

December 22, 2023

The American Society for Parenteral and Enteral Nutrition (ASPEN), appreciates the opportunity to submit comments in response to the proposed expansion of the Global Malnutrition Composite Score to include all adults 18 years and older included in CMS's Measures Under Consideration (MUC) List for 2024. As a multi-disciplinary organization of clinicians and researchers, we have been advocating for identification, prevention, and treatment of hospital-based malnutrition since the inception of our organization in 1976. ASPEN is dedicated to improving patient care by advancing the science and practice of clinical nutrition and metabolism. ASPEN is an interdisciplinary organization whose members are involved in the provision of clinical nutrition therapies, including parenteral and enteral nutrition. With more than 6,000 members from around the world, ASPEN is a community of dietitians, nurses, pharmacists, physicians, scientists, students, and other health professionals from every facet of nutrition support clinical practice, research, and education. We have significant experience and understanding of the processes of care for identification and treatment that are outlined and recommended in the malnutrition composite score.

ASPEN has been involved in many quality and research efforts bringing forth improvements in malnutrition care, impact of better care for hospitalized and critical care patients, and documentation of these diagnoses. These include:

- [Academy of Nutrition and Dietetics and American Society for Parenteral and Enteral Nutrition: Characteristics Recommended for the Identification and Documentation of Adult Malnutrition \(Undernutrition\) 2012](#)
- [Feasibility of accessing data in hospitalized patients to support diagnosis of malnutrition by the Academy-A.S.P.E.N. malnutrition consensus recommended clinical characteristics 2013](#)
- [Critical Role of Nutrition in Improving Quality of Care: An Interdisciplinary Call to Action to Address Adult Hospital Malnutrition 2013](#)
- [Nutrition Screening and Assessment in Hospitalized Patients: A Survey of Current Practice in the United States 2014](#)
- [Addressing Disease-Related Malnutrition in Hospitalized Patients: A Call for a National Goal 2015](#)
- [Malnutrition identified by Academy of Nutrition and Dietetics/American Society for Parenteral and Enteral Nutrition is associated with more 30-day readmissions, greater hospital mortality, and longer hospital stays: a retrospective analysis of nutrition assessment data in a major medical center. 2018](#)
- [Academy of Nutrition and Dietetics/American Society for Parenteral and Enteral Nutrition consensus malnutrition characteristics: usability and association with outcomes 2019](#)

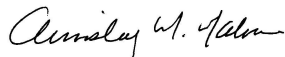
ASPEN also partnered with the Agency for Healthcare Research and Quality to develop data briefs on malnutrition in hospitalized patients and impact on hospital readmissions. This work has helped quantify the issue on a national level and helped us measure the growth of diagnosed malnutrition in this population. These reports clearly demonstrate higher costs and increased readmissions in those patients identified with malnutrition in all adults aged 18 years and higher. In 2021, ASPEN analyzed AHRQ HCUP 2018 data on inpatient malnutrition and associated readmission characteristics demonstrating similar results.

- [Non-Maternal and Non-Neonatal Inpatient Stays in the United States Involving Malnutrition, 2016 \(PDF \)](#)
- [Characteristics of Hospital Stays Involving Malnutrition, 2013 \(PDF , HTML \)](#)
- [All-Cause Readmissions Following Hospital Stays for Patients With Malnutrition, 2013 \(PDF , HTML \)](#)

- Malnutrition Diagnoses And Associated Outcomes In Hospitalized Patients: United States, 2018 ([HTML](#))

ASPEN's efforts in reporting on the impact of malnutrition and the importance of proper identification and treatment of malnutrition demonstrate how critical it is that hospitals continue and broaden the focus on this condition. The steps in the process of detecting, diagnosing, documenting, care planning, preventing, and treating malnutrition need to be measured in all hospitalized adult patients. ASPEN supports CMS' efforts to eliminate disparities, track measurable outcomes and impact, safeguard public health, achieve cost savings, and reduce burden. Therefore, our recommendations for expanding the Global Malnutrition Composite Score to all adults 18 years of age and older would naturally fit alongside these cross-cutting criteria. We look forward to working with CMS to advance malnutrition quality of care for hospitalized patients across the U.S. ASPEN highly supports approval of this expansion.

Sincerely,



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