NATIONAL FORUM
FOR HEART DISEASE & STROKE PREVENTION
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December 23, 2025

Partnership for Quality Measurement
Pre-Rulemaking Measure Review Clinician Committee
Via Online Submission

Re: Low-Density Lipoprotein Cholesterol (LDL-C) Monitoring and Management
MUC2025-034

Ladies and Gentlemen:

The National Forum for Heart Disease & Stroke Prevention strongly supports the implementation of the proposed measure regarding Low-Density Lipoprotein Cholesterol (LDL-C) monitoring and management for patients with Atherosclerotic Cardiovascular Disease (ASCVD).

The National Forum is a nonpartisan, nonprofit organization that leads collaborative action to ensure optimal cardiovascular and metabolic health and well-being for all people throughout their lifespans. National Forum members include more than 100 clinical, patient, and public health organizations, agencies, companies, and institutions.

Alignment with Contemporary Guidelines

Heart disease remains the leading cause of death in the United States[i], and elevated LDL-C is a major contributor to ASCVD. From 1999-2002 to 2015-2018, cholesterol control in the United States increased significantly. However, this progress stalled in the mid-2010s[ii], following the retirement of key quality measures that once supported the detection and treatment of hypercholesterolemia.

Lowering LDL-C is one of the most effective ways to prevent repeat heart attacks and strokes[iii]. Numerous studies have found that reducing LDL-C lowers the risk of future cardiovascular events. Clinical guidelines recommend screening and the appropriate use of evidence-based therapies to manage hyperlipidemia. Yet millions of high-risk patients still are not receiving treatment that is complete or consistent with these standards.

Today, the primary quality measure, prescribing a statin, is too limited and does not fully reflect what high-quality patient care requires.

Introducing the proposed quality measure focused on LDL-C would help enhance patient care, support medication adherence, increase patient engagement, and ultimately improve cardiovascular health.

The proposed measure aligns with the 2023 AHA/ACC/ACCP/ASPC/NLA/PCNA Guideline for the Management of Patients with Chronic Coronary Disease[iv], which emphasizes that "lower [LDL-C] is better." By establishing a threshold of < 70 mg/dL or a ≥ 50% reduction in LDL-C, the proposed measure provides clinicians with actionable targets to reduce clinical ASCVD events.

Furthermore, new data have emerged that support the re-establishment of monitoring LDL-C levels after initiating or modifying treatment. Observational studies have found that routine LDL-C monitoring is associated with increased adherence to treatment.[v]

Improving Quality and Fairness in Care

Adopting this measure would be a critical step toward ensuring more consistent, high-quality care for all patients. Data indicate clear disparities in lipid control based on:

- Sex: Women are significantly less likely to reach LDL-C goals than men[vi].
- Race: Significant differences in treatment intensity and outcomes persist across racial and ethnic groups.
- Socioeconomic Status: Insurance status remains a predictor of successful lipid management[vii].

Standardized measurement ensures that quality improvement initiatives are applied fairly across these vulnerable populations.

Economic Impact and Long-Term Sustainability

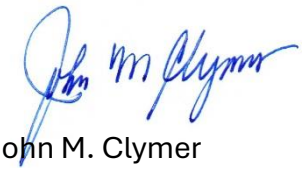
The financial burden of cardiovascular care in the US is projected to reach staggering levels. By 2050, annual costs associated with cardiovascular risk factors are forecasted to triple to $1.34 trillion, while annual healthcare costs for cardiovascular conditions are projected to quadruple to $1.49 trillion. Shifting the focus toward proactive LDL-C management is not only a clinical necessity but a fiscal imperative to mitigate these rising costs and productivity losses.

Conclusion

Reintroducing a focused LDL-C management measure will bridge the current gap in ASCVD care, drive down long-term healthcare expenditures, and save lives through primary and

secondary prevention. We urge CMS to adopt this measure to ensure that "lower is better" becomes the standard of care for all Medicare beneficiaries.

Respectfully yours,



John M. Clymer
Executive Director

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