



CCA RESPONSE TO THE AGENCY INFORMATION COLLECTION ACTIVITIES: PROPOSED COLLECTION; COMMENT REQUEST: MEDICARE HEALTH OUTCOMES SURVEY (OMB CONTROL NUMBER: 0938–0701)

December 9, 2024

Dr. Meena Seshamani, Deputy Administrator and Director of the Center for Medicare
Department of Health and Human Services
Centers for Medicare & Medicaid Services
Office of Strategic Operations and Regulatory Affairs, Division of Regulations Development
CMS–10203 (OMB control number: 0938–0701)
7500 Security Boulevard
Baltimore, Maryland 21244–1850
Submitted via <https://www.regulations.gov/>

Deputy Administrator Seshamani,

On behalf of Commonwealth Care Alliance (CCA), we appreciate this opportunity to comment on the Medicare Health Outcomes Survey (HOS) information collection request (OMB Control Number: 0938–0701).

Headquartered in Boston, Massachusetts, CCA is a multi-state integrated care system delivering innovative models of complex care to individuals with the most significant needs. CCA's model is consistently recognized for its ability to manage whole-person care across the continuum, including full integration of primary and acute care, behavioral health, long-term services and supports (LTSS), and services that address social needs. We advocate for equitable and cost-effective policies that lead to high-quality health care for individuals who need it most.

CCA was a founding plan in the 2004 launch of Senior Care Options (SCO), the first dual eligible demonstration in Massachusetts and the fourth dual eligible demonstration in the nation approved by the Centers for Medicare and Medicaid Services (CMS). Now operating under permanent authority as a Fully Integrated Dual Eligible Special Needs Plan (FIDE SNP), CCA serves more than 15,000 SCO enrollees.

CCA was also a thought leader in the development and implementation of One Care, the first Medicare-Medicaid Plan (MMP) program implemented through the Financial Alignment Initiative (FAI) demonstration and the only such program in the nation exclusively serving dual eligible enrollees aged 21 to 64 at the time of enrollment. Today, CCA's One Care program serves nearly 30,000 enrollees.

The Medicare HOS provides CCA valuable data on the health status of our members, allowing us to identify areas for quality improvement and improve overall health outcomes. We utilize the data obtained from the survey to better understand both the functional status and the disease burden of our population. In totality, this data helps explain the effectiveness of health interventions. Responses to questions 11, 12, 13, and 14 enables us to assess how disease burden may be impacting health outcomes. Given the importance of this data, **we urge CMS not to finalize the proposed removal of questions 11, 12, 13, and 14 regardless of whether they are Stars measures. We further recommend that CMS simplify questions 13 and 14 to address concerns about the complexity.** For example, instead of asking beneficiaries to quantify the number of days, CMS could utilize the Likert scale.

CCA appreciates CMS' commitment to improving the survey tool's ability to gather valid and reliable clinically meaningful data for targeting quality improvement activities and resources. However, as explained in our [response to the CY 2025 Advance Notice](#), we continue to be concerned that, given the limitations in the HOS methods and measures, this survey instrument fails to adequately provide information for actionable and timely quality improvement. To be used for longitudinal measure response analysis to assess a plan's performance and to compare one plan contract to another **we therefore urge CMS to:**

- Increase the sample size;
- Ensure the samples of individuals from which the measure scores are calculated represent the diversity of the Medicare population;
- Capture contextual information to understand responses;
- Address the inherit bias of self-reported data; and
- Refine questions to capture the goals of individuals with both complex medical and behavioral health conditions.

We thank you for your consideration of our responses and look forward to continuing to work with CMS on these matters.

Sincerely,



Elizabeth Cahn Goodman
Chief Legal and Public Affairs Officer
Commonwealth Care Alliance