



September 17, 2021

Katie Wunderlich
Executive Director
Health Services Cost Review Commission
4160 Patterson Avenue
Baltimore, MD 21215

Dear Ms. Wunderlich:

On behalf of the Maryland Hospital Association's (MHA) 60 member hospitals and health systems, we appreciate the opportunity to comment on the Commission's proposed Medicare Performance Adjustment (MPA) Policy for 2022.

MHA makes several recommendations:

Attribution

MPA is a key provision of the Total Cost of Care Model to ensure hospital accountability to manage total cost of care for Maryland Medicare beneficiaries. Its design has enabled a variety of initiatives to transform care delivery in the state based on specific population needs.

As noted by HSCRC staff, no methodology will capture care patterns with a high degree of accuracy. Yet, the hierarchical attribution was well vetted, as it recognizes the care partnerships hospitals established to better manage total cost of care. The geographic methodology is not the best approach to acknowledge and incentivize changes to care delivery, but the care transformation initiative (CTI) program mitigates the removal of the hierarchical methodology.

MHA accepts the geographic approach, including CTI mitigation. Though it was included last year, MHA asks HSCRC to publish the program mechanics of incorporating CTI into MPA and to invite hospitals to comment before HSCRC embeds the CTI consideration in the final recommendation.

MHA supports adding an attribution layer for academic medical centers, as they provide tertiary and quaternary care, as well as specialty services, to patients from all over the state. This care model is not reflected in either the existing hierarchical method or the proposed geographic attribution method.

CTI Buyout Should Remain

The CTI program aims to reward hospitals for successful initiatives and to mitigate risk under MPA where there is population overlap. Removing the buyout would result in duplicative

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financial penalties or rewards. MHA agrees with the staff recommendation to keep the CTI buyout option in the 2022 proposal.

Standardize Hospital Primary Service Areas (PSA)

The geographic attribution methodology assigns beneficiaries to hospitals based on PSAs outlined in their 2013 global budget revenue agreements. PSAs include ZIP codes selected by hospitals absent a common definition and may not accurately reflect current catchments. MHA supports HSCRC staff collaborating with the hospital field to update PSAs.

Thank you for your consideration of our recommendations. If you have any questions, please do not hesitate to contact me.

Sincerely,



Brett McCone
Senior Vice President, Health Care Payment

cc: Adam Kane, Chairman
Joseph Antos, Ph.D., Vice Chairman
Victoria W. Bayless
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