

Dear C/SNA Presidents, Executive Staff Leaders and IMD Chair,

In April 2017, the Centers for Medicare and Medicaid Services (CMS) published a proposed rule for the Medicare Inpatient Prospective Payment System (IPPS) for Fiscal Year 2018. Included in that rule were a proposal and a comment opportunity for the inclusion of two NQF-endorsed nurse staffing measures – Skill Mix (NQF #0204) and Nursing Hours per Patient Day Measure (NQF #0205) – in the Hospital Inpatient Quality Reporting (IQR) Program and for use as criteria in CMS' 5-star ratings on *Hospital Compare*.

ANA submitted a <u>comment letter</u> on the proposed IPPS rule to CMS on June 13th which strongly endorsed the inclusion of these nurse staffing measures. ANA also submitted a <u>separate comment letter</u> focused solely on the inclusion of these staffing measures; this letter included 26 co-signatories. Per ANA's alert, we had a total of 1,363 comments submitted to CMS and generated 259 Facebook shares and 57 Twitter shares of our action page. We would like to sincerely thank all of the groups who signed on to our staffing measure letter and to those groups and individuals who submitted comments to CMS or shared the information on their own.

CMS posted the final IPPS rule at close of business on August 2nd (Read CMS' response on Pages 1509-1530). **Unfortunately, CMS elected not to include the two nurse staffing measures.** CMS did, however, allow for the possibility that these two staffing measures be included in the IQR Program and *Hospital Compare* for FY 2019 and/or subsequent years. This is, obviously, a disappointment to ANA given that staffing is a Tier 1 issue and that we have worked for several years on both getting NQF certification and endorsement for these staffing measures (which we have achieved) and on having them included in the IQR Program for national quality reporting purposes.

Despite this setback, ANA is developing a coordinated strategy to ensure collaboration with you as well as the consumer groups who support the inclusion of these important measures in order to ensure that we strengthen our position going into the comment period for the proposed IPPS rule for FY 2019. In order for us to achieve our ultimate goal of having these two staffing measures included in the Hospital IQR Program for use in *Hospital Compare*, CMS must include them in its annual Medicare IPPS final rule. ANA's job is to use our leverage to ensure that CMS recognizes the importance of these measures to both nurses and consumers. ANA will hold discussions with our stakeholders, strategize with our external consultants, and cultivate relationships at the federal level in order to ensure that we are in an optimal position to have these measures included in the IPPS final rule for FY 2019.

The silver lining is, despite this setback, that we have made incremental progress toward our goal of having these two nurse staffing measures included for use in *Hospital Compare*. Our efforts date back several years, and the fact that CMS included them in the proposed rule is certainly a step forward. We fully recognize, however, that this is not enough. We hope that through the strategy laid out above —





and with your help - we are able to successfully have these measures included in the IPPS rule for FY 2019.

ANA's Health Policy office will draft and submit a comment letter in response to the final IPPS rule for FY 2018 which addresses the exclusion of the nurse staffing measures. The final rule and comment information will be published in the Federal Register on August 14th, and the deadline for comment is October 1st. We will send you a follow-up e-mail with a copy of our comment letter on the final rule.

ANA encourages you to submit your own comments strongly encouraging CMS to include these staffing measures in the final IPPS rule for FY 2019. We will only achieve inclusion of these measures through our coordinated and collaborative effort, and we are strongest when we speak with one voice to advance the issues important to the nursing community. If you have further questions, please contact Gregory Craig, Health Policy Advisor, at (301) 628-5395 or Gregory.Craig@ana.org.