



The
John A. Hartford
Foundation

55 East 59th Street
New York, NY 10022-1713

Tel: 212 832 7788
Fax: 212 593 4913

www.johnahartford.org
mail@johnahartford.org

June 10, 2025

Mehmet C. Oz, MD
Administrator
Centers for Medicare & Medicaid Services (CMS)
Department of Health and Human Services
7500 Security Boulevard
Baltimore, Maryland 21244

Re: Support for the CMS FY 2026 IPPS Proposed Rule – Age Friendly Hospital Measure

Dear Administrator Oz:

Thank you for the opportunity to comment on the Fiscal Year (FY) 2026 Inpatient Prospective Payment System (IPPS) Proposed Rule. The John A. Hartford Foundation writes to fully support the continuation of the Age Friendly Hospital Measure. During CMS' initial request for comments on the Age-Friendly Hospital Measure last year, 25 individuals and 33 prominent organizations endorsed the Measure.

The number of Americans over the age of 65 is growing at an unprecedented rate as the baby boomer generation ages. In less than 10 years, older adults are projected to outnumber children for the first time in US history; 1 in every 5 Americans will be of retirement age¹. Our health care system needs to prepare for these changing demographics. In 2023 hospital services rose by over 10 percent, with large jumps in Medicare utilization², which is only expected to grow with an aging population.

The Age Friendly Hospital Measure will build a better, safer hospital environment for older adults and will help patients and their family caregivers know where to find best care. Structural measures lead to standardizing care, which improves patient outcomes and leads to cost reduction. The Measure is also aligned with the CMS goal of a “universal

¹ <https://www.census.gov/newsroom/press-releases/2020/65-older-population-grows.html>

² <https://www.cms.gov/files/document/highlights.pdf>

foundation”³ of quality measures and further regulation burden reduction that, in the longer term, can be applied at the population-level and beyond only hospital care. Any proposed removal of this Measure is not in the best interest of older adults, caregivers, clinicians, or cost containment.

The concept behind the programmatic measure is based on several decades of history implementing programs that demonstrably improve patient care. The Age Friendly Hospital Measure incorporates The John A. Hartford Foundation and the Institute for Healthcare Improvement’s Age-Friendly Health Systems’ framework known as the 4Ms (What Matters, Medication, Mentation, Mobility). Geriatric Emergency Department Accreditation criteria were developed from guidelines endorsed by the American Geriatrics Society, the Emergency Nurses Association, the Society for Academic Emergency Medicine, and the American College of Emergency Physicians. The Geriatric Surgical Verification program was developed by American College of Surgeons. This programmatic approach is modeled after other surgery quality programs, which lead to demonstrable improvements in older patient outcomes across a broad range of populations.

The five domains of this Measure represent crucial aspects of health care provision for older adults, emphasizing patient-centered care and well-being of older adults. First, eliciting patient health care goals enables health care providers to align treatment plans with the 4Ms of age-friendly care, fostering shared decision-making and focusing on what matters to the patient. Medication management is vital for older adults, who often have comorbidities, emphasizing the need for monitoring and optimizing medication regimens to minimize harm and reduce unnecessary prescribing. Frailty screening and intervention are essential for early detection and management of common issues older adults face, including cognitive impairment, mobility limitations, and malnutrition, which can significantly impact health outcomes. Social vulnerability screening acknowledges the influence of social determinants of health, reflects the importance of caregivers, and ensures that older adults’ social needs are identified and addressed within their care plans. Lastly, age-friendly care leadership establishes accountability and oversight, promoting consistent quality of care through the appointment of champions or interprofessional committees dedicated to upholding these domains. Together, these domains emphasize the 4Ms of age-friendly care, contributing to comprehensive and person-centered care for older adults, addressing their unique health care needs, and improving overall health outcomes.

The Age Friendly Hospital Measure closely aligns with Make America Healthy Again by pushing for transparency and accountability. The Measure is publicly reported, helping to build a better, safer hospital environment that will help older patients and caregivers know

³ <https://www.nejm.org/doi/full/10.1056/NEJMp2215539>

where to get the best care. The Measure is also consistent with several other core elements of shared policy priorities, such as emphasizing the importance of managing chronic diseases, appropriate medication prescribing, and identifying and addressing social vulnerability. Also, the Age Friendly Hospital Measure aims to reduce waste and lower costs. The 4Ms age-friendly framework reduces unnecessary tests, treatments, and hospitalizations, leading to shorter stays, fewer readmissions, and less medication-related harm.

The Age Friendly Hospital Measure is a critical piece in the optimization of care for older patients using a holistic approach to create a quality program that better serves the needs of this unique population. We appreciate the opportunity to voice our strong support for the continuation of the Age Friendly Hospital Measure.

Sincerely,

A handwritten signature in blue ink that reads "Rani Snyder". The signature is written in a cursive, flowing style.

Rani Snyder
Acting President
The John A. Hartford Foundation