March 29, 2023

Miranda Lynch-Smith  
Deputy Assistance Secretary, Office of Human Services Policy  
Assistant Secretary for Planning and Evaluation, Room 415F  
U.S. Department of Health and Human Services  
200 Independence Avenue, SW  
Washington, DC 20201  
Submitted electronically via: PTAC@HHS.gov

RE: Improving Care Delivery and Integrating Specialty Care in Population-Based Models Request for Input (RFI)

Dear Ms. Lynch-Smith,

The Oncology Nursing Society (ONS) appreciates the opportunity to provide feedback to the Physician-Focused Payment Model Technical Advisory Committee (PTAC) on its aforementioned RFI.

General Comments
We are concerned that PTAC’s model evaluation process – including its Quality and Cost and Integration and Care Coordination criteria – does not meaningfully factor in the role of nurses, including advanced practice registered nurses (APRNs). As PTAC is requesting information on specialty integration in population-based models – models that are likely to include patients with cancer or a history of cancer – the role of oncology nurses must be substantively considered.

Specialty Designation for Advance Practice Registered Nurses (APRNs)
ONS remains concerned that all APRNs are “lumped” into a single “specialty,” which hinders appropriate attribution of quality and resource use to specialized nurse practitioners, including oncology nurses, delivering care to Medicare beneficiaries. As a result, it is difficult to achieve the desired characteristics of population-based models as outlined in the RFI, namely the following:

- **Primary and specialty care provider roles and responsibilities are clearly delineated throughout the care journey for a given condition or episode of care.**
- **Specialist care includes a continuum of responsibilities for a patient or condition, including, but not limited to, single consultation, co-management, and primary management.**
- **Primary and specialty care providers coordinate to provide patient-centered care using bidirectional, synchronous, and asynchronous communication.**
- **Specialists provide consultations and/or ongoing care via multiple modes in a timely manner.**

Without specialty designations for APRNs, distinguishing the pivotal role oncology nurses play in delivering comprehensive care to Medicare beneficiaries receiving care in population-based models challenging. Beyond population-based models, the lack of specialty designation for APRNs limits the availability of
objective Medicare claims and other administrative data, thus preventing ONS and other public and private stakeholders from conducting important analysis on the impact of oncology nurses on cancer care. This does the Medicare program, its beneficiaries, and the oncology nursing profession, a great disservice. Robust analysis and evaluations, including comparisons to other provider types, is essential for oncology nurses to continue raising the bar and improving cancer care and outcomes, especially in the context of value-based models.

*We urge PTAC to include a recommendation that CMS develop specialty designation codes that APRNs can self-select upon enrollment in the Medicare program as part of its report to the Secretary.*

*****

We appreciate the opportunity to comment on this proposed rule. ONS looks forward to continuing dialogue on these important issues. If you have any questions about our comments, please contact Alec Stone, MA, MPA, ONS Director of Health Policy, at astone@ons.org.

Sincerely,

The Oncology Nursing Society

*About ONS*

The Oncology Nursing Society (ONS) is a professional organization of over 39,000 registered nurses and other healthcare providers dedicated to excellence in patient care, education, research, and administration in oncology nursing. ONS members are a diverse group of professionals who represent a variety of professional roles, practice settings, and subspecialty practice areas. Oncology nurses are leaders in the healthcare arena, committed to continuous learning and leading the transformation of cancer care by advocating for high-quality care for people with cancer.