

To Whom It May Concern,

On behalf of the Geriatric Emergency Department Collaborative (GEDC), we, the undersigned, write to express our full support for the MUC2023-196 Age Friendly Hospital Measure. We urge the Centers for Medicare & Medicaid Services (CMS) to integrate this measure into the 2025 Hospital Inpatient Prospective Payment Systems (IPPS) rule as part of the Hospital Inpatient Quality Reporting (IQR) Program. The GEDC, which comprises over 100 emergency departments, hospitals, and health systems nationwide, serves a significant older adult population. Through our collective experience, we have already embraced many aspects of the MUC2023-196 Age Friendly Hospital Measure within our practices and can attest to their efficacy and effectiveness as clinical best practices.

Our firsthand experiences in implementing the Geriatric Emergency Department model underscore the value of the standards presented in the MUC2023-196 Age Friendly Hospital Measure. These standards ensure that both hospital leadership and frontline staff allocate the necessary time and resources to provide the level of care required to meet the unique needs of older adults. These practices have directly led to enhanced care quality for this demographic, reinforcing our support for the MUC2023-196 Age Friendly Hospital Measure components.

Including the MUC2023-196 Age Friendly Hospital Measure in the Hospital IQR Program is aligned with GEDC's mission of improving care for our nation's older adults. We commend the measure for promoting best practices while granting hospitals the flexibility to demonstrate compliance in a manner that aligns with their operational models. Moreover, the Hospital IQR Program not only echoes GEDC's mission to elevate care for older adults but also underscores the necessity for hospital systems to evolve their care approach towards our aging population with multifaceted medical, psychological, and social needs. This measure champions the defining of both patient and caregiver goals, a crucial step toward mitigating adverse events and ensuring patient-centered care.

Therefore, we ardently support the integration of the MUC2023-196 Age Friendly Hospital Measure into the IQR Program. Based on the positive impacts we have observed from measures aligned with the MUC2023-196, we strongly believe that its adoption will significantly improve clinical outcomes, elevate patient safety, and enhance patient experiences nationwide.

Sincerely,



Kevin Biese, MD, MAT

Co-Principal Investigator, Geriatric Emergency Department Collaborative (GEDC), Implementation and Education Director of Geriatrics Emergency Medicine at UNC Chapel Hill, Board of Governors, ACEP Geriatric Emergency Department Accreditation Program



Ula Hwang, MD, MPH, FACEP

Co-Principal Investigator, Geriatric Emergency Department Collaborative (GEDC), Research and Evaluation Principal Investigator, Geriatric Emergency Care Applied Research Network
Medical Director, Geriatric Emergency Medicine New York University, New York University Langone Healthcare
Professor, Emergency Medicine and Population Health, New York University Grossman School of Medicine