

The Honorable Dr. Mehmet Oz
Administrator
Centers for Medicare & Medicaid Services
200 Independence Avenue, S.W.
Washington, D.C. 20201

Dear Administrator Oz,

The Association of Black Cardiologists (ABC) applauds the Centers for Medicare & Medicaid Services' (CMS) consideration of the American Heart Association's LDL-cholesterol (LDL-C) management quality measure for inclusion in its 2025–2026 Measures Under Consideration (MUC) list. ABC strongly supports CMS's review of this measure and encourages its adoption.

ABC is a national professional organization dedicated to eliminating cardiovascular disease disparities and advancing health equity through clinical excellence, education, research, and advocacy. Our members care for patients who bear a disproportionate burden of atherosclerotic cardiovascular disease (ASCVD), including higher rates of premature events, recurrent disease, and preventable mortality. As clinicians on the front lines of cardiovascular care, we see firsthand how gaps in risk factor control—particularly LDL-C—translate into avoidable adverse outcomes.

Black Americans experience an exceptionally high burden of cardiovascular disease. Nearly 60 percent of Black adults over the age of 20 live with some form of cardiovascular disease, compared with approximately 49 percent of the overall U.S. adult population—placing Black Americans among the most affected populations globally.¹ From 2000 to 2022, Black patients experienced an estimated 800,000 excess deaths and 24 million excess years of potential life lost attributable to atherosclerotic cardiovascular disease when compared with white patients.² These persistent and profound disparities underscore the urgent need for policies and care strategies that improve cardiovascular outcomes for Black patients nationwide.

¹ Kyalwazi AN, Locco EC, Brewer LC, et al. Disparities in Cardiovascular Mortality Between Black and White Adults in the United States, 1999 to 2019. *Circulation*. 2022;146(3):211-228. doi:10.1161/CIRCULATIONAHA.122.060199

We believe that for Black patients across America who have established ASCVD, creating a federal LDL-C threshold below 70 mg/dL will drastically improve their outcomes.³ An outcome-based LDL-C quality measure would provide a more accurate assessment of care delivery and better align CMS programs with ACC and AHA recommended practice.

From an equity perspective, outcome-based LDL-C measurement is especially important. As demonstrated with the American Heart Association's Get with the Guidelines national quality improvement program, institution of quality-based performance metrics can significantly reduce disparities in cardiovascular care⁴. Black patients affected by ASCVD often experience delays in treatment intensification, inconsistent follow-up testing, and fragmented care.⁵ A performance measure centered on LDL-C control would incentivize proactive management strategies that can help close these gaps, reduce preventable events, and improve long-term outcomes for high-risk communities.

ABC commends CMS for the inclusion of the LDL-C management measure on the 2025–2026 Measures Under Consideration list and respectfully urges the agency to advance this measure into future quality programs.

Sincerely,

Anthony Fletcher MD, FACC

Association of Black Cardiologists

³ Grundy SM, et al. 2018 AHA/ACC/Multisociety Guideline on the Management of Blood Cholesterol. *Circulation*. 2019;139: e1082–e1143.

⁴ Sandu A, Grau-Sepulveda M, Witting C, et al. Equity in Heart Failure Care: A Get With the Guidelines analysis of between- and within- hospital differences in care by sex, race, ethnicity and insurance. *Circ Heart Fail*. 2024;17:e011177. DOI: 10.1161/CIRCHEARTFAILURE.123.011177.

⁵ Grant, Jelani K. et al. *Under-reporting and under-representation of non-Hispanic Black subjects in lipid-lowering atherosclerotic cardiovascular disease outcomes trials: A systematic review*. *Journal of Clinical Lipidology*, Volume 16, Issue 5, 608 – 616.