# Association of Community Cancer Centers

### The leading education and advocacy organization for the cancer care community

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Christian G. Downs, JD, MHA

The Honorable Chiquita Brooks-LaSure Administrator Centers for Medicare & Medicaid Services U.S. Department of Health and Human Services 200 Independence Avenue, SW Washington, DC 20201

Submitted electronically at https://www.regulations.gov/

Re: File Code CMS-1786-P. Medicare Program: Hospital Outpatient Prospective Payment and Ambulatory Surgical Center Payment Systems; Quality Reporting Programs; Payment for Intensive Outpatient Services in Rural Health Clinics, Federally Qualified Health Centers, and Opioid Treatment Programs; Hospital Price Transparency; Changes to Community Mental Health Centers Conditions of Participation, Proposed Changes to the Inpatient Prospective Payment System Medicare Code Editor; Rural Emergency Hospital Conditions of Participation Technical Correction

Dear Administrator Brooks-LaSure:

The Association of Community Cancer Centers (ACCC) appreciates the opportunity to offer comments to the Centers for Medicare and Medicaid Services (CMS) on the calendar year (CY) 2024 Hospital Outpatient Prospective Payment System (OPPS) proposed rule, published in the Federal Register on Monday, July 31, 2023 (88 Fed. Reg. 49552). ACCC is the leading education and advocacy organization for the multidisciplinary cancer care community including physicians, nurses, social workers, pharmacists, researchers, hospital executives, administrators, financial navigators, and other oncology team members who care for millions of patients and families fighting cancer. ACCC represents more than 34,000 cancer care professionals from over 1,700 private practices, hospital-based cancer programs, large healthcare systems, and major academic centers across the country, as well as members from 23 managed oncology state societies.

ACCC respectfully offers the following comments to CMS in response to one proposal within the CY 2024 OPPS proposed rule. In summary, we recommend that CMS:

 Not finalize its proposal to provide for a separate payment under IPPS for hospitals to establish and maintain access to a buffer stock of essential medicines.

We address this recommendation in greater detail below.

Establishing and Maintaining a Buffer Stock of Essential Medicines

CMS proposal (88 Fed. Reg. 49868): CMS is proposing separate payment under IPPS for hospitals to establish and maintain access to a buffer stock of essential medicines to "foster a more reliable, resilient supply of these medicines."



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It states that it "believes it is necessary to support practices that can curtail pharmaceutical shortages of essential medicines and promote resiliency in order to safeguard and improve the care hospitals are able to provide to beneficiaries."

**ACCC comment:** ACCC appreciates CMS' consideration of policy options to help address the serious issue of drug shortages, which has included severe shortages of important chemotherapy medicines. However, ACCC is concerned that this proposal may have the unintended effect of creating further shortages in the overall supply chain rather than ameliorating these challenges. It could result in certain providers holding more supplies than they need, at the expense of other providers. We therefore do not support this proposal and ask that CMS not finalize it. ACCC pledges to work with CMS to develop alternative solutions.

Thank you for this opportunity to share the oncology care provider perspective on the CY 2024 OPPS proposed rule. As the association representing the multidisciplinary cancer care team, ACCC is uniquely suited to participate in this dialogue with CMS in its efforts to maintain a stable and equitable Medicare payment system. If you have any questions on our comments, please feel free to contact Nicole Tapay, Director of Cancer Care Delivery & Health Policy, at ntapay@accc-cancer.org or (640) 250-0398.

Respectfully Submitted,

Christian G. Downs, JD, MHA

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**Executive Director** 

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