June 1, 2023

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

Submitted electronically at www.regulations.gov

Re: Medicare Program; FY 2024 Inpatient Psychiatric Facilities Prospective Payment System—Rate Update [CMS-1783-P]

Dear Administrator Brooks-LaSure:

The American Nurses Association (ANA) appreciates the opportunity to comment on fiscal year 2024 Inpatient Psychiatric Facilities (IPF) Prospective Payment System Rate Update. ANA applauds the work of the Centers for Medicare & Medicaid Services (CMS) to encourage continued healthcare personnel vaccination and operationalize health equity measures in the IPF Quality Reporting Program (QRP) in this proposed rule. We urge CMS to continue working with nurses as key stakeholders in implementing processes that advance health equity.

1. **The proposed modification of the COVID-19 vaccination coverage among healthcare personnel measure is important to protect healthcare professionals and patients.**

ANA continues to support COVID-19 vaccinations for healthcare personnel as immunizations for preventable diseases protect public health, protect healthcare workers themselves, and align with nursing professional and ethical obligations.¹ Consistent vaccination compliance is a critical tool to respond to current and future infectious threats. As explained in the proposed rule, variants and subvariants of SARS-COV-2 continue to emerge and pose a significant threat to healthcare workers. Vaccine boosters have proven to be effective against new variants and are usually available within a timely manner. The Centers for Disease Control and Prevention (CDC) recently updated their clinical guidance to recommend three bivalent mRNA boosters.² Evidence shows that original vaccination does not adequately defend against new variants.³ Yet uptake of COVID-19 boosters among healthcare personnel remains low. By changing the IPF healthcare personnel measure to track “up to date” vaccination status as defined by CDC guidance, uptake of boosters will be encouraged. This is critical for

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direct care nurses who are at higher risk of exposure to infectious diseases due to their frontline patient care positions. Continued tracking of vaccination status of healthcare workers will allow facilities to better prepare for the future.

2. **Nurses are key stakeholders for implementation of the Universal Foundation and new health equity measures in the IPF QRP.**

ANA strongly supports CMS’ strategic plan pillar to advance health equity and the Universal Foundation.¹ Eliminating health disparities and creating a health care system that provides high-quality care for all is an ethical imperative of the nursing profession. The Universal Foundation is an important step forward in achieving health equity by streamlining quality measures across CMS programs to produce better data and focus resources on core issues. The Universal Foundation’s building block approach will allow flexibility for different populations and care settings to see their specific equity and access gaps. This is especially important for inpatient psychiatric care because medical needs of this vulnerable group of patients may be overlooked in the course of intensive psychiatric care, while psychiatric interventions may require specific monitoring for side effects. Further, providers should be encouraged to address social determinants when making discharge decisions and arrangements. The four new health equity focused measures proposed for the IPF QRP set a framework to ensure active leadership involvement, identification of the most pressing social determinants of health for the population, and direct patient feedback. Additionally, by eliminating two measures that meet factors for removal, CMS relieves unnecessary burden, freeing time, and resources to advance quality equitable care.

Nurses, including those trained in psychiatric care, are leaders in person and family-centered care, advocating for their patients at and beyond the bedside. They embrace diversity and cultural humility, while working to manage unconscious biases to effectively promote meaningful patient outcomes. They are key in designing and directing care that appropriately meets a full range of patient needs, improves access to needed care, promotes positive outcomes, and confronts disparities. Nurses are critical partners for obtaining the objectives of the new health equity focused quality measures, especially the implementation of the psychiatric patient experience survey. ANA urges CMS to work with nurses at the local, regional, and national level to operationalize the adoption and tracking the success of the new measures.

ANA is the premier organization representing the interests of the nation’s 4.4 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 health care 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

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members. ANA members also include the four APRN roles: nurse practitioner, certified nurse midwife, clinical nurse specialist, and certified registered nurse anesthetist. ANA is dedicated to partnering with health care consumers to improve practice, policies, delivery models, outcomes, and access across the health care continuum.

Thank you for the opportunity to submit comments on this proposed rule. If you have any questions, please contact Tim Nanof, Vice President, Policy and Government Affairs, at tim.nanof@ana.org or (301) 628-5166.

Sincerely,

Debbie Hatmaker, PhD, RN, FAAN
Chief Nursing Officer / EVP

cc: Jennifer Mensik Kennedy, PhD, RN, NEA-BC, FAAN, ANA President
    Loressa Cole, DNP, MBA, RN, NEA-BC, FAAN, ANA Chief Executive Officer