



April 10, 2024

Chiquita Brooks-LaSure, Administrator  
Centers for Medicare & Medicaid Services  
Department of Health and Human Services  
Attention: CMS-4201-P  
P.O. Box 8013  
Baltimore, MD 21244

**Re: Medicare Program; Strengthening Oversight of Accrediting Organizations (AOs) and Preventing AO Conflict of Interest, and Related Provisions**

Submitted electronically via [www.regulations.gov](http://www.regulations.gov)

Dear Administrator Brooks-LaSure,

On behalf of the Coalition to Transform Advanced Care (C-TAC), we appreciate the opportunity to provide comments on this proposed rule regarding its effect on those living with serious illness.

C-TAC is a national non-partisan, not-for-profit coalition dedicated to ensuring that all those living with serious illness, especially the sickest and most vulnerable, receive comprehensive, high-quality, person- and family-centered care that is consistent with their goals and values and honors their dignity. C-TAC comprises more than 200 national and regional organizations, including patient and consumer advocacy groups, practitioners, health plans, faith-based and community organizations, and others who share a common vision of improving care for serious illness in the U.S.

C-TAC [defines serious illness](#) as a health condition that carries a high risk of mortality and either negatively impacts a person's daily function or quality of life, or excessively strains their family caregivers. This definition has been widely adopted, including by the National Committee for Quality Assurance (NCQA) and the National Quality Forum (NQF).

Serious illness is also a health equity issue. A history of disenfranchisement has led to healthcare gaps across the country. Per a [2021 Commonwealth report](#) on racial and ethnic health equity, communities of color live fewer years, on average, than white people do, are more

likely to die from treatable conditions, and are also at higher risk for many chronic health conditions. For serious illness, the lack of access to health insurance and [primary care](#) mean many are [diagnosed only at a late or end stage](#) of illness, when disease-modifying treatment is typically no longer effective. Those from historically under-resourced communities who also have serious illness [experience poorer care](#) and access, making improving their care a health equity opportunity.

Overall, C-TAC supports the proposed changes in this rule. As advocates for the patient and family caregiver, we support all efforts to ensure the highest quality of care delivered to them. Therefore, we agree with the key aspects of the proposed rule: holding AOs accountable to the same standards as state survey agencies, ensuring that AOs remain independent reviewers by addressing conflicts of interest, and placing certain limitations on the fee-based consulting services AOs provide to the healthcare facilities they accredit, and preventing AO conflicts of interest. We believe these will help assure that only qualified healthcare facilities become and remain accredited. This will then help the public know which ones to choose from and to be confident that any accredited organizations they do choose will provide high-quality care.

We also appreciate the agency's recognition that AOs provide helpful direction and support via fee-based consulting to facilities seeking accreditation. Our members tell us these consulting services are needed to promote their understanding of accreditation requirements and attainment of accreditation. However, we agree that a better separation between those fee-based consulting services and the accrediting/surveying services needs to exist to ensure conflicts of interest do not result in inappropriate accreditation.

Thank you for the opportunity to comment on this proposed rule. If you have any questions, please contact Marian Grant, Senior Regulatory Advisor, C-TAC, at [mgrant@thectac.org](mailto:mgrant@thectac.org).

Sincerely,

***Marian Grant***

Marian Grant, DNP, ACNP-BC, ACHPN, FPCN, FAAN, RN  
Senior Regulatory Advisor  
Coalition to Transform Advanced Care (C-TAC)