October 27, 2017

Attn: Strategic Plan Comments
Strategic Planning Team
Office of the Assistant Secretary for Planning and Evaluation
U.S. Department of Health and Human Services
Room 415F, 200 Independence Avenue, SW
Washington, DC 20201

Via electronic submission: HHSPlan@hhs.gov
Re: HHS DRAFT Strategic Plan FY 2018 – 2022

Dear Strategic Planning Team,

On behalf of the Coalition to Transform Advanced Care (C-TAC), we appreciate the opportunity to provide comments on the HHS DRAFT Strategic Plan for FY 2018-2022, particularly with respect to those areas that would affect those living with advanced illness.

C-TAC is a national non-partisan, not-for-profit organization dedicated to ensuring that all those living with advanced illness, especially the sickest and most vulnerable, receive comprehensive, high-quality, person- and family-centered care that is consistent with their goals and values and honors their dignity. C-TAC is made up of over 140 national and regional organizations including patient and consumer advocacy groups, providers, health plans, faith-based and community organizations, and others who share a common vision of improving advanced illness care in the U.S.

C-TAC’s definition of advanced illness is when one or more conditions becomes serious enough that general health and functioning begin to decline, treatment may no longer lead to preferred outcomes, and care oriented toward comfort may take precedence over attempts to cure – a process that extends to the end of life and that for some individuals and their families may lead to transition to hospice.

Overall, we are in agreement with the five strategic goals in the Strategic Plan draft and have the following specific comments:

**Strategic Goal 1, Objective 1.1, Strategy: Strengthening informed consumer decision-making and transparency about the cost of care**

We very much support this strategy as consumer decision-making is the foundation of person-centered care. We are particularly interested in the last bullet point under this strategy, which talks of testing new payment models and alternative approaches to end-of-life care. However, such models and approaches should be broadened to include those living with advanced illness, as they could benefit from additional care coordination and support. Such care could also reduce their health care utilization.¹ For perspective, C-TAC submitted just such a model to the Physician-

Focused Payment Model Technical Advisory Committee (PTAC), the Advanced Care Model,\(^2\) which would provide interdisciplinary team-based care in the home to those living with advanced illness.

The strategy’s bullet point also mentions advance care planning and we would underscore its importance, not only to those at the end of life, but throughout an illness. Respecting Choices\(^3\), a well-tested and validated method for teaching clinicians to provide systematic advance care planning, is now a part of C-TAC and is available as a further resource for this topic as needed.

**Strategic Goal 4, Foster Sound, Sustained Advances in the Sciences**

We support this goal and suggest that research be specifically allocated to identify and confirm the best ways to provide care to those living with advanced illness.

**Strategic Goal 5, Promote Effective and Efficient Management and Stewardship**

We recommend that HHS and CMS work to develop quality and regulatory structures to ensure the effective delivery of care to those living with advanced illness, including better and more patient-centered measures for this population and type of care.

Thank you for the opportunity to comment on the draft of this Strategic Plan. We believe with the suggestions above it could improve and incentivize better care for all those living with advanced illness.

If you have any questions, please contact Marian Grant, Senior Regulatory Advisor, C-TAC, at 443-742-8872 or mgrant@thectac.org.

Sincerely,

*Marian Grant*

Marian Grant, DNP, CRNP, ACHPN, FPCN  
Senior Regulatory Advisor  
Coalition to Transform Advanced Care (C-TAC)  
1299 Pennsylvania Ave, Suite 1175  
Washington, DC, 20008
