August 29, 2023

The Honorable Chiquita Brooks-LaSure
Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attention: CMS–1780–P
P.O. Box 8013
Baltimore, MD 21244–8013

RE: Calendar Year (CY) 2024 Home Health Prospective Payment System Proposed Rule (CMS-1780-P)

Submitted electronically at: https://www.regulations.gov/commenton/CMS-2023-0113-0002

Dear Administrator Brooks-LaSure:

As nursing stakeholders, the Alliance for Nursing Informatics (ANI) is pleased to offer comments on the ***Calendar Year (CY) 2024 Home Health Prospective Payment System Proposed Rule (CMS-1780-P).***

The Alliance for Nursing Informatics (ANI), cosponsored by AMIA & HIMSS, advances nursing informatics leadership, practice, education, policy, and research through a unified voice of nursing informatics organizations. We transform health and healthcare through nursing informatics and innovation. ANI is a collaboration of organizations representing more than 25,000 nurse informaticists and bringing together 29 distinct nursing informatics groups globally. ANI crosses academia, practice, industry, and nursing specialty boundaries and collaborates with the more than 4 million nurses in practice today.

ANI has previously commented on CY 2023 Medicare Advantage and Part D Proposed Rule (CMS-4192-P), and CMS-0058-NC – National Directory of Healthcare Providers & Services.[1] We appreciate the opportunity to advance health IT standards that support high-priority target areas, including workforce development, burden reduction, health equity, and underserved communities. In addition, we applaud the prioritization of the interoperability standards focused on areas referenced by the 21st Century Cures Act and in The Future of Nursing 2020-2030 report.[2]

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[1] Alliance for Nursing Informatics Statements and Positions. (2022). https://www.allianceni.org/statements-positions
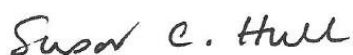
[2] Wakefield, M., Williams, D. R., & Le Menestrel, S. (2021). *The future of nursing 2020-2030: Charting a path to achieve health equity*. National Academy of Sciences. https://nap.nationalacademies.org/resource/25982/Highlights_Future%20of%20Nursing_4.30.21_final.pdf

ANI's comments are directed to the following areas:

- **Performance evaluation process.** ANI is encouraged by the intention of CMS to meaningfully incorporate the advancement of health equity into the Expanded Home Health Value-Based Purchasing (HHVBP) Model. We support allowing home health agencies adequate time to learn the requirements of the expanded Model and evaluate performance data to determine the effects on health equity outcomes before the expanded Model is implemented.

- **Transfer of information in public reporting.** We ask that more information be provided on the workflows for the Discharge Function, Transfer of Health (TOH) Information to the Provider-Post-Acute Care (PAC) Measure (TOH-Provider), and TOH Information to the PAC. It is unclear what these workflows include in the transfer of information for public reporting.

- **Lymphedema compression device treatment.** Lymphedema compression device treatment items should be permitted to be prescribed by a practitioner, including a nurse practitioner, but this may not be the case in every state, as each state's Nurse Practice Act determines the scope of practice for nursing.

- **Data sources.** CMS proposes to identify hospices who are providing poor quality or unsafe care using hospice surveys, Medicare claims data, and CAHPS measures. It is unclear how facilities from the top 10% of hospices determined as Special Focus Facilities, and how many will be designated. Providing more clarity will help to define the sources needed for data collection.

In conclusion, we fully support a robust data infrastructure that includes leveraging data and information to improve the care of patients in all settings - including home care. Thank you for the opportunity to comment.

Sincerely,

Susan Hull, MSN, RN-BC, NEA-BC, FAMIA   Nancy Beale, Ph.D., RN-BC
ANI Co-chair   ANI Co-chair

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