

Submitter : Dr. Neal Davis

Date: 07/07/2007

Organization : Orthopaedic Anesthesia Specialists

Category : Physician

Issue Areas/Comments

GENERAL

GENERAL

Thank you for considering adjusting anesthesia reimbursement. This would be an appropriate method of addressing an area where service has been significantly undervalued in the past.

Submitter : Dr. Joseph Simpson
Organization : University of Tennessee Medical Center
Category : Physician

Date: 07/07/2007

Issue Areas/Comments

Resource-Based PE RVUs

Resource-Based PE RVUs

Leslie V. Norwalk, Esq.
Acting Administrator
Centers for Medicare and Medicaid Services
Attention: CMS-1385-P
P.O. Box 8018
Baltimore, MD 21244-8018

Re: CMS-1385-P
Anesthesia Coding (Part of 5-Year Review)

Dear Ms. Norwalk:

As an Associate Professor the Department of Anesthesiology at the University of Tennessee Medical Center at Knoxville, I am writing to express my fervent support of the RUC sponsored increase in anesthesia payments in the 2008 Physician Fee Schedule. I am grateful that the RUC and CMS have recognized the previous gross under valuation of anesthesia services, and that the Agency is taking steps to address this complicated issue.

When the RBRVS was instituted, a huge payment disparity for anesthesia care was created due to significant undervaluation of anesthesia work compared to other physician services. Today, more than a decade since the RBRVS took effect, Medicare payment for anesthesia services stands at just \$16.19 per unit. This conversion factor is actually lower than it was in 1990 and is less than 36% of the average commercial insurance conversion factor. In contrast, MedPAC reports that Medicare payments to other physician groups average 80% of commercial insurance payments. Furthermore, this amount does not cover the cost of caring for our nation's seniors, and is creating an unsustainable system in which anesthesiologists are being forced away from areas with disproportionately high Medicare populations. As a teaching institution, our residency and nurse anesthetist training programs are in jeopardy by because of the concomitant impacts of the under valuation of the conversion factor for anesthesia and the teaching penalty of 50% reduction in payments when anesthesia trainees are involved in the care of the Medicare patient.

In an effort to rectify this untenable situation, the RUC recommended that CMS increase the anesthesia conversion factor to offset a calculated 32 percent work under valuation. This move would result in an increase of nearly \$4.00 per anesthesia unit and serve as a major step forward in correcting the long-standing undervaluation of anesthesia services and help ameliorate the impact of the teaching penalty.

Full and immediate implementation of the increase in the anesthesia conversion factor as recommended by the RUC is an imperative which cannot be ignored to ensure that our patients have access to needed anesthesiology medical care.

Thank you for your consideration of this serious matter.

Joseph E. Simpson, M.D.
Associate Professor The Department of Anesthesiology
University of Tennessee Medical Center, Knoxville

Submitter : Dr. Katherine Gardner
Organization : University of Tennessee Medical Center
Category : Physician

Date: 07/07/2007

Issue Areas/Comments

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Thank you for your consideration of this serious matter.

Katherine R Gardner, M.D.
Associate Professor The Department of Anesthesiology
University of Tennessee Medical Center, Knoxville

Submitter : Dr. Chad Brink

Date: 07/07/2007

Organization : NAS, LLC

Category : Physician

Issue Areas/Comments

GENERAL

GENERAL

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Leslie V. Norwalk, Esq.

Acting Administrator

Centers for Medicare and Medicaid Services

Attention: CMS-1385-P

P.O. Box 8018

Baltimore, MD 21244-8018

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Thank you for your consideration of this serious matter

Submitter : Dr. Rachel McKinzie

Date: 07/07/2007

Organization : UAMS

Category : Physician

Issue Areas/Comments

GENERAL

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Acting Administrator
Centers for Medicare and Medicaid Services
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P.O. Box 8018
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Thank you for your consideration of this serious matter.

Rachel McKinzie, D.O.

Submitter : Dr. Stephen Olivar
Organization : Northwest Anesthesiologist
Category : Physician

Date: 07/07/2007

Issue Areas/Comments

GENERAL

GENERAL

The fees are appalling! At the present reimbursement rate my group finds it hard to continue staying viable and providing care to this population.

Submitter : Dr. Stephen Olivar
Organization : Northwest Anesthesiologist
Category : Physician

Date: 07/07/2007

Issue Areas/Comments

GENERAL

GENERAL

I find it hard to maintain a viable business at the current fee scale. Please help so I can continue in the care of this patient population.

Submitter : Dr. Cesar Rodriguez
Organization : Dr. Cesar Rodriguez
Category : Physician

Date: 07/07/2007

Issue Areas/Comments

GENERAL

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Leslie V. Norwalk, Esq.
Acting Administrator
Centers for Medicare and Medicaid Services
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P.O. Box 8018
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Thank you for your consideration of this serious matter.

Submitter : Dr. Greg Terrasas

Date: 07/07/2007

Organization : Dr. Greg Terrasas

Category : Physician

Issue Areas/Comments

GENERAL

GENERAL

The RUC submitted to CMS a recommendation to boost anesthesia conversion factor in the amount of \$4.00 per anesthesia unit as a result of a 32% work undervaluation (32%!!). It has long been known in the medical field, particularly in anesthesia that medicare has grossly undervalued anesthesia even more than other specialties. This is supported and accentuated by the fact that anesthesia payments were scheduled for the highest percentage of reimbursement cuts in 07 amongst all the specialties. Already the low reimbursement has left rural hospitals without adequate anesthesia services because the volume of medicare cases is not supporting such services, leaving sometimes inadequate alternatives and compromising patient care. The increase will help to correct this. I strongly suggest and support the CMS acceptance of the recommended increase in conversion factor submitted by the RUC. Thank you for your time Greg Terrasas M.D.

Submitter : Dr. Jeremy Hackworth
Organization : NMCS D
Category : Physician

Date: 07/07/2007

Issue Areas/Comments

Payment For Procedures And Services Provided In ASCs

Payment For Procedures And Services Provided In ASCs

Leslie V. Norwalk, Esq.
Acting Administrator
Centers for Medicare and Medicaid Services
Attention: CMS-1385-P
P.O. Box 8018
Baltimore, MD 21244-8018

Re: CMS-1385-P
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To ensure that our patients have access to expert anesthesiology medical care, it is imperative that CMS follow through with the proposal in the Federal Register by fully and immediately implementing the anesthesia conversion factor increase as recommended by the RUC.

Thank you for your consideration of this serious matter.

Submitter : Dr. Charles Spivak
Organization : American Society of Anestheologist
Category : Physician

Date: 07/07/2007

Issue Areas/Comments

Impact

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Leslie V. Norwalk, Esq.
Acting Administrator
Centers for Medicare and Medicaid Services
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On a personal note, when I do a Medicare patient I lose \$27 each hour just paying my CRNA cost. If my hospital did not pay a stipend to my group we would NOT be able to provide this service to our nation's seniors. Please act and raise our rates. We do deserve to make a living providing care to our patients.

Thank you for your consideration of this serious matter.

Dr. Charles Spivak
Birmingham, Alabama

Submitter : Dr. Zed Reagan
Organization : Dr. Zed Reagan
Category : Physician

Date: 07/07/2007

Issue Areas/Comments

GENERAL

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Leslie V. Norwalk, Esq.
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Submitter :

Date: 07/07/2007

Organization :

Category : Physician

Issue Areas/Comments

Resource-Based PE RVUs

Resource-Based PE RVUs

Leslie V. Norwalk, Esq.
Acting Administrator
Centers for Medicare and Medicaid Services
Attention: CMS-1385-P
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Thank you for your consideration of this serious matter.

Sincerely,

Christopher J. Farrell, MD

Submitter : Dr. Ron Rothstein

Date: 07/07/2007

Organization : AMG

Category : Physician

Issue Areas/Comments

Payment For Procedures And Services Provided In ASCs

Payment For Procedures And Services Provided In ASCs

Leslie V. Norwalk, Esq.
Acting Administrator
Centers for Medicare and Medicaid Services
Attention: CMS-1385-P
P.O. Box 8018
Baltimore, MD 21244-8018

Ronald J. Rothstein
Dept of Anesthesia- AMG
3330 Lomita Bl.
Torrance, CA 90505
310-325-9110

Re: CMS-1385-P
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To ensure that our patients have access to expert anesthesiology medical care, it is imperative that CMS follow through with the proposal in the Federal Register by fully and immediately implementing the anesthesia conversion factor increase as recommended by the RUC.

Anesthesia was rated as one of the top ten scientific improvements in the past century. For something this significant to all persons & patient going through surgery, \$16.19 is not sufficient- this needs to be recognized by the RUC.

Thank you for your consideration of this serious matter.

Ronald J. Rothstein MD

Submitter : Dr. Stacy Hamid
Organization : Johns Hopkins Hospital
Category : Physician

Date: 07/08/2007

Issue Areas/Comments

Payment For Procedures And Services Provided In ASCs

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Submitter : Dr. Alison Alpert
Organization : Dr. Alison Alpert
Category : Physician

Date: 07/08/2007

Issue Areas/Comments

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Thank you for your consideration of this serious matter.

Alison Alpert MD

Submitter : Dr. Mitchell Jablons
Organization : Dr. Mitchell Jablons
Category : Physician

Date: 07/08/2007

Issue Areas/Comments

Resource-Based PE RVUs

Resource-Based PE RVUs

35 Timberline Way
Watchung, NJ 07069

Leslie V. Norwalk, Esq.
Acting Administrator
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Thank you for your consideration of this serious matter.

Yours truly,

Mitchell Jablons, M.D.

Submitter : Dr. Rojack Tan

Date: 07/08/2007

Organization : First Colonies Anesthesia Associates

Category : Physician

Issue Areas/Comments

GENERAL

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Thank you for your consideration of this serious matter.

Submitter : Mr. George Platsakis

Date: 07/08/2007

Organization : n/a

Category : Physical Therapist

Issue Areas/Comments

Therapy Standards and Requirements

Therapy Standards and Requirements

As a practicing Physical Therapist of 14 years,i believe that a grandfathering clause should be included.I think that meeting requirements at the time a licence was obtained is sufficient as those were the rules in place at the time.A clean licence,years of experience,continuing education hours are more than sufficient to meet the requirements of patients in the Medicare programme.I have worked in facilities with many foreign trained Physical Therapists,who,provide compassionate,effective care,cost effective care.I fear the disruption in services to some of the most vulnerable members of our society[i work in acute intensive care unit,acute medical surgical floor]would be immense,and,what a loss of good talent if these good people who treat these patients day in and day out are not allowed to work.The health care system would almost certainly gradually collapse.I believe most of my fellow Physical Therapists do the job they do,due to the empathy and good will in their hearts,not for the glamour,prestige,monetary rewards of the profession.I fear a change in policy would reduce Medicare to what it was not meant to be,a private insurance company,as opposed to what it is now,a entity that fulfills as best it can,the needs of the frail,huddled,weak masses.Thank you for allowing me the space for my comments.

Submitter : Dr. Charles Chase
Organization : Anesthesiologists of Greater Orlando
Category : Physician

Date: 07/08/2007

Issue Areas/Comments

GENERAL

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Acting Administrator
Centers for Medicare and Medicaid Services
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To ensure that our patients have access to expert anesthesiology medical care, it is imperative that CMS follow through with the proposal in the Federal Register by fully and immediately implementing the anesthesia conversion factor increase as recommended by the RUC.

Thank you for your consideration of this serious matter.
Charles J. Chase, D.O.
Chairman, Economics Committee
Florida Society of Anesthesiologists

Submitter : Dr. Kevin Murphy
Organization : Schenectady Anesthesia Assoc.
Category : Physician

Date: 07/08/2007

Issue Areas/Comments

GENERAL

GENERAL

Leslie V. Norwalk, Esq.
Acting Administrator
Centers for Medicare and Medicaid Services
Attention: CMS-1385-P
P.O. Box 8018
Baltimore, MD 21244-8018

Re: CMS-1385-P
Anesthesia Coding (Part of 5-Year Review)

Dear Ms. Norwalk:

I am writing to express my strongest support for the proposal to increase anesthesia payments under the 2008 Physician Fee Schedule. I am grateful that CMS has recognized the gross undervaluation of anesthesia services, and that the Agency is taking steps to address this complicated issue.

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Kevin Murphy MD

Submitter : Dr. Tork Harman
Organization : American Society Anesthesiologists
Category : Physician

Date: 07/08/2007

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Submitter : Dr. Audrius Zibaitis
Organization : Tufts- New England Medical Center, Boston, MA
Category : Physician

Date: 07/08/2007

Issue Areas/Comments

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Sincerely,
Audrius Zibaitis, MD
Attending Pediatric Anesthesiologist
Dept. of Anesthesia, Box 298
Tufts- New England Medical Center
Boston, Massachusetts 02111

Submitter : Dr. Forest Evans
Organization : American Society of Anesthesiologists
Category : Physician

Date: 07/08/2007

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Sincerely,

Forest L. Evans, Jr. MD

Submitter : Dr. Peggy A Seidman
Organization : SUNY/Stony Brook School of Medicine
Category : Physician

Date: 07/09/2007

Issue Areas/Comments

**Coding-- Additional Codes From
5-Year Review**

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