

AMERICAN CASE MANAGEMENT ASSOCIATION

January 20, 2023

The Honorable Xavier Becerra Centers for Medicare & Medicaid Services, Department of Health and Human Services Baltimore, MD 21244-8013

Re: Comments on Advancing Interoperability and Improving Prior Authorization Processes for Medicare Advantage Organizations, Medicaid Managed Care Plans, State Medicaid Agencies, etc.; File code CMS-0057-P

Secretary Xavier Becerra,

On behalf of the American Case Management Association (ACMA), and our more than 40,000 members and subscribers across the United States, we express our strong support for the adoption of the *Advancing Interoperability and Improving Prior Authorization Processes Proposed Rule CMS-0057*. ACMA is a national, 501(c)(3) non-profit, professional membership association, which supports health care delivery system case management and transitions of care professionals. ACMA members are nurses, social workers, physicians, educators, administrators, and other professionals responsible for providing case management services in health care delivery systems.

This regulatory standard would establish requirements and standardization for the use of prior authorization and information sharing under Medicare Advantage plans, state Medicaid and CHIP programs, Medicaid managed care plans and CHIP managed care entities, and Qualified Health Plan issuers on the Federally Facilitated Exchanges. As a profession, healthcare case managers across the continuum work diligently to place patients in the right setting of care, a practice that benefits the entire medical system. The positive effect this legislation will have on impacted payers' standardization is essential and will result in expedited prior authorizations which will allow patients to move across the care continuum when it is medically indicated for them to do so, rather than on the timeline of their payor. This lessens the risk of nosocomial infections and other hospital-acquired conditions, improving the quality of members' care. Additionally, this smoothing of throughput will avail needed hospital beds to those patients experiencing the highest-acuity medical issues. We expect that this will improve efficiency in both inpatient and outpatient care and will reduce risk of readmission for patients as well.

We are encouraged that this standard will help reduce the administrative burdens in the impacted payers' processes by increasing efficiency, reducing overall payer and provider burden,



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and improving patient access to health information. We are particularly encouraged to see the thoughtful measures taken to consider the needs of our most vulnerable patients, including those impacted by social risk factors, affected by behavioral health diagnoses, and receiving care for maternal health needs. ACMA stands ready to provide support for this regulation and provide guidance on its implementation.

Sincerely,

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L. Greg Cunningham CEO