



March 5, 2018

Demetrios Kouzoukas  
Principal Deputy Administrator and Director, Center for Medicare  
Centers for Medicare and Medicaid Services  
U.S. Department of Health and Human Services  
200 Independence Ave, SW  
Washington, DC 20201

RE: Advance Notice of Methodological Changes for Calendar Year (CY) 2019 for Medicare Advantage (MA) Capitation Rates, Part C and Part D Payment Policies and 2019 Draft Call Letter

Dear Director Kouzoukas:

On behalf of the American Speech-Language-Hearing Association, I write to offer comments on Section O. Quality Payment Program of the Advance Notice of Methodological Changes for Calendar Year (CY) 2019 for Medicare Advantage (MA) Capitation Rates, Part C and Part D Payment Policies and 2019 Draft Call Letter.

The American Speech-Language-Hearing Association (ASHA) is the national professional, scientific, and credentialing association for 198,000 members and affiliates who are audiologists; speech-language pathologists; speech, language, and hearing scientists; audiology and speech-language pathology support personnel; and students.

### **Section O. Quality Payment Program**

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ASHA thanks the Centers for Medicare & Medicaid Services' (CMS) for collecting information about advanced alternative payment models (APM) contracting from Medicare Advantage (MA) plans beginning in April 2018. This critical step advances the policy objective of creating more APMs and promoting the movement from fee-for-service to value. As you know, the Medicare Access and CHIP Reauthorization Act (P.L. 114-10) incentivizes value-based contracting through APM participation in traditional Medicare. To encourage APM participation among all eligible clinicians, it is important that CMS affords equal credit to providers participating in MA value-based arrangements.

ASHA anticipates CMS's announcement of the MA APM demonstration project. Creating greater opportunities and incentives for advanced APMs in MA stands to advance the Medicare delivery system for all seniors. With that said, it is important that these opportunities are structured to allow meaningful participation from non-physician clinicians, such as audiologists and speech-language pathologists. For example, the Other Payer Advanced APM requires at least 50% of participating eligible clinicians to use certified electronic health record technology (CEHRT). This clarification is important because one of the major barriers to advanced APM participation for audiologists and speech-language pathologists is the requirement that the APM entity uses CEHRT. ASHA maintains that this provision allows non-facility based outpatient audiologists and speech-language pathologists to have greater opportunity to successfully participate in an advanced APM because CMS does not require that every clinician use CEHRT in order to join an Other Payer Advanced APM. This

requirement also takes into account that the meaningful use requirements of EHRs are designed for prescribing providers and do not capture tasks performed by most non-physician professionals using EHR.

ASHA understands that CMS will continue to monitor and will likely consider additional changes to the criteria for using CEHRT in future years, and that these changes will have a direct impact on ASHA members' participation rate. The impact would be less substantial if CMS increased the percent of CEHRT use to a threshold higher than 50%. ASHA recommends that a distinct CEHRT program be developed and that funding is allocated for non-physician and non-prescribing professionals as soon as possible. There are approximately one million practicing physicians in the United States.<sup>1</sup> However, there are more than six million practicing non-physician clinicians, of which 530,000 are therapy providers.<sup>2, 3, 4, 5</sup> The supplemental funding that was made available for physicians to adopt EHRs should be available to offset the system costs for non-physician professionals. This is particularly important as CMS and other payers continue to move toward integrated care coordination. ASHA strongly encourages CMS to work with professional societies, such as ASHA, to support infrastructure development that will allow full participation among the entire Medicare recognized provider community.

Roughly 30% of Medicare beneficiaries are enrolled in MA plans and enrollment is projected to increase in 2018 and beyond.<sup>6</sup> As such, CMS must adopt policies that are responsive to the rapid changes in MA, and ensure that these policies promote meaningful APM participation for all clinicians who treat MA beneficiaries.

Thank you for the opportunity to provide comments on the Advance Notice of Methodological Changes for Calendar Year (CY) 2019 for Medicare Advantage (MA) Capitation Rates, Part C and Part D Payment Policies and 2019 Draft Call Letter. If you or your staff have any questions, please contact Daneen G. Sekoni, MHSA, ASHA's director of health care policy, health care reform, at [dsekoni@asha.org](mailto:dsekoni@asha.org).

Sincerely,



Elise Davis-McFarland, PhD, CCC-SLP  
2018 ASHA President

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<sup>1</sup> Kaiser Family Foundation. Professionally Active Physicians (2017). Retrieved from: <https://www.kff.org/other/state-indicator/total-active-physicians/?currentTimeframe=0&sortModel=%7B%22colId%22:%22Location%22,%22sort%22:%22asc%22%7D>.

<sup>2</sup> United States Department of Labor, Bureau of Labor Statistics. (2016). *Occupational Outlook Handbook*. Retrieved from: <https://www.bls.gov/ooh/healthcare/speech-language-pathologists.htm>.

<sup>3</sup> United States Department of Labor, Bureau of Labor Statistics. (2016). *Occupational Outlook Handbook*. Retrieved from <https://www.bls.gov/ooh/healthcare/physical-therapists.htm>

<sup>4</sup> United States Department of Labor, Bureau of Labor Statistics. (2016). *Occupational Outlook Handbook*. Retrieved from <https://www.bls.gov/ooh/healthcare/occupational-therapists.htm>

<sup>5</sup> United States Department of Labor, Bureau of Labor Statistics. (2016). *Occupational Outlook Handbook*. Retrieved from <https://www.bls.gov/ooh/healthcare/audiologists.htm>

<sup>6</sup> Avalere Health (2018). New Flexibilities Offer Medicare Advantage Plans Additional Opportunities for Growth [Chart]. Retrieved from: <http://go.avalere.com/acton/attachment/12909/f-050d/1/-/-/-/MA%20slide.pdf>.