



August 9, 2016

Centers for Medicare and Medicaid Services  
Department of Health and Human Services  
Attention: CMS-3295-P  
P.O. Box 8010  
Baltimore, MD 21244

**Re: CMS-3295-P: Medicare and Medicaid Programs; Hospital and Critical Access Hospital (CAH) Changes To Promote Innovation, Flexibility, and Improvement in Patient Care**

To Whom It May Concern:

Trust for America's Health (TFAH) appreciates the opportunity to comment on the Centers for Medicare and Medicaid Services' (CMS) proposed rule concerning requirements for hospitals and critical access hospitals to participate in Medicare and Medicaid. As a non-profit, non-partisan organization dedicated to saving lives and working to make disease prevention a national priority, TFAH is particularly interested in the infection control and antibiotic stewardship requirements outlined in the proposed rule.

Infection control and antibiotic stewardship are two critically important components of public health promotion and disease prevention. Antibiotic over-usage and misuse have led to the emergence of antibiotic resistant bacteria and reemergence of other infectious diseases. We commented last year in support of CMS's acknowledgement of this health threat in long-term care settings, and we are pleased to see the continued emphasis in the Medicare and Medicaid conditions of participation.

Our views are outlined in detail below:

**482.42(a)(1) Infection Control Officer(s)**

**TFAH supports the designation of an infection prevention and control officer at each facility.**

We strongly support the proposed rule's requirement for each hospital to designate an infection prevention and control professional. We also support requiring each facility to consult with physician and nurse leadership, which will help ensure that the prevention efforts will be optimally integrated with clinical care.

## **482.42(a)(2) Preventing and Controlling the Transmission of Infections With the Hospital and Between the Hospital and Other Institutions and Settings**

**TFAH supports a broader focus on transmission prevention to include the greater healthcare system.**

Prevention of the transmission of infectious disease between patients and personnel is paramount as these are some of the primary interactions that occur in healthcare settings. However, CMS notes that there are many other avenues for the transmission of infectious disease including patient to visitor and/or personnel to visitor transmission. Further, because individuals often rely on a number of parts of healthcare institutions with each episode of disease, transmission between healthcare settings is also a concern. True preventive strategies must consider all of these potential means for transmission in order to be effective at preventing transmission of infectious disease. Accordingly, TFAH supports the inclusion of language that requires hospitals to develop and maintain policies that prioritize the prevention of both intra-hospital and inter-healthcare system transmission.

### **§ 482.42(b) Standard: Antibiotic Stewardship Program Organization and Policies**

**TFAH supports the establishment of antibiotic stewardship programs within hospitals and critical access hospitals.**

We are supportive of the proposed rule's requirements that hospitals and critical access hospitals have an "active and hospital-wide antibiotic stewardship program." The misuse or misapplication of antibiotics diminishes their effectiveness by engendering resistance, limiting the usefulness of this vital category of medication. Preventing this outcome requires careful strategizing and monitoring of prescribing practices, and hospitals should be at the forefront of this effort.

### **§ 482.42(b)(1) Leader of the Antibiotic Stewardship Program**

**TFAH strongly supports the requirement of a leader for the hospital's antibiotic stewardship program, distinct from the Infection Control Officer.**

As CMS notes, antibiotic stewardship directors require direct expertise in antibiotic prescribing and stewardship, while infection control officers are often led by non-prescribing nursing staff. In addition to this difference in required expertise, TFAH believes that having a distinct antibiotic stewardship officer is important to ensure that sufficient attention is paid to each effort.

## **Conclusion**

Thank you for your consideration of these comments. We look forward to the release of the final rule and ongoing improvement of hospitals' contribution to the fight against antibiotic resistance. If you have any questions, please feel free to contact Dara Lieberman, TFAH's Senior Government Relations Manager, at (202) 223- 9870 x 20 or [dlieberman@tfah.org](mailto:dlieberman@tfah.org).

Sincerely,

A handwritten signature in black ink, appearing to read "Richard Hamburg". The signature is fluid and cursive, with a prominent initial "R" and a long, sweeping tail.

Richard Hamburg  
Interim President & Chief Executive Officer