



June 28, 2021

Ms. Chiquita Brooks-LaSure, MPP  
Administrator  
Centers for Medicare & Medicaid Services  
Department of Health and Human Services

***RE: RIN 0938–AU44 Medicare Program; Hospital Inpatient Prospective Payment Systems for Acute Care Hospitals and the Long-Term Care Hospital Prospective Payment System and Proposed Policy Changes and Fiscal Year 2022 Rates; Quality Programs and Medicare Promoting Interoperability Program Requirements for Eligible Hospitals and Critical Access Hospitals; Proposed Changes to Medicaid Provider Enrollment; and Proposed Changes to the Medicare Shared Savings Program***

Dear Ms. Brooks-LaSure,

On behalf of the undersigned national coalition of individuals and organizations, I am writing to comment on the Centers for Medicare & Medicaid Services (CMS) proposed change to the FY 2022 Inpatient Prospective Payment System (IPPS) rule regarding the proposed removal of “Death Among Surgical Inpatients with Serious Treatable Complications” (PSI-4) from the Inpatient Quality Reporting (IQR) Program. This measure is of critical importance to the public and to purchasers for the following key reasons.

- **PSI-4 is a powerful and important patient safety measure, and patient safety is one of the most significant death risks Medicare beneficiaries and the public will ever encounter.** According to a landmark article in BMJ that summarized earlier research, safety problems in U.S. hospitals are estimated to kill over 250,000 people every year. Despite this, there are relatively few patient safety measures reported in the IQR or used in payment programs, especially considering the evidence of the risk faced by Medicare beneficiaries and the public at large. CMS should be adding more patient safety measures, not removing any.
- **PSI-4 is one of the highest priority measures for purchasers and consumers.** The Leapfrog Group uses PSI-4 in its Leapfrog Hospital Safety Grade which assigns letter grades to hospitals based on their record of patient safety, and from that experience interacts with thousands of consumers and purchasers. Without a doubt, PSI-4 is the measure in the Safety Grade that resonates most with purchasers and consumers.
- **Deaths counted in PSI 4 can be prevented by hospitals; deaths from all causes are not always the fault of the hospital.** The Hybrid Hospital-Wide All-Cause Risk Standardized Mortality measure is not a replacement for PSI 4, because many hospital deaths are not related to preventable safety problems. While the all-cause mortality measures are useful, they are not a substitute for reporting hospital mortality from preventable safety problems that occur after surgery. Medicare beneficiaries deserve to know which hospitals perform best at protecting patients from surgical harm.
- **PSI-4 is a Surgical Measure.** When consumers are researching hospitals, they are often searching for a place to have a surgical procedure. There are very few measures that are focused on surgical safety or surgical outcomes in general. CMS should be adding more surgical outcome measures, not removing the one most important to consumers and purchasers.

- **Improvements to PSI-4 can occur while the current measure continues to be included in the IQR and is publicly reported.** Medicare beneficiaries and the public deserve the best available information to protect their lives and health, and PSI-4 provides that. We are aware that the measure developer has suggested refining the types of surgical patients and complications included in the measure. However, these improvements will only strengthen an already robust measure and can be made while the current measures continue to be used in the IQR and in public reporting.

On behalf of The Leapfrog Group, our Board, our members, and the undersigned coalition of individuals and organizations, we strongly urge CMS to retain PSI-4 in the IQR and in public reporting. Thank you for the opportunity to provide comments.

Sincerely,



Leah Binder, M.A., M.G.A.  
President & Chief Executive Officer  
The Leapfrog Group

**Cosigning Individuals and Organizations Supporting these comments on the CMS FY 2022 proposed rule:**

Adam Boris, Norwegian American Hospital Board of Trustees  
AGAPE, PLLC  
Alabama Employer Health Consortium  
Alicia Cole, Patient Safety Action Network  
Ann Chellis, Consumer  
Arthur Freeman, Consumer  
Bruce Bradley, Leapfrog Founder  
Carole Moss, Nile's Project MRSA Patient Safety Leaders and Activists  
Center for the Study of Services/Consumers' Checkbook  
Christine Diven, JPA Health  
Clint Brooks, Alera Group  
Dallas Fort Worth Business Group on Health  
David Hopkins, Stanford University  
Debra Schackner, Patient Advocate  
Elizabeth Smith, U.S. Foods  
Emily Paterson, Medical Error Transparency Plan  
Florida Alliance for Healthcare Value  
Gerard Honig, Crohn's & Colitis Foundation  
Greater Philadelphia Business Coalition on Health  
Halosil International, Inc.  
HealthCare21  
Healthcare Purchaser Alliance of Maine  
Health Policy Corporation of Iowa  
Heartland Health Research Institute  
Horizon Blue Cross Blue Shield of New Jersey  
Inframark, LLC

Irene Fraser, Leapfrog Board Member  
James Gabel, Consumer  
John James, Patient Safety America  
John Zern, Leapfrog Board Member, Ryan Specialty Benefits  
Kimberly Wolfford, Consumer  
Laura Smith, Patient Safety Advocate  
Lars Aanning, Retired Surgeon  
Lee Lewis, Health Transformation Alliance  
Leigh Williams, Patient Advocate  
Linda D. Lee, Consumer  
Louisiana Business Group on Health  
Lyn Trott, Registered  
Mary Carroll, Consumer  
Mary Ellen Mannix, Patient Advocate  
Maura Larkins, Consumer  
Medline Industries  
M. Hranilovich, Consumer  
Michelle Martin, Leapfrog Board Member  
Midwest Business Group on Health  
Montana Association of Health Care Purchasers  
Mothers Against Medical Error  
Mountain Radiance Medical Spa  
Nancy Johnson, Consumer  
National Alliance of Healthcare Purchaser Coalitions  
Patient Safety Action Network  
Patient Safety Movement Foundation  
Patricia Duffy, Town of Leverett  
Pittsburgh Business Group on Health  
Purchaser Business Group on Health  
Randy Charpentier, Health Safe New England  
Raquel Bono, Leapfrog Board Member, RCB Consulting  
Robert Oshel, Retired, National Practitioner Data Bank  
Sepsis Alliance  
Sharon Buckner, Tennessee Tech University  
Sharon Moon, Right Care Alliance  
St. Louis Area Business Health Coalition  
Steven Rothkin, Consumer  
Susan Watanabe, Consumer  
Tara Bowman, Consumer  
Tess Giannotti, Consumer  
The Economic Alliance for Michigan  
The Greenlight Group, LLC  
Ty Moss, Nile's Project MRSA Patient Safety Leaders and Activists  
University of Michigan Medical Benefits and Strategy  
Washington Advocate for Patient Safety  
WellOK, The Northeastern Oklahoma Business Coalition on Health  
Wyoming Business Coalition on Health