America's Health Insurance Plans 601 Pennsylvania Avenue, NW South Building, Suite Five Hundred Washington, DC 20004



October 19, 2020

Maria Durham
Director, Division of Program and Measurement Support
Quality Measurement & Value-Based Incentive Group
Center for Clinical Standards & Quality
Centers for Medicare & Medicaid Services
7500 Security Blvd, Bldg S3-07-03
Baltimore, MD 21244-1850

Submitted via email: nidhi.singh-shah@cms.hhs.gov

Re: CMS-10540 – Quality Improvement Strategy Implementation Plan and Progress Form

Dear Ms. Durham,

On behalf of America's Health Insurance Plans (AHIP),<sup>1</sup> we appreciate the opportunity to respond to the Paperwork Reduction Act (PRA) Notice regarding the Quality Improvement Strategy Implementation Plan, Progress Report Form, and Modification Summary Supplement, published in the *Federal Register* on Sept. 24, 2020 and the corresponding PRA materials.

## **General Comments**

Section 1311(c)(1)(E) of the Affordable Care Act requires qualified health plans (QHPs) offered through an Exchange to implement a quality improvement strategy (QIS), and Section 1311 (g)(2) requires the periodic reporting of activities that a QHP has conducted to implement the QIS.

We commend CMS for its efforts to streamline the information gathered in this form and reduce plan reporting burden. Separating the QIS form into a separate implementation plan, progress report, and modification summary so that insurers will not have to complete and resubmit an implementation every year is a significant improvement over the current process and will help decrease the overall burden on insurers. Removing the need to re-enter and resubmit data that is unchanged will certainly help streamline the process.

AHIP is committed to transparency in quality reporting, so in addition to the updates to the current reporting process, we would encourage CMS to consider another change that would ensure CMS has the most updated and meaningful data available. We recommend CMS **change** 

<sup>&</sup>lt;sup>1</sup> AHIP is the national association whose members provide coverage for health care and related services to hundreds of millions of Americans every day. Through these offerings, we improve and protect the health and financial security of consumers, families, businesses, communities and the nation. We are committed to market-based solutions and public-private partnerships that improve affordability, value, access, and well-being for consumers. Visit <a href="https://www.ahip.org">www.ahip.org</a> for more information.

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the form submission deadline from June 20 to August 1. The deadline for plans to submit final HEDIS data results is June 15, and the data is frozen on June 29. The current QIS form submission date of June 20 means that plans must always include preliminary data (not final) measure results and are not sufficiently able to fully analyze and provide a meaningful, current summary. For example, providing disparities data in the May/June timeframe is a challenge, requiring initial submission of incomplete data. Modifying the submission deadline would reduce administrative burden and ensure that the most meaningful and up to date information is available at one time.

We would welcome the opportunity to discuss this recommendation with you in more detail. Again, we appreciate your attention and revisions to the QIS implementation plan process and requirements. If you have any questions, or would like to discuss any of our comments, please contact Heather Jerbi (hjerbi@ahip.org).

Sincerely,

Jeanette Thornton

Senior Vice President

Product, Employer & Commercial Policy

**AHIP**