Dr. Oz Confirmed as CMS Administrator. Mehmet Oz, MD was confirmed by the Senate as the Administrator for the Centers for Medicare & Medicaid Services (CMS) with a party line vote of 53-45. Dr. Oz is a television personality, physician, author, and professor emeritus of cardiothoracic surgery at Columbia University. As the head of CMS, Dr. Oz will oversee the federal agency that provides health coverage to more than 160 million through Medicare, Medicaid, the Children's Health Insurance Program (CHIP), and the Health Insurance Marketplace.

House Subcommittee Holds Hearing on Cybersecurity Vulnerabilities. The House of Representatives Energy and Commerce Committee, Oversight and Investigations Subcommittee, conducted a hearing entitled: "Aging Technology, Emerging Threats: Examining Cybersecurity Vulnerabilities in Legacy Medical Devices." Witnesses included: (i) Christian Dameff, MD, MS, FACEP, Emergency Physician and Co-Director, Center for Healthcare Cybersecurity, University of California San Diego Health; (ii) Greg Garcia, Executive Director, Health Sector Coordinating Council Cybersecurity Working Group; (iii) Erik Decker, Vice President and Chief Information Security Officer, Intermountain Healthcare; (iv) Michelle Jump, Chief Executive Officer, MedSec; and (v) Kevin Fu, PhD, Professor, Department of Electrical and Computer Engineering, Khoury College of Computer Sciences, Department of Bioengineering, Kostas Research Institute (KRI) for Homeland Security, Northeastern University. Watch the hearing here.

Bipartisan Prior Authorization Legislation Reintroduced. Rep. Mark Green, M.D. (R-TN) re-introduced his *Reducing Medically Unnecessary Delays in Care Act of 2025,* alongside Doctor Caucus Co-chair Rep. Greg Murphy, M.D. (R-NC) and the Congressional Democratic Doctors Caucus Co-chair Kim Schrier, M.D. (D-WA) to address the use of prior authorization requirements in Medicare, Medicare Advantage, and Part D prescription drug plans. This bill was cosponsored by: Reps. John Joyce (R-PA), Rich McCormick (R-GA), Andy Harris (R-MD), Tim Burchett (R-TN), Brian Babin (R-TX), Mariannette Miller-Meeks (R-IA), Mike Kennedy (R-UT). The legislation would mandate that prior authorization decisions be made by a board-certified physician in the same specialty, mandate that restrictions be based on established clinical criteria, and add transparency requirements. Read the bill here.

CMS Updates their Hospital Price Transparency Fact Sheet. The Centers for Medicare & Medicaid Services (CMS) updated their Hospital Price Transparency Fact Sheet with information on compliance and enforcement. Under the Hospital Price Transparency Final Rule, all hospitals are required to post on a publicly available website pricing information about the items and services they provide. CMS audits hospitals and investigates complaints from the public to ensure compliance. The fact sheet with links to resources is available here.

CMS ICD-10 Coordination & Maintenance Committee: Submit Procedure Code Comments by April 18. CMS will not present Spring 2025 ICD-10-PCS procedure code topics during a public meeting. Instead, the agency is soliciting public comments by email, and it will post materials, Q&As, and related documents. The deadline to submit comments on procedure code topics for October 1, 2025, implementation is April 18. Send your questions or comments

to ICDProcedureCodeRequest@cms.hhs.gov. Access the ICD-10 Coordination and Maintenance Committee Meeting Materials here for more information.

CMS Meeting Update: Spring 2025 ICD-10 Coordination and Maintenance Committee. CMS has made the recording links and passwords for the Spring 2025 ICD-10 Coordination and Maintenance Committee Update available here. The agency also announced that April 18, 2025, is the deadline for receipt of public comments on proposed new procedure codes, addenda, and revisions being considered for implementation on October 1, 2025. Comments on procedure code topics should be directed to CMS at ICDProcedureCodeRequest@cms.hhs.gov

ASTP/ONC Updates Inferno to Authorization Inputs. Inferno, the FHIR® testing framework available for voluntary industry testing and ONC Health IT Certification Program testing, is updating the way inputs are managed for OAuth 2.0 authorization fields. This change is part of continued efforts to optimize the user experience of Inferno and streamline the process for test authors to create and maintain tests. The primary impact for test users is a more organized and dynamically updated interface, where OAuth 2.0-related inputs, including those for SMART App Launch, are grouped together and change according to selected authorization workflows.

This change will provide the following benefits: (i) Inferno will intelligently display or hide authorization-related fields based on the selected authorization workflow, making it easier for users to understand which inputs are required for a given test; (ii) Inferno will automatically perform token refreshes, when necessary and without any special attention from the test author or user; and (iii) Test authors can include a single authorization input in their tests instead of including several for the various components of the OAuth 2.0 authorization workflow. While ONC strives for backwards compatibility and a stable user experience, the following users may need to adjust their testing workflows as a result of this upcoming change: (i) Users who have created custom presets or sets of saved inputs; (ii) Users who reuse old test sessions; (iii) Users who integrate directly with the Inferno JSON API; and Users who automate Inferno user interface interactions.

A preview of this upcoming change is available here on the Inferno on HealthIT.gov pre-production quality assurance (QA) website. Additional technical details can be found in the corresponding news article at inferno.healthit.gov. Questions and feedback may be submitted to the Inferno team or to ASTP/ONC via the Health IT Feedback and Inquiry Portal.

Article: Use of AI in Revenue Cycle Management. An article was published in *The American Journal of Managed Care* entitled “AI in Health Care: Closing the Revenue Cycle Gap.” Authored by CAQH staff members Erin Weber, MS, Kristine Burnaska, PhD, Robert Bowman, MA (a member of the WEDI Board of Directors), and Samantha Holvey, MHL, the article provides an overview on the current use of artificial intelligence (AI) in health care, challenges to implementation, and potential for streamlining revenue cycle administrative processes.