

June 30, 2025

Honorable Mehmet Oz, MD
Administrator
Centers for Medicare & Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

RE: Public Comments on Service Level Data Collection for Initial Determinations and Appeals (CMS-10905, OMB control number: 0938-New)

Dear Administrator Oz:

On behalf of our more than 200 hospitals and nearly 40 health systems, the Illinois Health and Hospital Association (IHA) appreciates the opportunity to comment on the Federal Register notice concerning the proposed collection of information specific to Medicare Part C plans. IHA supports the Centers for Medicare & Medicaid Services' (CMS) proposal to collect service-level data related to Medicare Advantage (MA) plan coverage and appeal decisions. The Agency's focus on MA determinations and appeals decisions will be especially important as the population ages and we continue to see increased enrollment in MA plans.

In Illinois alone, 40% of Medicare beneficiaries are enrolled in an MA plan, with national Medicare beneficiary MA enrollment closer to 50%. Our members continue to express concerns about inappropriate denials and frustrations around appeals, especially related to requests for post-acute and Long-Term Acute Care Hospital placement. Ensuring CMS has the data it needs to analyze benefits utilization and ensure MA plan compliance with CMS guidelines is paramount to ensuring MA-enrolled Medicare beneficiaries have appropriate and sufficient access to covered services and benefits.

IHA supports the entirety of the proposed data elements lists in the Technical Specifications with CMS-10905. There are also a few proposed data elements that we think are particularly insightful for MA plan oversight. In terms of coverage decisions, these include:

- Date request received
- Date of decision notification
- Disposition
- Dismissal rationale
- Decision rationale
- Reviewer qualifications

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- Did a third-party vendor participate in any capacity in the determination's review or decision making?

Regarding payment data, especially significant data elements include:

- Date of service
- Date claim received
- Date of decision
- Date claim was paid
- Was it a clean claim?
- Dismissal rationale
- Decision rationale
- Were internal coverage criteria applied?
- Did a third-party vendor participate in any capacity in the determination's review or decision making?

Collecting these data will assist CMS staff and other stakeholders in better understanding the access MA plans provide Medicare beneficiaries, while also ensuring CMS can determine whether Medicare dollars are being spent efficiently and effectively to ensure the health of Americans enrolled in Medicare.

Dr. Oz, thank you again for the opportunity to comment on the proposed data collection of MA plan service-level data. Please send questions or comments to Cassie Yarbrough, AVP, Health Policy and Finance at cyarbrough@team-iha.org.

Sincerely,

A.J. Wilhelmi
President & CEO
Illinois Health and Hospital Association