

June 5, 2021

The Honorable Chiquita Brooks-LaSure
Administrator, Centers for Medicare and Medicaid Services
U.S. Department of Health and Human Services
P.O. Box 8010
Baltimore, MD 21244-1850

Submitted electronically to www.regulations.gov

Re: Medicare Program; FY 2022 Hospice Wage Index and Payment Rate Update, Hospice Conditions of Participation Updates, Hospice and Home Health Quality Reporting Program Requirements [CMS-1754-P]

Dear Administrator Brooks-LaSure:

The American Nurses Association (ANA) appreciates the opportunity to provide comment on the Centers for Medicare & Medicaid Services' (CMS) FY 2022 Hospice Wage Index and Payment Rate Update, Hospice Conditions of Participation Updates, Hospice and Home Health Quality Reporting Program Requirements proposed rule. As the agency considers which provisions to finalize, through this comment letter we urge CMS to:

1. Support comprehensive and actionable reporting of health disparities for the QRP, and recommends CMS include nurses' perspectives to develop relevant data elements.

As noted in the proposed rule, hospice utilization has grown since its implementation in 1983 and is projected to continue to rise 7.6 percent annually. This includes the number of beneficiaries increasing as well as amount spent on each beneficiary. Nursing services are vital to the care of these beneficiaries, their family members and caregivers. Ensuring full access to nursing services once hospice care is elected for the beneficiary allows the best opportunity to coordinate a comprehensive care plan. This plan will change over time and those approaches to address the needs must also meet the beneficiary and family/caregivers where they are during the period of emotional and physical stress. Nurses are trained to consider social determinants of health and health disparities in formulating evergreen care plans to meet those needs.

1. ANA supports comprehensive and actionable reporting of health disparities for the QRP, and recommends CMS include nurses' perspectives to develop relevant data elements.

CMS is seeking information on changes to the Quality Reporting Program (QRP) that will enable comprehensive and actionable reporting of health disparities. ANA supports the agency's request for more information to address the important issue of closing the health equity gap. Registered nurses, in addition to providing quality care to patients, often serve as advocates for their patients and are best positioned to identify factors that could result in inequitable health outcomes. Nurses also reflect the people and communities they serve—allowing them to recognize the challenges faced by their patients and ensure that their patients receive culturally competent, equitable health care services.

Nurses are leaders in implementing processes that further quality patient care and highlight existing gaps in care delivery, leading to measurable improvements. The National Academy of Medicine's expert Committee on the Future of Nursing 2020-2030 recently released a report, Charting a Path to Achieve

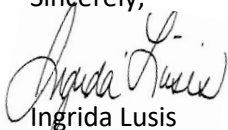
Health Equity.¹ The report serves as a detailed blueprint for engaging nurses “in the complex work of aligning public health, health care, social services, and public policies to eliminate health disparities and achieve health equity.”²

As the agency looks to identify areas in care delivery that result in or exacerbate health disparities, we encourage CMS to work with nurses on which reporting measures and other patient demographic information should be captured. For example, the agency could consider incorporating measures that capture socio-demographic factors, such as food insecurity. Other reported measures could include identifying barriers in connected vulnerable patients to needed services in other health care settings or in the community that are critical in ensuring equitable health outcomes, such as stable, supportive housing post-discharge. Collecting this type of information will allow for a more complete assessment of existing issues and factors leading to inequitable care delivery and then work toward a holistic approach to closing the health equity gap. As such, we encourage CMS to leverage the important role of the nurse in identifying and capturing measures to address health equity.

ANA is the premier organization representing the interests of the nation’s 4.2 million registered nurses (RNs) through its state and constituent member associations, organizational affiliates, and the individual members. ANA advances the nursing profession by fostering high standards of nursing practice, promoting a safe and ethical work environment, bolstering the health and wellness of nurses, and advocating on healthcare issues that affect nurses and the public. RNs serve in multiple direct care, care coordination, and administration leadership roles, across the full spectrum of health care settings. RNs provide and coordinate patient care, educate patients and the public about various health conditions including essential self-care, and provide advice and emotional support to patients and their family members. ANA members also include the four APRN roles. ANA is dedicated to partnering with health care consumers to improve practice, policies, delivery models, outcomes, and access across the health care continuum.

If you have any questions, please contact me at (301) 628-5081 or Ingrid.Lusis@ana.org, with any questions.

Sincerely,



Ingrid Lusis
Vice President, Policy and Government Affairs

cc: Ernest Grant, PhD, RN, FAAN, ANA President
Loressa Cole, DNP, MBA, RN, NEA-BC, FACHE, FAAN, ANA Chief Executive Officer
Debbie Hatmaker, PhD, RN, FAAN, ANA Chief Nursing Officer

¹ National Academies of Sciences, Engineering, and Medicine. The Future of Nursing 2020-2030: Charting a Path to Achieve Health Equity. 2021. Accessible online at <https://nam.edu/publications/the-future-of-nursing-2020-2030/>.

² Ibid.