

June 28, 2023

Michelle Schreiber, MD
Director
Quality Measurement and Value-based Incentives Group
Centers for Medicare and Medicaid Services
7500 Security Blvd.
Baltimore, MD 21244

Re: Diabetes Episode Cost Measure for 2022 Inappropriately Attributed to Ophthalmologists

Dear Dr. Schreiber,

On behalf of the American Society of Retina Specialistsⁱ, the American Academy of Ophthalmologyⁱⁱ and the American Society of Cataract and Refractive Surgeryⁱⁱⁱ, organizations that represent ophthalmology and its largest sub-specialties, **we write to express our concerns that ophthalmologists are being inadvertently and inappropriately attributed the diabetes episode-based cost measure for the 2022 MIPS performance year.** We are aware that retina practices are initiating disputes based on their current preview scores and we urge you to **make modifications to prevent any ophthalmologist or ophthalmology practice having this measure included in their final 2022 scores.**

All three organizations have been active participants in the ongoing effort to develop episode-based cost measures that more accurately reflect the care specialists are providing to Medicare beneficiaries. We have appreciated the iterative and collaborative process CMS has undertaken to foster these measures. In particular, a retina specialist served on the clinician workgroup that developed the diabetes measure.

We believe, however, that CMS' implementation of the diabetes measure is not correctly attributing the costs to the physicians and providers the workgroup intended. Specifically, the measure should be attributed to the physician taking care of the patient's diabetes and not the ocular complications.

Retina specialists and other ophthalmologists are integral members of the care team for diabetic patients providing ongoing screening and more intensive interventions if the patient develops co-morbidities, such as diabetic retinopathy or diabetic macular edema. However, they do not manage the underlying disease, nor do they perform or prescribe the services and medications included in the diabetes measure's attribution specifications. For patients who develop chronic diabetic retinal disease, they may need to see their retina specialist roughly monthly for injections. Based on the attribution methodology, nearly every diabetic patient seeing a retina specialist would trigger the measure. This will inevitably lead to double-counting patients, and provide beneficiaries with an unclear picture of the care their physicians provide.

We are aware that Acumen may have made changes to address these concerns earlier, nevertheless, that fix has left significant numbers of our members with preview reports indicating they will be scored on the measure. There appear to be conflicting interpretations of the attribution methodology in various CMS publications, including measure specifications and FAQ documents. While we appreciate that the measure developers sought to devise a way to ensure only the most appropriate clinicians are attributed this measure, it does not appear to be entirely successful. We recommend that CMS take a simple and straightforward approach, similar to the attribution methodology for the total per capita cost measure, and exclude certain specialists entirely based on their Medicare enrollment data.

Thank you for this opportunity to provide feedback on CMS' ongoing efforts to make the MIPS program useful and flexible for all clinicians and beneficiaries. If you have additional questions or would like to schedule a meeting to discuss this issue further, please contact Allison Madson, vice president of health policy, at ASRS at allison.madson@asrs.org.

Thank you in advance for your consideration.

Sincerely,



Michael M. Lai, MD, PhD
Chairman
ASRS Federal Affairs Committee

David Glasser, MD
Secretary for Federal Affairs
AAO

Parag Parekh, MD, MPA
Chairman
ASRS Government Relations Committee

ⁱ ASRS is the largest retina organization in the world, representing over 3,000 board certified ophthalmologists who have completed fellowship training in the medical and surgical treatment of retinal diseases. The mission of the ASRS is to provide a collegial open forum for education, to advance the understanding and treatment of vitreoretinal disease.

ⁱⁱ The American Academy of Ophthalmology is the largest association of eye physicians and surgeons in the United States. A nationwide community of nearly 20,000 medical doctors, we protect sight and empower lives by setting the standards for ophthalmic education and advocating for our patients and the public.

ⁱⁱⁱ The American Society of Cataract and Refractive Surgery (ASCRS) is a medical specialty society representing nearly 7,000 ophthalmologists in the United States and abroad who share a particular interest in cataract and refractive surgical care.