

June 1, 2020

Seema Verma, Administrator Centers for Medicare & Medicaid Services, Department of Health and Human Services P.O. Box 8013 Baltimore. MD 21244-8016

RE: Medicare and Medicaid Programs; Policy and Regulatory Revisions in Response to the COVID-19 Public Health Emergency (CMS-1744-IFC)

Dear Administrator Verma:

The Alliance of Community Health Plans (ACHP) is pleased to submit comments in response to the interim final rule on Medicare and Medicaid Programs; Policy and Regulatory Revisions in Response to the COVID-19 Public Health Emergency.

ACHP is a national leadership organization bringing together innovative health plans and provider groups that are among America's best at delivering affordable, high-quality coverage and care. The non-profit, provider-aligned health plans that are ACHP members provide coverage in all lines of business for more than 22 million Americans across 35 states and the District of Columbia. ACHP members offer five of the fourteen 5-star rated Medicare Advantage (MA) plans. Our member organizations are intensely focused on using their community relationships to identify areas of need for their members and ensure continuity of coverage and care throughout the COVID-19 pandemic.

The disruption caused by the public health emergency highlights the dire need to modernize quality measurement and provides an unprecedented opportunity to establish a more meaningful system that increases transparency, decreases burden and supports value-based care delivery. As we have already seen with telehealth, acceleration of critical advancements is possible during this time of upheaval. In fact, this may be the most fortuitous time for bringing health plans, providers and quality measure experts together to discuss the next generation of quality measurement. ACHP encourages CMS to immediately convene a Technical Expert Panel to draft recommendations for a phased approach to a new era in health care quality measurement, beginning with MA Star Ratings.

There can be no return to MA Stars as we knew it. MA stars must be modernized if the program is to remain relevant and useful for our common goals. We offer the following recommendations on the immediate challenges and some preliminary thoughts on a longer-term approach.

MAKING HEALTH CARE BETTER

General Comments on Quality Ratings During the COVID-19 Crisis and Beyond

As CMS is well aware, the COVID-19 crisis has significantly disrupted "normal" MA stars quality processes and we appreciate CMS working quickly to offer relief to health plans during the data collection period. Remarkably, the crisis itself presents extraordinary opportunities for learning and improving health care quality measurement in the U.S.

Our recommendations are based on the following principles:

- Advancing the goals of value-based payment, centered on high-quality care, should remain a primary objective.
- Health plans and their provider partners need flexibility to meet the immediate needs of the COVID-19 public health crisis without fear of negative financial impact.
- Medicare beneficiaries should continue to have access to information that supports high-quality choices and should not be denied the additional benefits enabled by quality bonus payments to high-quality health plans.

HEDIS, CAHPS, and HOS Data Collection and Submission for 2021 and 2022 Star Ratings

ACHP supports replacing 2021 Star Ratings measures based on HEDIS and Medicare CAHPS data collections with values from the 2020 Star Ratings. This policy both acknowledges the disruption to data collection processes during the pandemic and enables plans to focus resources on more urgent matters directly related to COVID-19, ensuring seniors' immediate clinical needs are met.

Health plans that invested significant resources to boost their performance and choose to submit quality data for care provided during this time could contribute significantly to understanding the full impact of this pandemic, and various sector responses. ACHP recommends an optional demonstration to glean insight into the impact of COVID-19 on the overall quality of health care across the continuum of needs during this pandemic. Plans with a 3.5 Star Rating electing to participate would be required to submit information on how they drove quality improvement along with quality data for measurement of their performance. In return, these health plans would receive the MA quality bonus payment at a 4-star level. ACHP submitted a letter outlining this proposed demonstration on May 4, 2020.

ACHP applauds CMS' decision to use the Star Ratings and measure scores for the 2021 Star Ratings for any measures that come from the HOS survey. We also appreciate CMS' recognition that the heavily weighted improvement measures will have potentially significant negative impact on plans' Star Ratings and support expanding the hold harmless rule for Stars 2022 to include all contracts at the overall and summary rating levels.

ACHP is concerned about the impact of CMS' intent to proceed with Stars 2022 on the prepandemic schedule with standard calculations. This ultimately negates the relief CMS achieves through curtailing submission of HEDIS and CAHPS data in 2021, since health plans still will be held accountable for performance based on the care provided during the public health crisis. ACHP plans believe high quality care must be maintained even during a pandemic, but the definition of quality during this time frequently runs counter to the demands of suppressing COVID-19 transmission. The degree of disruption to normal care caused by eliminating all elective appointments for example, will significantly impact performance in Stars 2022 rates, with varied return to normal operations based on geographic incidence of COVID-19.

COVID-19 has made it clear that the current Stars Rating system lacks the agility necessary to respond to changing health care priorities and falls far short of the quality measurement required by the value-based payment approaches to which we all aspire. It is imperative that CMS convene a Technical Expert Panel to provide recommendations on the next generation of quality measures to bring forward the changes needed to continue making MA stars meaningful.

HEDIS, CAHPS, and HOS Data Collection and Submission for 2023 Star Ratings and Beyond

With so much disruption to the health sector, we believe it is premature to have a detailed discussion regarding MA Stars 2023. Given our shared goal of advancing payment based on value, not volume, we offer the following initial principles as CMS begins deliberations on the MA Stars program beyond 2022.

With Stars 2023, CMS should be in position to begin transitioning to a more meaningful and near-real-time system of measurement and accountability. We encourage CMS to return the MA Stars Program to non-crisis operations with a refresh that achieves three goals:

- 1. Focus quality measure submission on a prioritized set of outcome-based measures that can be standardized across settings of care and lines of business;
- 2. Establish a framework for a true value-based program that aligns payers, providers, health plans and supports better consumer decision-making;
- 3. Reward innovation and creativity by allowing flexibilities for adoption of technology and innovative care delivery.

Given the lead time for returning to normal operations, and the extensive input that will be required, ACHP encourages CMS to convene a multi-stakeholder Technical Expert Panel with an eye toward Star Ratings year 2023 and beyond. ACHP and its members stand ready to partner with CMS and participate in that panel to ensure that health care quality measurement, reporting and accountability reflect a stronger reliance on technology, more robust patient reported measures that include outcomes, longitudinal measures that reflect coordination of care and new priorities elevated as a result of the COVID-19 pandemic.

We thank you for your consideration and look forward to continuing the dialogue of how to guide health plans through the uncertainty of the pandemic and improve and build upon the foundations of the Quality Ratings System. Please contact Michael Bagel, Director of Public Policy at mbagel@achp.org or 202-897-6121 with any questions.

Regards,

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President and CEO

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ACHP