

# “Make Your Voice Heard”

## Results of the 2022 CMS Request for Information

### Background

The Centers for Medicare & Medicaid Services (CMS) is committed to engaging with partners, communities, and individuals across the health system to better understand their experiences with CMS policies and programs, particularly how existing and proposed CMS policies and programs impact the experience of healthcare.

The CMS Office of Burden Reduction & Health Informatics (OBRHI) was established to serve as a focal point and champion for burden reduction, national standards and interoperability, and to engage our customers to inform solutions. Our work is focused on advancing efficient, equitable, and quality healthcare across all our programs, including Medicare, Medicaid, the Children’s Health Insurance Program (CHIP), the Marketplace, and CMS Innovation Center models.

CMS posted a Request for Information (RFI), titled *Make Your Voice Heard*, that sought public input on barriers to accessing healthcare and related challenges.

**During the 60-day comment period for the *Make Your Voice Heard* RFI, CMS received over 4,000 comments from individual stakeholders and organizations. Commenters were requested to submit burdens and recommendations on four topic areas.**

### Accessing Healthcare and Related Challenges



#### Sample Burdens and Recommendations Shared:

- Barriers to accessing consistent high-quality, culturally sensitive, linguistically appropriate, affordable, and conveniently delivered healthcare and services (e.g., dental care, drug rehab facilities, and nutrition services).
- Opportunities for improved availability of all provider types, services, and delivery modalities (e.g., telehealth, mobile, home care, and rural services).

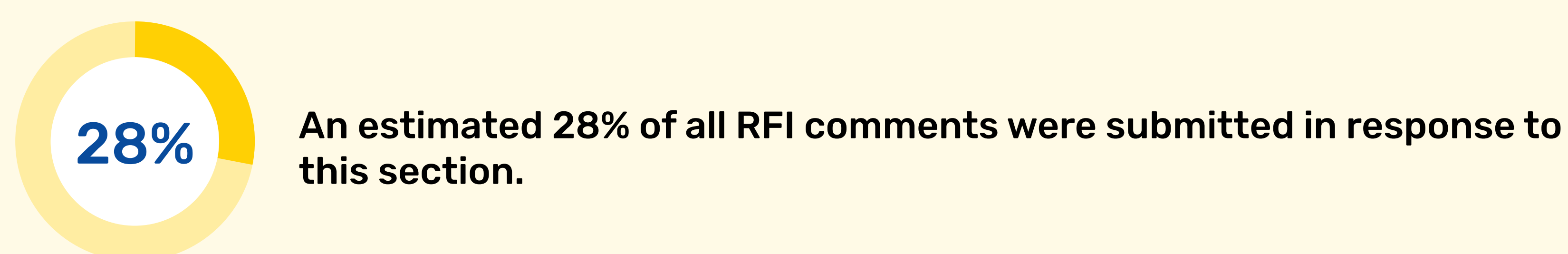
### Understanding Provider Experiences



#### Sample Burdens and Recommendations Shared:

- Burdens and recommendations relating to provider and staffing shortages, reimbursement rates, workforce fatigue, provider wellbeing, reducing non-essential administrative requirements, training, and systems of record keeping.
- Specific burdens that were identified as factors contributing to the workforce shortage (e.g., scope of practice limitations, licensure and credentialing barriers, maldistribution of providers in terms of specialty and geography, and provider burnout) and recommendations for improvement.

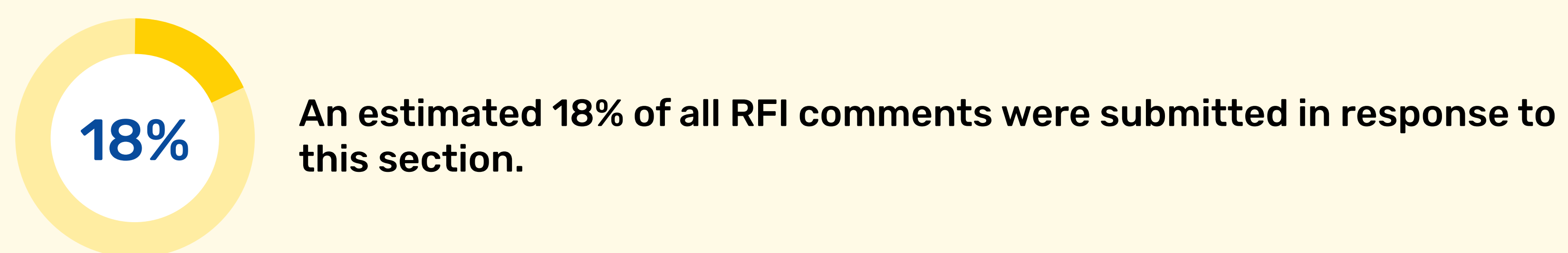
### Advancing Health Equity



#### Sample Burdens and Recommendations Shared:

- Health disparities, bias in health system design, and the need for health equity approaches in care delivery and wraparound services.
- The importance of ensuring better healthcare outcomes and healthy communities.
- The expansion of nondiscrimination policy protections, standardized disaggregated data collection, workforce expansion and diversity trainings, inclusion of social determinants of health practices, and addressing bias in health technology development.
- Growing need for improved health equity frameworks to be included in health system design.
- Recommendations included increased consideration of the diverse populations and backgrounds of our stakeholders, as well as increased collaboration with local communities to better understand specific needs of populations experiencing challenges.

### Impact of the COVID-19 Public Health Emergency (PHE) Waivers and Flexibilities



#### Sample Burdens and Recommendations Shared:

- Barriers, burdens, and challenges to attaining high-quality healthcare, exacerbated due to the COVID-19 pandemic.
- Recommendations for improvements (e.g. paid family caregiver, audio-only approvals, hospital at home program, and telehealth expansions).

**CMS appreciates stakeholder input and the insight it provides.  
We look forward to future opportunities to hear directly from the people we serve.**