

defeat **malnutrition** today

June 17, 2022

Chiquita Brooks-LaSure, Administrator
Centers for Medicare and Medicaid Services (CMS)
Department of Health and Human Services
7500 Security Boulevard
Baltimore, MD 21244-1850

RE: Docket No. CMS-1771-P

Submitted electronically at [Regulations.gov](https://www.regulations.gov)

Dear Ms. Brooks-LaSure:

The Defeat Malnutrition Today coalition appreciates the opportunity to comment on the Centers for Medicare and Medicaid Services' (CMS) FY 2023 hospital inpatient prospective payment system (IPPS) proposed rule, file code CMS-1771-P, and specifically **in support of the proposal to adopt the Global Malnutrition Composite Score quality measure.**

Defeat Malnutrition Today is a coalition of over 120 members committed to defeating older adult malnutrition across the continuum of care. We are a diverse alliance of stakeholders and organizations working to achieve a greater focus on malnutrition screening, diagnosis, and intervention through regulatory and/or legislative change across the nation's health care system.

Policy Interventions Are Needed

We commend CMS for your recognition of the impact of malnutrition on older adult health and outcomes and for considering the Global Malnutrition Composite Score for adoption.

Currently, no public quality reporting programs include performance measures focused on nutrition care or malnutrition. This is significant given that up to one in two older Americans is at risk for malnutrition or is malnourished, and a recent [Government Accountability Office report](#) noted that "the majority of older adults have chronic conditions and evidence shows older adults' nutrition is associated with their health outcomes."

We note the growing policymaker focus on the issue of malnutrition; the Congressional Research Service recently released a [memo requested by members of Congress](#) which stated [emphasis ours]:

Moreover, the impact and burden of disease can have important implications for federal policy with respect to the role of public programs that address malnutrition in older adults. In particular, this role includes the government's role in financing health care coverage for older adults and low-income individuals under the Medicare and Medicaid programs. **The federal government also has a role in ensuring quality care for Medicare and Medicaid participants, including through the consideration and adoption of relevant quality measures in certain Medicare quality programs that address malnutrition.** Public policy interventions also include

federal programs and activities that collect data and conduct research to understand the scope and severity of disease to effectively target public health interventions to at-risk populations, and to provide access to medical and therapeutic interventions that address malnutrition.

Nutrition Care Follows the Patient

This issue is also vital to members of our coalition and their constituents. As a coalition containing many community-based organizations, our members have seen the growing incidence of older adults with malnutrition living in community settings. Unfortunately, a formal diagnosis of malnutrition is typically not made until an older adult is hospitalized. We believe that the Global Malnutrition Composite Score is key to ensuring continuity of care as older adults transition home from acute care hospitals into community settings through the creation of a nutrition care plan for discharge.

Nutrition care plans typically involve connecting patients to community resources such as the Older Americans Act nutrition program (local home-delivered and congregate meals programs), federal nutrition assistance programs and community-based dietetics care. That way, the nutrition care that starts in the hospital continues into the community when patients leave.

The Older Americans Act nutrition program, which is overseen by the Administration for Community Living and administered at the local level, has also recently taken steps toward addressing older adult malnutrition; in its 2020 reauthorization, it added “reducing malnutrition” to its purposes and required participant screening for malnutrition. CMS can support this effort by ensuring that hospitals are referring patients to community-based care. (For more discussion on this topic, our coalition co-hosted a Dialogue on “[Advancing Patient-Centered Malnutrition Care Transitions](#)” in 2018 which further detailed this issue.)

Addressing Health Equity and Social Determinants of Health

We also believe that the Global Malnutrition Composite Score fully meets the four specific health equity priorities that CMS has identified for reducing disparities in health. As I wrote in a November 2021 [Health Affairs Forefront article](#), “Non-Hispanic Black patients were more likely to be at risk for malnutrition, have a diagnosis of malnutrition, and experience a higher 30-day readmission rate. These disparities among higher-risk groups could be addressed by tailored interventions.”

Further, for older adults, social determinants of health such as nutrition play a critical role not only in better health outcomes, but also in improving overall well-being. Most older adults have more than one chronic condition, and older adults of color, including [American Indian](#) and [Black](#) populations, tend to have higher rates of specific nutrition-related chronic diseases such as diabetes and heart disease. Including nutrition evaluations and services as part of older adult healthcare is recommended to avoid and minimize the effects of nutrition-related disease.

Again, we fully support CMS’s proposal to adopt the Global Malnutrition Composite Score quality measure in the 2024 Hospital Inpatient Quality Reporting Program, given the overarching burden that malnutrition has on patients and the healthcare system as a whole. CMS adoption of this measure will help close the gap in identification and intervention of malnutrition and help healthcare institutions better measure up to support older adults’ nutrition care.

Thank you for considering our comments. Please let us know if we can provide you with any further information. You may reach me at rblancato@matzblancato.com.

Sincerely,

A handwritten signature in blue ink that reads "Bob Blancato". The signature is written in a cursive style with a large initial "B".

Bob Blancato
National Coordinator
Defeat Malnutrition Today