

June 10, 2025

Mehmet Oz, MD
Administrator
Centers for Medicare & Medicaid Services
U.S. Department of Health and Human Services
Attention: CMS-1831-P
Mail Stop C4-26-05
7500 Security Boulevard,
Baltimore, MD 21244-1850

RE: CMS-1831-P Medicare Program; FY 2026 Inpatient Psychiatric Facilities Prospective Payment System – Rate Update

Dear Administrator Oz:

I am writing to you on behalf of the 102,000 members of the National Association of Social Workers (NASW). NASW is the largest and oldest professional social work organization in the United States. The association promotes, develops, and protects the practice of social work and professional social workers. Social workers are one of the largest providers of mental, behavioral, and social care services in the nation and serve a crucial role in connecting individuals and families to health care services.

NASW appreciates the opportunity to submit comments on CMS-1831-P, Notice of Proposed Rule Making (NPRM), on the Medicare Program; FY 2026 Inpatient Psychiatric Facilities Prospective Payment System – Rate Update.

NASW's comments specifically address subject areas related to the Inpatient Psychiatric Facility Quality Reporting (IPFQR) Program and focus on the following areas:

- Proposal to Remove the Facility Commitment to Health Equity Measure Beginning with the CY 2024 Reporting Period/FY 2026 Payment Determination
- Proposal to Remove the COVID–19 Vaccination Coverage Among Healthcare Personnel Measure Beginning with CY 2024 Reporting Period/FY 2026 Payment Determination
- Proposed Removal of Two Social Drivers of Health Measures Beginning with CY 2024 Reporting Period/FY 2026 Payment Determination
- Feedback Solicited: Summary of IPFQR Program Measures for the FY 2028 Payment Determination and Subsequent Years

- Feedback Solicited: IPFQR Program Extraordinary Circumstances Exception (ECE) Policy
- Requests for Information on Future Changes to the IPFQR Program

Proposal to Remove the Facility Commitment to Health Equity Measure Beginning with the CY 2024 Reporting Period/FY 2026 Payment Determination

CMS proposes to discontinue the Facility Commitment to Health Equity measure from the IPFQR Program and is implicitly soliciting stakeholder feedback on this change as part of the rulemaking process.

NASW urges CMS not to remove the Facility Commitment to Health Equity measure. This measure reinforces accountability for advancing health equity an objective central to CMS' own Framework for Health Equity 2022–2032.¹ Eliminating the measure could undermine psychiatric facilities' commitment to reducing disparities. Instead, NASW encourages CMS to consider revising the measure to reduce burden for example, by aligning it with existing workflows or integrating it into EHR systems.

Proposal to Remove the COVID–19 Vaccination Coverage Among Healthcare Personnel Measure Beginning with CY 2024 Reporting Period/FY 2026 Payment

CMS proposes discontinuing this measure from the IPFQR Program. This is a policy change with implications for infection control monitoring, and CMS seeks public feedback.

NASW asks CMS to reconsider its proposal to remove the COVID–19 Vaccination Coverage Among Healthcare Personnel measure. The association's comments to CMS on the FY 2024 Skilled Nursing Facility (SNF) payment rule raised concerns about the reliability of self-reported vaccination data and recommended the implementation of auditing systems to ensure data accuracy.² Retaining this measure is important to sustaining infection control practices and protecting vulnerable psychiatric populations. Its removal may weaken transparency and public confidence in facility safety. Rather than eliminating the measure, CMS may want to consider incorporating auditing processes to verify self-reported vaccination data and ensure ongoing prioritization of staff immunization efforts.

Proposed Removal of Two Social Drivers of Health Measures Beginning with CY 2024 Reporting Period/FY 2026 Payment Determination

CMS proposes removing the Screening for Social Drivers of Health and Screen Positive Rate measures due to burden concerns, while noting the relevance of these measures to equity objectives. CMS seeks stakeholder perspectives on this balance

¹ Centers for Medicare & Medicaid Services. (2022). *CMS framework for health equity 2022–2032*. U.S. Department of Health and Human Services. <https://www.cms.gov/files/document/cms-framework-health-equity.pdf>

² National Association of Social Workers. (2023, June 5). *Comments to CMS on the FY 2024 Skilled Nursing Facility Prospective Payment System Proposed Rule (CMS–1779–P)*. <https://www.socialworkers.org/LinkClick.aspx?fileticket=4ZGhlqxQ6pY%3D&portalid=0>

While NASW understand CMS' intent to reduce reporting burden, the association recommends retaining or revising the Screening for Social Drivers of Health and Screen Positive Rate measures rather than removing them entirely. These measures help capture nonclinical factors such as housing instability, food insecurity, and transportation barriers that influence patient outcomes, care planning, and recovery. NASW recommends retaining these measures to promote patient-centered care and ensure that psychiatric facilities remain engaged in efforts to identify and reduce health disparities. NASW believes the removal of these measures would conflict with longstanding public health and policy objectives, including those outlined in [CMS Framework for Health Equity 2022–2032](#), which emphasizes the importance of measuring and addressing social drivers of health to advance equity in care delivery. To reduce burden, CMS could consider allowing sampling methods, aligning measures with existing screenings (e.g., admission assessments), or automating reporting through EHR integration.

Summary of IPFQR Program Measures for the FY 2028 Payment Determination and Subsequent Years

CMS outlines future implementation of standardized patient assessment instruments and solicits feedback on future measure development, especially regarding social, functional, and behavioral domains

As CMS updates the IPFQR Program for FY 2028 and beyond, NASW urges the continued inclusion of equity-focused and social needs-based quality measures. NASW believes the future direction of the IPFQR Program should reflect a commitment to whole-person, patient-centered care by capturing data that addresses social determinants of health and disparities in psychiatric treatment. The association supports the integration of standardized assessment tools and encourages CMS to prioritize alignment with care planning workflows and reduce burden through EHR-enabled reporting.

IPFQR Program Extraordinary Circumstances Exception (ECE) Policy

CMS proposes to codify the ECE policy for the IPFQR Program. This proposal includes formally defining the process by which Inpatient Psychiatric Facilities (IPFs) may request and receive an exception from quality reporting requirements due to disruptive events, such as natural disasters, public health emergencies, or other unforeseeable circumstances. CMS is seeking feedback on the policy structure and its alignment with similar exception processes in other CMS quality reporting programs.

NASW supports CMS' proposal to codify the ECE policy for the IPFQR Program and emphasizes the importance of making the process equitable, transparent, and trauma-informed. The increasing reliance on digital systems in healthcare has made psychiatric facilities

susceptible to cybersecurity threats.^{3,4} For instance, a ransomware breach could immediately block access to electronic health records and secure communication channels, disrupting care coordination. By formally recognizing cybersecurity incidents in the exception policy, CMS would allow facilities to prioritize system recovery and patient safety without penalty. NASW urges CMS to ensure that the ECE application process includes clear timelines, minimal administrative burden, and flexibility for facilities that may lack robust infrastructure or staffing during emergencies. Additionally, NASW recommends that CMS provide tailored technical assistance for psychiatric facilities navigating the ECE process.

Requests for Information on Future Changes to the IPFQR Program

CMS is soliciting stakeholder input on potential future updates to the IPFQR Program. Specifically, CMS requests feedback on (1) the development of a future star rating system for Inpatient Psychiatric Facilities (IPFs), (2) the introduction of new measure concepts related to patient well-being and nutrition, and (3) the adoption of digital quality measurement (dQM), including the use of Fast Healthcare Interoperability Resources (FHIR) standards for electronic health data exchange.

NASW supports a future star rating system that integrates patient experience, equity, and interdisciplinary care coordination. The association also endorses the development of well-being and nutrition measures to further address concerns related to social determinants of health. On digital quality measurement, NASW affirms the value of modernized reporting through FHIR but urges CMS to address EHR infrastructure disparities and provide technical and financial support to ensure equitable implementation across psychiatric facilities.

Thank you for your consideration of NASW's comments on the NPRM. Please do not hesitate to contact me at bbedney.nasw@socialworkers.org if you have questions.

Sincerely,

Barbara Bedney, PhD, MSW

Barbara Bedney, PhD, MSW

NASW Chief of Programs

³ Alibudbud, R. (2022). Psychiatric hospital design and its impact on mental health care delivery: A literature review. *Saudi Journal of Biological Sciences*, 29(12), 103373. <https://doi.org/10.1016/j.sjbs.2022.103373>

⁴ Johnson, D. (2024, March 27). *Change Healthcare Cyberattack: What Social Workers Should Know*. Social Work Blog. <https://www.socialworkblog.org/sw-practice/2024/03/change-healthcare-cyberattack-what-social-workers-should-know/>