

September 11, 2023

The Honorable Chiquita Brooks-LaSure Administrator, Centers for Medicare & Medicaid Services Department of Health and Human Services Attention: CMS–1786–P P.O. Box 8010 7500 Security Boulevard Baltimore, MD 21244–1810

RE: Medicare Program: Hospital Outpatient Prospective Payment and Ambulatory Surgical Center Payment Systems; Quality Reporting Programs; Payment for Intensive Outpatient Services in Rural Health Clinics, Federally Qualified Health Centers, and Opioid Treatment Programs; Hospital Price Transparency; Changes to Community Mental Health Centers Conditions of Participation, Proposed Changes to the Inpatient Prospective Payment System Medicare Code Editor; Rural Emergency Hospital Conditions of Participation Technical Correction

Dear Administrator Brooks-LaSure:

On behalf of the American Speech-Language-Hearing Association, I write to offer comments on the outpatient prospective payment system (OPPS) related provisions within the above referenced proposed rule and requests for information.

The American Speech-Language-Hearing Association (ASHA) is the national professional, scientific, and credentialing association for 228,000 members and affiliates who are audiologists; speech-language pathologists; speech, language, and hearing scientists; audiology and speech-language pathology assistants; and students. Many ASHA member audiologists and speech-language pathologists (SLPs) treat patients receiving services through an outpatient hospital department and, as a result, have a vested interest in ensuring the regulatory and payment policies are appropriate for Medicare beneficiaries to have access to this critical level of care. ASHA offers the following comments on sections XIV and XVII for your consideration.

XIV. Hospital Outpatient Quality Reporting (OQR) Program Requirements, Proposals, and Requests for Comment

COVID-19 Vaccination Coverage among Healthcare Personnel (HCP COVID-19 Vaccine) Measure

On June 5, 2023, the Centers for Medicare & Medicaid Services (CMS) published The Omnibus COVID-19 Health Care Staff Vaccination interim final rule, which rescinded the requirement that has been in place since November 2021 for workers and contractors at Medicare and Medicaid-certified facilities to be fully vaccinated against COVID-19. ASHA requests that CMS clarify how the elimination of a vaccine mandate will impact the adoption or use of the proposed *COVID-19 Vaccination Coverage among Healthcare Personnel* (HCP COVID-19 Vaccine) measure.

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XVIII. Proposed Updates to Requirements for Hospitals to Make Public a List of Their Standard Charges

CMS proposes several revisions to the hospital price transparency policies to strengthen compliance and ensure the information collected is more easily understood by consumers and less burdensome for hospitals to collect and submit. ASHA has long supported efforts designed to improve price transparency for patients to facilitate informed choices on their treatment options. We support the price transparency modifications outlined in the proposed rule, such as standardized templates, and encourage CMS to finalize these changes.

Thank you for considering ASHA's comments. If you or your staff have questions regarding the price transparency recommendations, please contact Sarah Warren, MA, ASHA's director for health care policy for Medicare, at swarren@asha.org. If you have questions regarding our quality reporting program comments, please contact Rebecca Bowen, MA, CCC-SLP, PNAP, ASHA's director for value-based care and innovation, at rbowen@asha.org.

Sincerely,

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Robert M. Augustine, PhD, CCC-SLP 2023 ASHA President