

defeat malnutrition today

December 22, 2023

Pre-Rule Making Measure Review Committee
Partnership for Quality Measurement
MMSsupport@battelle.org

RE: Feedback on Measures Under Consideration List for 2023-2024 Review Cycle

The Defeat Malnutrition Today coalition appreciates the opportunity to submit comments in response to the release of the FY 2023 MUC List and specifically **in support of the proposal to adopt** the Global Malnutrition Composite Score for all adults ages 18 or older (MUC2023-114).

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.

We commend CMS for considering for inclusion in its payment programs the Global Malnutrition Composite Score for all adults ages 18 or older (MUC2023-114), which is a publicly supported measure that benefits patients, families, and caregivers across all demographic groups—as well as the healthcare system at large. This is a great opportunity to be more inclusive and identify malnutrition and food insecurity earlier. It also serves as a reminder of the crucial role that nutrition plays in improving patient outcomes. As few CMS measures address health equity and food insecurity, expanding GMCS is an opportunity to do both.

Malnutrition Remains a Measurement Gap in Hospital Programs

Malnutrition is often underdiagnosed and untreated in healthcare settings, and disparities exist across different racial/ethnic groups and geographic locations. It has been shown to be an independent predictor of negative patient outcomes, including mortality, lengths of hospital stay, readmissions, and hospitalization costs. An estimated [20-50% of hospital inpatients are malnourished or at risk of malnutrition](#), yet 2018 data from the Healthcare Cost and Utilization Project (HCUP) report that [only 8.9% of discharges had a malnutrition diagnosis](#). The importance of malnutrition prevention, identification and intervention for at-risk and malnourished individuals is only magnified by malnutrition's impact on independence, well-being, and the severity of medical conditions and disabilities.

Identifying and addressing malnutrition in the hospital setting using evidence-based strategies gives patients the opportunity to receive care and support that may not otherwise be available to them in ambulatory or community settings. The existing Global Malnutrition Composite Score eCQM for 65+ was one of the first quality reporting programs to include performance measures focused on nutrition care or malnutrition. It has been extensively tested and shown

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that [adopting evidence-based malnutrition care best practices](#) is associated with reduced costs and improved patient outcomes.

Health Equity Implications of GCMS

An analysis of [2019 Malnutrition Quality Improvement Initiative \(MQii\) Learning Collaborative data of more than 1.5 million](#) patients found non-Hispanic Black individuals with malnutrition experienced a readmission rate of more than 26%, while the rate was less than 19% among non-Hispanic White individuals. Additionally, food insecurity caused by economic and social burdens can increase the risk of malnutrition. Therefore, addressing malnutrition and its root causes, as done through assessment and care planning in the health care setting, can support the reduction of health disparities. By addressing these health and social factors earlier in life, we can improve access to healthy aging.

Reporting on the GCMS is a specific and meaningful action that hospitals can take to align with three of the priorities outlined in CMS's Framework for Health Equity: expansion of collecting, using, and analyzing standardized data, assessing causes of disparities, and building capacity of healthcare organizations to reduce disparities.

Age Friendly Hospital Measure (MUC2023-196)

We also write in support of the Age Friendly Hospital Measure, as it highlights the importance of screening for social determinants of health (SDOH), including malnutrition. Patients who screen positive can easily be referred to the appropriate professionals and community services, improving older adults' access to needed care and follow-up services in a timely and efficient manner, ultimately improving health outcomes.

Research showing the importance of identifying, diagnosing, and treating malnutrition at all ages continues to grow and early identification of malnutrition can allow for healthy aging. Further, the relationship between malnutrition and food insecurity and its effects on health equity has been proven to be of importance and continues to be studied. We fully support CMS including this measure in the 2024 Hospital Inpatient Quality Reporting Program, given the overarching burden that malnutrition has on patients and the healthcare system. 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,



Bob Blancato
National Coordinator
Defeat Malnutrition Today