



American Association on Health & Disability

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AAHD - *Dedicated to better health for people with disabilities through health promotion and wellness*



LAKESHORE

June 5, 2025

The Honorable Dr. Mehmet Oz
Administrator
Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attention: CMS-1833-P
P.O. Box 8013
Baltimore, MD 21244-8013

Re: Medicare Program; Hospital Inpatient Prospective Payment Systems for Acute Care Hospitals and the Long-Term Care Hospital Prospective Payment System and Policy Changes and Fiscal Year 2026 Rates; Requirements for Quality Programs; and Other Policy Changes

Attention: CMS-1833-P

Dear Administrator Oz:

Thank you for the opportunity to comment on the proposed Medicare Hospital Inpatient Prospective Payment System (IPPS) regulation for Calendar Year 2026.

The American Association on Health & Disability (www.aahd.us) is a national cross-disability organization that conducts research, engages the community, and facilitates the development and implementation of programs to advance public health and healthcare policy for the health and wellness of people with disabilities. Through these actions, AAHD is committed to eliminating systemic barriers to healthcare and drive health equity for people across all disabilities, valuing the diverse and intersecting identities within the disability community. AAHD connects people with disabilities, disability advocates, health practitioners, researchers, and policy makers to accessible cross-disability health data and resources—creating a more inclusive society where data-driven healthcare leads to more equitable health outcomes.

The Lakeshore Foundation (www.lakeshore.org) mission is to enable people with physical disability and chronic health conditions to lead healthy, active, and independent lifestyles through physical activity, sport, recreation and research. Lakeshore is a U.S. Olympic and Paralympic Training Site; the UAB/Lakeshore Research Collaborative is a world-class research program in physical activity, health promotion and disability linking Lakeshore's programs with the University of Alabama, Birmingham's research expertise.

X.C. Requirements for and Changes to the Hospital Inpatient Quality Reporting (IQR) Program

We oppose the CMS proposal to remove the Screening for Social Drivers of Health (SDOH-1) measure, and the Screen Positive Rate for Social Drivers of Health (SDOH-2) measure from the Inpatient Quality Reporting (IQR) Program.

[Pages 18345 and 18342 of the proposed rules]

Thank you for use of the phrase “Social Drivers of Health” and the word “drivers.” As the Commonwealth Fund observed in their December 15, 2023 blog (“Let’s Get It Right: Consistent Measurement of the Drivers of Health”): “Consistent with research, people – across race, gender, politics, and geography – vehemently reject the phrase ‘social determinants of health’ as demeaning and confusing’.” AAHD and the Lakeshore Foundation actually prefer the phrase – “Health-Related Social Needs” – a better description of the relationship between health and social needs and a justification for health insurance payment. The 2016 American Journal of Preventive Medicine article (“Family Medicine Team Perspectives on Screening for Health-Related Social Needs”) estimated that only 20% of a person’s health outcomes are linked to their medical care with the remaining 80% attributable to drivers of health.” SDOH tracking supports the goals of improving health outcomes by providing clinicians with a more comprehensive understanding of each patient’s circumstances to inform clinical decision making to ensure highest quality care.

Among the best documented initial data of SDOH and disability relationship are the National Academies/National Academy of Medicine November 2017 “People Living with Disabilities: Health Equity, Health Disparities, and Health Literacy: Proceedings of a Workshop” and the research and September 8, 2015 presentation to CMS by Gloria Krahn, Ph.D., Oregon State University, “Persons with Disabilities as a Health Disparity Population.” Dr. Krahn’s work compares factors affecting the health of people with disabilities and without disabilities.

The SDOH measures, developed and field tested by the Physicians Foundation, have been considered by HHS-CMS expert agents – National Quality Forum, Battelle Partnership for Quality Measurement, Mathematica Medicaid and CHIP Core Quality Measures, National Committee for Quality Assurance, and the Core Quality Measures Collaborative. The two measures have been analyzed and debated by the nation’s quality measurement brain trust. AAHD has been actively engaged with all but Battelle in these efforts.

In 2023, CMS adopted new measures into the Hospital IQR Program: two being, SDOH-1, and SDOH-2. SDOH-1 and SDOH-2 are quality measures that incentivize hospitals and providers to better understand the non-clinical factors impacting patients’ health. SDOH-1 requires hospitals to report on how many patients were screened for food insecurity, housing instability, transportation needs, utility difficulties, or interpersonal safety issues. SDOH-2 collects data on

whether a patient has screened positive for any of the SDOH-1 domains. Both SDOH-1 and SDOH-2 work to equip providers with the complete picture of their patients' health to better improve health outcomes, and to strengthen the ability of the health care system to drive broader population health improvements.

We oppose CMS' proposal to remove SDOH-1 and SDOH-2 measures from the Inpatient Quality Reporting program.

Thank you for the opportunity to comment. If you have any questions please contact Clarke Ross at clarkeross10@comcast.net.

Sincerely,



E. Clarke Ross, D.P.A.

American Association on Health and Disability

And

Lakeshore Foundation

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