



June 10, 2022

The Honorable Chiquita Brooks-LaSure  
Administrator  
Centers for Medicare & Medicaid Services  
Department of Health and Human Services

**Re: CMS 1765-P; Medicare Program; Prospective Payment System and Consolidated Billing for Skilled Nursing Facilities; Updates to the Quality Reporting Program and Value-Based Purchasing Program for Federal Fiscal Year 2023**

Dear Administrator Brooks-LaSure:

On behalf of the American Academy of Family Physicians (AAFP), representing more than 127,600 family physicians and medical students across the country, I write in response to the 2023 Prospective Payment System and Consolidated Billing for Skilled Nursing Facilities (SNFs) [proposed rule](#), as published in the April 15, 2022 *Federal Register*.

Family physicians provide high-quality, person-centered primary care services to patients across the lifespan. This includes providing care management and [coordination](#) services to patients that reside in SNFs. Some family physicians serve as SNF medical directors. Family physicians are trained to address acute illnesses, manage chronic conditions, and provide recommended preventive care to patients of all ages. Family physicians are therefore uniquely positioned to care for elderly patients and individuals with disabilities who often reside in SNFs.

The AAFP supports the President's [initiatives](#) to ensure beneficiaries in SNFs receive safe, high-quality care. As strong proponents of value-based care, the AAFP is pleased that the President's plan and this proposal include new quality measures and payment policies to strengthen the SNF value-based purchasing (VBP) program. The SNF VBP program provides incentive payments to SNFs based on their performance on quality measures.

While all SNFs paid under the Medicare SNF prospective payment system are included in the VBP program, the program currently only consists of a single hospital readmission measure. In a [report](#) evaluating the SNF VBP program, the Medicare Payment Advisory Commission identified the lack of additional measures as a significant shortcoming of the program and its effectiveness. As a result, Congress authorized CMS to add measures in the Consolidated Appropriations Act of 2021 and, in this rule, CMS proposes to add nine measures across a number of domains. The AAFP believes that expanding VBP program to include additional measures will encourage SNFs to improve their patient safety, staffing, care coordination, and infection control practices, ultimately improving care for beneficiaries in SNFs. We are particularly supportive of measures that encourage SNFs to coordinate beneficiaries' care with their primary care physician.

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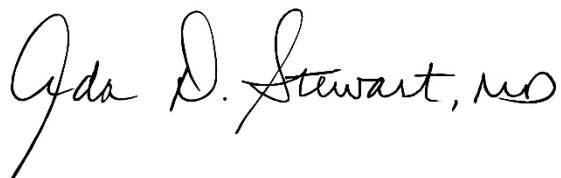
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The COVID-19 pandemic has highlighted how vulnerable SNF residents are, as well as several opportunities to improve the care available to them. CMS seeks comment on the addition of a new reporting measure in the SNF Quality Reporting Program (QRP) that would assess whether SNF residents are up-to-date on their COVID-19 vaccines. The AAFP supports the addition of this measure and believes it will help ensure COVID-19 vaccines and boosters are continually made available to SNF residents.

CMS also seeks comments on including health equity measures in the SNF QRP with the goal of facilitating the identification of health quality disparities, as well as providing SNFs with actionable data to improve care through targeted interventions for impacted populations. The AAFP shares CMS' commitment to health equity and has continually supported the agency's efforts to enhance data collection. For example, we've supported proposals to require hospitals, [health plans](#), and other entities to enhance race, ethnicity, and language data collection efforts. We've also [supported](#) efforts to stratify data by these and other demographic factors in order to identify and address health disparities. We believe similar requirements may be beneficial for improving care provided to beneficiaries residing in SNFs and would support the inclusion of additional measures in the QRP.

Thank you for the opportunity to provide comments on the proposed rule. Should you have any questions, please contact Meredith Yinger, Manager, Regulatory Affairs at [myinger@aafp.org](mailto:myinger@aafp.org).

Sincerely,

A handwritten signature in black ink that reads "Ada D. Stewart, MD". The signature is fluid and cursive, with the first letters of the first and last names being capitalized and prominent.

Ada D. Stewart, MD, FAAFP  
Board Chair, American Academy of Family Physicians