CMA encourages all physicians, particularly Medi-Cal providers, to receive the free, two-hour training to learn how screening, risk assessment and evidence-based care can effectively intervene on toxic stress.



MICRA:FactSheet

Here's why a broad coalition of physicians, dentists, nurses, hospitals, safety net clinics, and other health care providers is committed to vigorously fighting the "Fairness for Injured Patients Act".

Effectively eliminates MICRA's cap on non-economic damages

Proponents of this measure say it will simply index for inflation the state's current cap on non-economic damages. However, the lawyer who drafted this measure has included deceptive and cynical language that creates a new category of lawsuits not subject to the cap on non-economic damages while effectively eliminating the cap on non-economic damages for any medical malpractice case.

Costly for consumers and taxpayers

According to the California Independent Legislative Analyst's Office (LAO), this measure would lead to "annual government costs likely ranging from the low tens of millions of dollars to the high hundreds of millions of dollars", placing the burden of this additional cost on all of us, while reducing access for those who need it most, including those who use Medi-Cal, county programs, safety net providers and school-based health centers.

This measure will vastly increase the number of lawsuits filed in California, and further divert resources for patient care to the legal system.

A misleading measure intended to fool the voters

This measure was written by an out-of-state trial attorney who is looking to cash in with California cases. Our health laws should protect access to care and control costs for everyone, not increase lawsuits and payouts for lawyers.

This is not an adjustment of the MICRA cap; it is a virtual elimination. It would also eliminate the state's current cap on attorney's fees in medical malpractice cases, allowing lawyers to take up to 50% of a patient's jury award in malpractice cases.

Jeopardizes patient access to quality health care

This measure would have a particularly adverse impact on community health clinics. This measure will raise insurance costs, causing physicians in high-risk specialties like OB/GYN to reduce or eliminate patient services.

There are, regrettable, individual tragic cases of medical negligence. However, under current law, patients can already receive unlimited awards for past and future health care costs, for lost wages and in cases of gross negligence.

This ballot measure is simply a cynical effort by a single trial lawyer looking to increase lawyer's share of medical malpractice awards and line his own pockets while driving up health care costs for all Californians.

Find out how you can help stop the deceptive MICRA measure:
cmadocs.org/micra

The below chart illustrates how much MICRA has saved physicians in malpractice premiums. These savings may be lost if MICRA is defeated. Please consider lending your support at: protectmicra.org

2011 San Bernardino County Medical Society MICRA Premium Savings Chart						
Specialty	San Bernardino County, CA	Dade County, FL	Long Island NY	Wayne County, MI	FL-NY-MI Average	MICRA Savings
Allergy	\$9,103.00	\$24,183.00	\$10,826.00	\$16,909.00	\$17,306.00	\$8,203.00
Anesthesiology	\$23,957.00	\$48,367.00	\$37,657.00	\$41,697.00	\$42,574.00	\$18,617.00
Cardiology (Invasive)	\$27,327.00	\$95,007.00	\$40,738.00	\$66,711.00	\$67,485.00	\$40,158.00
Cardiovascular Surgery	\$69,033.00	\$172,739.00	\$121,665.00	\$174,918.00	\$156,441.00	\$87,408.00
Dermatology (Lipo/Cosmetic)	\$63,853.00	\$54,413.00	\$36,779.00	\$23,797.00	\$38,330.00	-\$25,523.00
Emergency Medicine	\$39,268.00	\$95,007.00	\$58,971.00	\$87,121.00	\$80,366.00	\$41,098.00
Family Practice (Non-Surgical)	\$22,966.00	\$44,912.00	\$26,817.00	\$33,893.00	\$35,207.00	\$12,241.00
General Surgery	\$63,853.00	\$200,377.00	\$121,665.00	\$143,445.00	\$155,162.00	\$91,309.00
Internal Medicine (Non-Invasive)	\$19,044.00	\$50,094.00	\$36,779.00	\$34,350.00	\$40,408.00	\$21,364.00
Neurosurgery	\$118,946.00	\$248,744.00	\$321,713.00	\$201,512.00	\$257,323.00	\$138,377.00
OB/GYN	\$84,458.00	\$200,377.00	\$196,111.00	\$135,935.00	\$177,474.00	\$93,016.00
Ophthalmology - LASIK/Cosmetic	\$19,044.00	\$50,094.00	\$36,437.00	\$37,955.00	\$41,495.00	\$22,451.00
Orthopaedics	\$69,033.00	\$146,828.00	\$146,084.00	\$144,667.00	\$145,860.00	\$76,827.00
Otolaryngology (Cosmetic)	\$63,853.00	\$60,459.00	\$108,110.00	\$81,556.00	\$83,375.00	\$19,522.00
Pathology	\$13,254	\$44,912.00	\$24,769.00	\$19,524.00	\$29,735.00	\$16,481.00
Pediatrics (Non-Surgical)	\$19,044.00	\$31,093.00	\$26,817.00	\$28,928.00	\$28,946.00	\$9,902.00
Plastic Surgery	\$63,853.00	\$95,007.00	\$108,110.00	\$91,565.00	\$98,227.00	\$34,374.00
Proctology	\$63,853	\$69,096.00	\$64,281.00	\$53,751.00	\$62,376.00	-\$1,477.00
Psychiatry (Non-Shock)	\$13,254.00	\$24,183.00	\$10,826.00	\$17,853.00	\$17,621.00	\$4,367.00
Radiology (Non-Invasive)	\$19,044.00	\$95,007.00	\$61,100.00	\$45,293.00	\$67,133.00	\$48,089.00
Thoracic Surgery	\$63,053.00	\$172,739.00	\$100,500.00	\$154,089.00	\$142,443.00	\$79,390.00
Urology	\$27,327.00	\$60,459.00	\$64,281.00	\$55,655.00	\$60,132.00	\$32,805.00
Average - All Specialties	\$44,383.00	\$94,732.00	\$80,047.00	\$76,869.00	\$83,883.00	\$39,500.00

FOUNDATION NEWS

Welcome Michelle Stoddard, the new San Antonio Hospital Foundation President!!! Many thanks to Mike Tracey for his tremendous service to the Hospital Foundation.



Enter to Win 2-Round Trip Tickets to Honolulu, HI!

Nonstop Flight to Nonstop Fun on Hawaiian Airlines from ONT

Including airport transportation provided by
Executive Transportation Services

For more information on how to
purchase your raffle ticket(s):

Call 909.920.4799 or Email SAHF@sarh.org

One Winner will be drawn on June 14, 2021
Rules and Restrictions Apply



SAN ANTONIO
HOSPITAL FOUNDATION

Want to get away? San Antonio Hospital Foundation are selling raffle tickets and one (1) **LUCKY** winner will win two (2) *Hawaiian Airlines* tickets to Honolulu, Hawaii, compliments of *Ontario International Airport*.

Raffle Prize Details: Two (2) roundtrip economy Hawaiian Airlines tickets from Ontario (ONT) to Honolulu (HNL), valid through December 2022, and roundtrip Ontario airport transportation provided by *Executive Transportation Services*

- 1 Ticket - \$20 * 3 Tickets - \$50 * 7 Tickets - \$100

This San Antonio Hospital Foundation fundraiser will support our hospital's programs and services. The winner will be pulled on June 14, 2021 at the 36th Annual San Antonio Golf Classic, and the winner does not need to be present to win. Please stop by the Foundation Office (located in the Medical Arts Building at 1175 East Arrow Highway, Suite J), Monday through Friday between 9:00 am and 3:00 pm, or give us a call at 909.920.4799 to purchase your raffle tickets (no tickets will be sold online).

BIRTHDAYS!

Happiest of birthday wishes to the following May and June celebrants:

<i>MAY BIRTHDAYS</i>	
Abdalla, Nisreen S., FNP-C	Lee, Rene W., D.O.
Agarwal, Rishi R., M.D.	Lercel, Gregory, M.D.
Ahn, B. D., M.D.	Li, Karin C., M.D.
Bautista, Raymundo S., M.D.	Ling, Angie, PA-C
Benavidez, Michael A., D.O.	Loitz, Robert D., M.D.
Biegel, Susan C., M.D.	Luke, Priscilla K., M.D.
Breuer, Tuvia, D.O.	McCarron, William F., D.P.M.
Bueno, Kristine T., PA-C	Merla, Ramanna, M.D.
Caldwell, S. Nohemi, M.D.	Oakley, John L., M.D.
Chen, Mark T., D.O.	Obey, Shawanda R., M.D.

Chilakamarri, Nitin, M.D.
Childers, Ben J., M.D.
Ching, Andrea S., M.D.
Chiriano, Jason T., D.O.
Choi, Johnny J., M.D.
Coll, Jonathan, M.D.
Consolo, Michael J., D.O.
Dobalian, Daniel D., M.D.
Ernst, Steven B., M.D.
Frandsen, David L., FNP-C
Friedman, Gerald S., M.D.
Garg, Natasha, D.O.
Hakkak, Fatima, D.O.
Hollingsworth-Moore, Annette, M.D.
Hourany, Joseph, M.D.
Hsu, Frank P., M.D.
Kamel, Benjamin M., D.P.M.
Karimi, Misagh, M.D.
Khan, Faraaz O., M.D.
Kim, Michael J., D.P.M.
Koo, Choon S., M.D.
Lally, James M., D.O.

JUNE BIRTHDAYS

Amirnovin, Ramin, M.D.
Anand, Neil, M.D.
Ardehana, Mohitkumar K., M.D.
Badday, Jalal M., M.D.
Barvalia, Mihir M., M.D.
Berberyan, Ani, M.D.
Bixenstine, Paul, M.D.
Buch, Dhiren Y., M.D.
Campbell, Colleen M., PA-C
Cano, Elizabeth A., FNP-C
Cernilia, James, M.D.
Chan, Bryan P., M.D.
Charman, Howard P., M.D.
Cheng, George J., M.D.
Cheung, Andrew T., M.D.
Ching, Gregory P., M.D.
Cho, Thomas W., M.D.
Discepolo, William L., M.D.
Engle, Jamie L., PA-C
Ezzeddine, Tarek, M.D.
Gonzalez, Andres, M.D.
Hakim, Amy A., M.D.
Hickerson, Adam D., M.D.
Jayasekara, Deepthi K., M.D.

Pakdaman, Reza, M.D.
Pavia, Jose M., M.D.
Pradhan, Rita K., M.D.
Qazi, Faisal M., D.O.
Rayes, Bilal R., M.D.
Retino, Rosario B., M.D.
Saad, Antoune G., M.D.
Saca, Ricardo E., M.D.
Sandy, Ian F., M.D.
Shen, Huafeng, M.D.
Song, Betty S., M.D.
Suong, Robert R., M.D.
Tuozo, Froilan, FNP
Valamanesh, Daryoosh, M.D.
Valenzuela-Gamm, Monica A., D.O.
Vanyo, Lori L., M.D.
Vu, Toni D., D.O.
Wagman, Lawrence D., M.D.
Wali, Autar K., M.D.
Wei, Yunfei, M.D.
Yalamanchili, Harish, M.D.
Yaqub, Muhammad, M.D.

Kattash, Maan M., M.D.
Lai, Elizabeth T., M.D.
Leoni, Regina, M.D.
Martin, Andrew J., M.D.
Mehta, Khyati, M.D.
Nguyen, Tan K., M.D.
Patel, Sachin K., M.D.
Pineda, Elmer B., M.D.
Qadeer, Atif, M.D.
Rahimi, Menezha, D.O.
Raptis, Derrick N., M.D.
Schoellerman, Manal M., M.D.
Siegel, Lance M., M.D.
Stevens Jr., Walter E., M.D.
Stevens, Gloria J., M.D.
Suksompoth, Kanokrat, M.D.
Tampoya, Florence T., M.D.
Tassone, Heather M., D.O.
Tsang, Walter Y., M.D.
Vaid-Raizada, Veena, M.D.
Vigil, Carlos R., D.O.
Win, Sandar, M.D.
Yamzon, Jonathan L., M.D.
Yoo, Peter, M.D.

In Memory Of...

We honor the memory and contributions of the following Honorary Member of our SARH Medical Staff who has passed on: Arnold Roth, M.D.

Welcome New SARH Medical & Allied Staff Members:



Fahimi, Ali, M.D.
Anesthesia
999 San Bernardino Rd.
Upland, CA 91786
Tel: (909) 985-2811
Fax: (909) 920-6363



Shareef, Yasir S., D.O.
Neurology
The Neurology Group
2895 N. Towne Ave.
Pomona, CA 91767
Tel: (909) 982-2719
Fax: (909) 946-9931



He, Yangdong, M.D.
Internal Medicine
10399 Lemon Ave.
Unit 102B
Rancho Cucamonga, CA 91737
Tel: (734) 358-2738
Fax: (909) 803-0607



Sheu, Yeong An, M.D.
Gastroenterology
Chaparral Medical Group
811 E. 11th St.
Suite 208
Upland, CA 91786
Tel: (909) 982-2279
Fax: (909) 946-3070



Nikolova, Andriana P., M.D.
Cardiology
California Heart Center
8670 Wilshire Blvd.
Suite 200
Beverly Hills, CA 90211
Tel: (310) 248-8300



Smith, Ryan G., M.D.
Ophthalmology
Pacific Eye Institute
555 N. 13th Ave.
Upland, CA 91786
Tel: (909) 982-8846
Fax: (909) 949-3967



Sequeira Abarca, Ernesto L., M.D.
Internal Medicine
7974 Haven Ave.
Suite 210
Rancho Cucamonga, CA 91730
Tel: (909) 398-0521
Fax: (909) 948-5577



Xie, Kate, M.D.
Ophthalmology
California Eye Specialists
1845 W. Redlands
Unit 101
Redlands, CA 92373
Tel: (909) 363-1450
Fax: (909) 363-1480



Shahani, Shilpa A., M.D.
Hematology/Oncology
City of Hope
1500 E. Duarte Rd.
Duarte, CA 91010
Tel: (626) 775-3514
Fax: (626) 218-5310

General Industry Information:

- Mandatory Electronic Prescriptions begin January 1, 2022 (AB 2789). The law requires that all prescriptions in California shall be issued as an electronic data transmission prescription (e-prescription). The law provides certain exemptions including if an e-prescription is temporarily unavailable because of technological or electrical failure, or if the prescription is dispensed by a pharmacy located outside of California. Healthcare professionals who fail to meet the requirements of AB 2789 will be referred to the appropriate state professional licensing board solely for administration sanctions, as deemed appropriate by the Medical Board of California.
- CMA Practice Management Tools: Visit cmadocs.org/practice-management for out-of-network billing assistance, Medicare Resource Center, contracting resources and subscribe to practice management newsletter.
- AMA Practice Management: Visit ama-assn.org/practice-management

- Free CMA PPE Supply: Visit ppereliefdirect.org. The PPE is offered free of charge with only a nominal shipping and handling fee per order.
- CMA Telehealth Resource Center: Visit cmadocs.org/telehealth/resources. The resources listed can be sorted by category, topic, type and source to address the specific issues. New resources will be added to this center regularly.
- 2% Medicare sequester cuts delayed through end of 2021: On April 15, 2021, President Joe Biden signed into law HR 1868 to pause the 2% Medicare sequestration payment cuts to physicians through the end of 2021 because of the ongoing COVID-19 pandemic. The cost of the pause will be offset by extending the sequester one more year into 2031.
- CMA is also sponsoring a legislative effort in California (SB 250, Pan) to reduce administrative burdens in physician practices, so physicians can spend less time on paperwork and billing and more time dedicated to patient care. SB 250 will reform prior authorization processes and relieve physicians from having to repetitively submit prior authorizations for a set period of time. The bill would also streamline the billing process for physicians in hospital settings by requiring payors to collect enrollee cost-sharing amounts directly (including deductibles).
- The federal information blocking rule, issued by the Office of the National Coordinator for Health IT, took effect on April 5, 2021. The rule, called for under the 21st Century Cures Act, is intended to enable more widespread access, use and exchange of patient data. It will, with some exceptions, prohibit any action defined as “information blocking” by physicians, hospitals and health information technology vendors. Information blocking is defined as practices that prevent or materially discourage the access, exchange, or use of electronic health information.
- CMS announced that it would be granting automatic exceptions from reporting requirements for clinicians and providers participating in Medicare quality reporting programs due to the significant disruptions the COVID-19 public health emergency is having on physician practices.