

January 30, 2025

Mr. Jeff Wu Acting Administrator Centers for Medicare & Medicaid Services Department of Health and Human Services

Baltimore, MD 2124

Dear Acting Administrator Wu,

On behalf of the Healthcare Information and Management Systems Society (HIMSS), we are pleased to provide public comments on CMS 4208-P <u>Medicare and Medicaid Programs</u>; Contract Year 2026 Policy and Technical Changes to the <u>Medicare Advantage Program</u>, Medicare Prescription Drug Benefit Program, Medicare Cost Plan Program, and Programs of All-Inclusive Care for the Elderly.

HIMSS is a global advisor and thought leader and member-based society committed to reforming the global health ecosystem through the power of information and technology. As a mission-driven non-profit, HIMSS offers a unique depth and breadth of expertise in health innovation, public policy, workforce development, research, and analytics to advise global leaders, stakeholders, and influencers on best practices in health information and technology driven by health equity. Through our innovation engine, HIMSS delivers key insights, education and engaging events to healthcare providers, governments, and market suppliers, ensuring they have the right information at the point of decision. HIMSS serves the global health information and technology communities with focused operations across North America, Europe, the United Kingdom, the Middle East, and Asia Pacific. Our members include more than 127,000 individuals, 480 provider organizations, 470 non-profit partners, and 650 health services organizations. Our global headquarters is in Rotterdam, The Netherlands and our Americas headquarters is in Chicago, Illinois.

HIMSS supports CMS proposed change to the Part B program to clarify that access to benefits is not restricted for: people with limited English proficiency; people of ethnic, cultural, racial, or religious minorities; people with disabilities; people who identify as lesbian, gay, bisexual, or other diverse sexual orientations; people who identify as transgender and other diverse gender identities; people living in rural communities; or people otherwise adversely affected by persistent poverty or inequality irrespective of delivery method or origin, whether from human or automated systems.

To accelerate digital health transformation, we must foster seamless, secure, ubiquitous, and systemwide data access and interoperable health information exchange. Interoperable data exchange ensures the right people have the right access to the right health information in a usable format at the right time to deliver optimal care. Artificial intelligence (AI) drives numerous applications that can improve patient care, improve early detection of disease and enhance point of care and administrative efficiency. AI/ML tools are critical resources to driving innovation and digital transformation. Policies should promote and accelerate the responsible governance

and deployment of AI demonstrated to benefit stakeholders in the health and human services sector and ensure that AI is continually monitored and revalidated following deployment in the field. At the same time, AI should, at a minimum, not amplify harmful biases, and at best help to address any biases already inherent in healthcare data. As the Medicare Advantage program provides critical health coverage for senior citizens, any technology, including AI-based tools, should be used in a manner that preserves equitable access to Medicare Advantage services.

As CMS considers how to oversee the use of AI, we appreciate the agency's recognition that existing authorities already apply. In addition, we appreciate CMS applying the same expectation regardless of whether AI/ML tools are used. Therefore, we support CMS' approach in this rule to clarify that access to benefits should not be restricted for individuals, and that this same expectation applies both when AI/ML is and is not used.

We look forward to discussing these issues in more depth. Please feel free to contact Jonathan French, Senior Director of Public Policy and Content Development, at <u>Jonathan.French@HIMSS.org</u> with questions or to request more information.

Sincerely,

Thomas M. Leary, MA, CAE, FHIMSS

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Senior Vice President and Head of Government Relations