

December 20, 2023

Pre-Rulemaking Measure Review RE: Measures Under Consideration List

The National Association of ACOs (NAACOS) appreciates the opportunity to submit comments in response to the 2023 Measures Under Consideration list as part of the Pre-Rulemaking Measure Review process. NAACOS represents more than 400 accountable care organizations (ACOs) in Medicare, Medicaid, and commercial insurance working on behalf of health systems and physician provider organizations across the nation to improve quality of care for patients and reduce health care cost. NAACOS members serve over 8 million beneficiaries in Medicare value-based payment models, including the Medicare Shared Savings Program (MSSP) and the ACO Realizing Equity, Access, and Community Health (REACH) Model, among other alternative payment models (APMs). Please find enclosed NAACOS comments on the Pre-Rulemaking Measure Review (PRMR) Measures Under Consideration (MUC) List for 2023.

## MUC2023-212 Level I Denials Upheld Rate Measure

The National Association of ACOs agrees with the intent of this measure and supports inclusion of this measure in the Part C & D Star Ratings program. Ensuring that patients have timely access to care that is clinically appropriate and necessary is critical and this measure will increase transparency around the prior authorization process.

## MUC2023-179 Initiation and Engagement of Substance Use Disorder Treatment (IET)

The National Association of ACOs (NAACOS) agrees with the intent of this measure but asks that PRMR consider the potential for unintended consequences that may result from its use. We are concerned that there is a real risk that this measure will not truly represent the quality of care provided. Specifically, a health plan's ability to provide treatment options to patients may be very dependent on the availability of services within a community or region and the measure does not currently account for those instances. In addition, because the measure relies on administrative claims, it does not capture patient choice such as refusal of treatment. We were unable to identify any analyses or other information demonstrating that the developer has evaluated the degree to which these scenarios (e.g., availability of services in an area) impact the validity of the performance scores. As a result, we do not believe that it is appropriate to recommend this measure for the Part C & D Star Ratings program at this time. However, we caution that use of this measure in other programs like the MSSP should not move forward until or unless CMS is able to share this data with ACOs.

## MUC2023-199 Connection to Community Service Provider

Dec. 22, 2023 Page 2 of 3

The National Association of ACOs (NAACOS) and its members are committed to advancing efforts that address health inequities, including quality measures work that addresses this issue. NAACOS requests clarification on why the Screening for Social Drivers of Health (SDOH) measure was not first proposed for the Medicare Shared Savings Program (MSSP). No measures have been submitted on the Measures Under Consideration (MUC) list for MSSP in the previous two years and we do not believe that this measure should be considered without first introducing the screening measure as has been the case in other value programs. While we support the intent of this measure and its application to accountable care organizations (ACOs), the measure is not accurately specified for use by an ACO. Specifically, the measure is currently limited to patients who are discharged from the hospital, which limits the scope of the measure and increases the measure's complexity when implemented for MSSP. In addition, this measure has not been tested to demonstrate reliability and validity and we question whether the performance scores can truly distinguish differences in the quality of care provided versus availability of services. We urge CMS to first refine the SDOH measures based on feedback from the field and then propose first the screening for SDOH for MSSP. While many ACOs are already working in this area, there are multiple challenges with the measure specifics that ACOs will need time to adjust to in workflow changes and other operational challenges that will need to be planned for. By allowing ACOs and others to gain experience with screening for these important risk factors, we will address patients' needs while also building the capabilities to be successful with this particular measure as it has been designed specifically.

## MUC2023-210 Resolution of At Least 1 Health-Related Social Need

The National Association of ACOs (NAACOS) and its members are committed to advancing efforts that address health inequities, including quality measures work that addresses this issue. NAACOS requests clarification on why the Screening for Social Drivers of Health (SDOH) measure was not first proposed for the Medicare Shared Savings Program (MSSP). No measures have been submitted on the Measures Under Consideration (MUC) list for MSSP in the previous two years and we do not believe that this measure should be considered without first introducing the screening measure as has been the case in other value programs. While we agree that resolving the social needs for patients is important and positively impact patients' quality of life, we do not believe that CMS should move forward with this measure until it is precisely specified and tested. For example, the measure is currently limited to patients who are discharged from the hospital, which limits the scope of the measure and increases the measure's complexity when implemented for MSSP. In addition, this measure has not been tested to demonstrate reliability and validity and we question whether the performance scores can truly distinguish differences in the quality of care provided versus availability of services. While they may address critical gaps in care, there is a risk of unintended negative consequences when poorly specified and untested measures are implemented in value-based payment programs. We urge CMS to first refine the SDOH measures based on feedback from the field and then propose first the screening for SDOH for MSSP. By allowing ACOs and others to gain experience with screening for these important risk factors, we will address patients' needs while also building the capabilities to be successful with this particular measure as it has been designed specifically.

Sincerely,

Clif Gaus, Sc.D.

Dec. 22, 2023 Page 3 of 3

President and CEO NAACOS