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February 3, 2025

Jeff Wu, JD, MBA
Acting Administrator
Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attention: CMS-2024-0360-0001
7500 Security Boulevard
Baltimore, MD 21244-1850

Submitted electronically via <https://www.regulations.gov>

Re: CMS-2024-0360-0001

Dear Acting Administrator Wu,

Thank you for the opportunity to provide comments on the Centers for Medicare & Medicaid Services (CMS) Advanced Notice of calendar year (CY) 2026 Methodological Changes for Medicare Advantage (MA) and Part D payment policies.

The American Academy of Dermatology Association (Academy) is the leading society in dermatological care, representing more than 17,500 dermatologists nationwide. The Academy is committed to excellence in the medical and surgical treatment of skin disease; advocating for high standards in clinical practice, education, and research in dermatology and dermatopathology; and driving continuous improvement in patient care and outcomes while reducing the burden of skin disease.

The Academy appreciates CMS' efforts to evaluate and update MA and Part D programs and the efforts to review and update Star Ratings measures. However, we highlight concerns with a potential change that CMS is contemplating – specifically to retire two measures regarding plans' review of appeals given improving performance over time. It is noted that under the current requirements for MA and Part D plans, scores have increased from 90 percent for the 2015 Star

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Ratings to 96 percent for the 2025 Star Ratings for the Plan Makes Timely Decisions about Appeals measure, and from 88 percent to 95 percent during the same time period for the Reviewing Appeals Decisions measure. We strongly disagree with this approach and urge CMS not to retire these two appeals measures from the Star Rating program.

Patients face significant barriers to treatment when MA and Part D plans use coverage and utilization management policies such as prior authorization and step therapy. These types of policies can delay the initiation or continuation of medically necessary treatments, which ultimately jeopardizes patients' health and increases the risk of poor health outcomes. Dermatologists have shared numerous stories detailing patients who have been denied coverage and payment for services that are in compliance with Medicare coverage criteria and MA billing policies. In addition to hindering beneficiaries from receiving timely access to medically necessary care, rejecting requests that meet Medicare coverage criteria burdens physicians and their practices.

The appeals process offers an important safeguard for patients who are inappropriately denied care as a result of restrictive utilization management policies. We are therefore concerned that CMS is considering reducing plan accountability on their performance regarding appeals processing by potentially retiring the appeals measures from the Star Rating program. CMS suggests that, in lieu of including the above measures in Star Ratings, it would instead monitor performance and issue compliance actions as needed, as well as monitor access issues through the CAHPS Survey. However, we believe that this approach would remove important incentives for MA plans' performance related to appeals and access to care, which would ultimately lead to deterioration of plan performance on these metrics and reduced patient access to medically necessary care. **To protect against such an outcome, the Academy urges CMS to continue to retain Plan Makes Timely Decisions about Appeals and Reviewing Appeals Decisions measures in the Star Rating Program.**

Should CMS nonetheless retire these two measures, the Academy recommends that:

- **CMS should publicly report plan performance on the two appeals measures as Display Measures.** While maintaining the measures in the Star Rating program would provide the strongest incentives, which the Academy supports, public reporting of data would promote transparency and allow stakeholders to monitor plan performance alongside CMS to exert pressure as needed if performance falters.
- **CMS should closely monitor plan performance and move quickly to restore the measures to the Star Rating system if evidence of reduced performance emerges.** Notably, small reductions in performance on these measures translate into significant – and potentially tragic – impacts to individual patients.

We applaud CMS' continued focus on strengthening the Medicare Advantage and Part D programs and for proposing revisions to regulations governing MA and Part D plans. We appreciate the opportunity to provide feedback to ensure beneficiaries have timely access to dermatological care. If you need additional information, please contact Lou Terranova, Associate Director, Practice and Payment Policy at lterranova@aad.org.

Sincerely,

A handwritten signature in black ink that reads "Seemal R. Desai MD FAAD". The signature is written in a cursive, flowing style.

Seemal R. Desai, MD, FAAD

President, American Academy of Dermatology / Association