

Response to the AHCA comments on CMS-10243, OMB 0938-1037

The commenter is the American Health Care Association/National Center for Assisted Living (AHCA/NCAL). They represent over 13,000 nursing facilities or assisted living providers, largely from the for-profit provider communities. They offered three comments focusing on: 1) whether the FASI scored individual ability or performance, 2) how to score the individual if they have been recently ill or otherwise having unique experiences during the past 3 days, and 3) the importance of coordinating these proposed items with other efforts related to these same populations, such as the HCBS rules and managed care rules.

- 1) Ability may be different from performance.** A response code is available for an individual that does not want to perform a particular activity.
- 2) Look-back period may not reflect usual performance if acute illness has occurred.** Replied that the person is not assessed in those situations.
- 3) Coordination with other initiatives, including how items such as resident priorities could be utilized in other efforts.** Noted that CMS has been coordinating internally across efforts.

The following section provides more detail on each of these comments and responses.

1. Ability may be different from performance.

In designing the FASI set, a person's ability may vary depending on different factors, such as illness, preferences, or other factors that may result in differences between one's ability and one's performance at any point in time. The FASI function items are designed to ask about a person's *usual* performance. By relying on a measure of the individual's usual abilities, rather than a single attempt to do an activity, these items should measure a person's actual abilities unless they *choose* not to do an activity. For those cases, where someone is able to perform a task but chooses not to, such as the person who never cooks because their family member typically cooks for them, a response code of "not applicable" is provided. FASI does not make any assumptions about why a person makes such choices but recognizes that the activity was not attempted and should not be coded on the performance scale; instead, the item should be coded as "not applicable." This comment results in no changes to the instrument or burden estimates.

2. Look-back period may not reflect usual performance if acute illness has occurred.

The guidelines to assessors indicate that the assessment should not occur if the person has experienced illness, has been out of town (e.g. visiting relatives), has been hospitalized, or otherwise does not reflect their usual living situation. This comment results in no changes to the instrument or burden estimates.

3. Coordination with other initiatives, including how items such as resident priorities could be utilized in other efforts.

Several initiatives are underway that may all affect the same individual beneficiaries, including those put forth by the National Quality Forum's HCBS Committee, the Final HCBS Rules, and the rules associated with the Medicaid Managed Care efforts. CMS recognizes these related initiatives and has steps in place, such as internal affinity groups and other cross-unit initiatives, to foster communications and coordination, especially in areas like these where different program policies may inadvertently result in inconsistent requirements. This comment results in no changes to the instrument or burden estimates.