

June 25, 2018

Seema Verma, MPH
Administrator, Centers for Medicare & Medicaid Services
U.S. Department of Health and Human Services
7500 Security Boulevard
CMS-1694-P
P.O. Box 8011
Baltimore, MD 21244

RE: Medicare Program; Hospital Inpatient Prospective Payment Systems for Acute Care Hospitals and the Long-Term Care Hospital Prospective Payment System and Proposed Policy Changes and Fiscal Year 2019 Rates; Proposed Quality Reporting Requirements for Specific Providers; Proposed Medicare and Medicaid Electronic Health Record (EHR) Incentive Programs (Promoting Interoperability Programs) Requirements for Eligible Hospitals, Critical Access Hospitals, and Eligible Professionals; Medicare Cost Reporting Requirements; and Physician Certification and Recertification of Claims

## Dear Administrator Verma:

On behalf of the American Speech-Language-Hearing Association, I write to offer comments on the proposed rule modifying payments to acute care hospitals for fiscal year (FY) 2019.

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.

Speech-language pathologists (SLPs) who provide services to Medicare beneficiaries in hospitals are impacted by this proposed rule. ASHA's goals are to ensure that patients have access to speech-language pathology services, and to ensure that patients and providers do not endure additional undue regulatory burdens.

In the proposed rule, the Centers for Medicare & Medicaid Services (CMS) requests information regarding whether the 'Promoting Interoperability' requirements should be added to the hospital conditions of participation. It is ASHA's understanding that the conditions of participation are not updated as frequently as other Medicare regulations (e.g., annual prospective payment system rules). Without changes made to the conditions of participation, ASHA is concerned that CMS risks having one set of standards for the prospective payment system and outdated standards for the conditions of participation. **ASHA believes that providing the requirements in one place is sufficient for providers to understand**.

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Thank you for the opportunity to provide comments on this proposed rule. ASHA remains committed to partnering with you to ensure revisions of the regulations impacting acute hospitals minimize burden to the extent practicable. If you or your staff have any questions, please contact Sarah Warren, MA, ASHA's director of health care policy, Medicare, at <a href="mailto:swarren@asha.org">swarren@asha.org</a>.

Sincerely,

Elise Davis-Mc Farland, PhD, CCC-SLP

2018 ASHA President