Summary of the comment from National Health Law Program:

The comment addresses the importance of demographic data collection as a first and critical step towards advancing health equity. Only by collecting demographic data can CMS, health care providers, health plans, and other stakeholders begin to understand the health needs of discrete communities, identify and track health disparities, and develop targeted strategies to address inequities in outcomes and access. Demographic data collection also enables improved civil rights enforcement and facilitates person-centered planning in health care delivery. Therefore, NHeLP recommends CMS adopt demographic data collection fields on Form CMS-40B. The comment provides specific principles to guide demographic data collection through Form CMS-40B and similar forms.

* Demographic Data on Medicare-Enrolled Individuals is Currently Inadequate to Inform Program Analysis and Decision-making
* CMS Must Add Demographic Fields to the Form CMS-40B to Advance Health Equity

Although CMS recently added fields for data on enrollees’ race and ethnicity on the Model Medicare Part C and D Enrollment Request Form (CMS-10718), this action does not go far enough to achieve quality, comprehensive, and granular demographic data on Medicare enrollees. For one, not every Medicare enrollee chooses to enroll in Part C or D. By adding demographic data collection to the Form CMS-40B, CMS could reach over 90% of Medicare enrollees, approximately 59 million people, as compared to the approximately 51% of enrollees that sign up for Medicare Part C and 78% of enrollees that sign up for Part D.

Response:

We appreciate the suggestion for CMS to adopt demographic data collection on enrollees’ race, ethnicity, written and spoken language, disability status, sexual orientation, gender identity, and sex characteristics in this version of the CMS-40B form in addition to other demographic data collection we already have in place. All of the data currently collected on the forms is necessary to enroll an individual in Medicare Part B, and any additional information will require coordination with SSA and system enhancements. Therefore, we will take these comments into consideration for future development with SSA, but we are unable to make the system enhancements to collect and transmit this data at this time. For this reason, we decline to adopt the commenters suggestion in this iteration of changes to the CMS-40B form, but we may consider options to collect more demographic data from enrollees in the future.