

Submitter : Dr. Christopher Doran

Date: 07/17/2007

Organization : Washington University

Category : Physician

Issue Areas/Comments

GENERAL

GENERAL

I believe that anesthesia services have been underpaid by medicare for sometime now and applaud the move to increase reimbursement to a resonable level.

Submitter : Andrew Schroeder
Organization : Medical College of Wisconsin
Category : Other Health Care Professional

Date: 07/17/2007

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.

When the RBRVS was instituted, it created a huge payment disparity for anesthesia care, mostly 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 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.

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 undervaluation a move that 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. I am pleased that the Agency accepted this recommendation in its proposed rule, and I support full implementation of the RUC's recommendation.

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.

Sincerely,
Andrew R. Schroeder, JMS
Medical College of Wisconsin

Submitter : Dr. Robert Winans
Organization : Dr. Robert Winans
Category : Physician

Date: 07/17/2007

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
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Thank you for your consideration of this serious matter.

Submitter : Dr. Paul Stricker
Organization : American Society of Anesthesiologists
Category : Health Care Professional or Association

Date: 07/17/2007

Issue Areas/Comments

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
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Submitter : Dr. Ramakrishna R. Madala
Organization : Dr. Ramakrishna R. Madala
Category : Physician

Date: 07/17/2007

Issue Areas/Comments

GENERAL

GENERAL

see attachment

CMS-1385-P-2913-Attach-1.DOC

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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Anesthesia Coding (Part of 5-Year Review)**

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Submitter : Dr. james nowakowski
Organization : american association of anesthesiologist
Category : Physician

Date: 07/17/2007

Issue Areas/Comments

GENERAL

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

Submitter : Dr. Paul Savaryn
Organization : Ridgview Anesthesia Associates
Category : Physician

Date: 07/17/2007

Issue Areas/Comments

GENERAL

GENERAL

July 17, 2007

Dear Leslie V. Norwalk, Esq

Regarding CMS-1385-P provision for rectifying the gross undervaluation of anesthesiologists services to medicare patients, we say thank you and, it's about time. As it now stands I pay more per hour to have my car service than I receive when caring for the elderly and their complicating ills during surgery. I will always do my best in the OR for my friends or strangers regardless of government reimbursement rates, but it is fair and proper that CMS begins to recognize our value to it's customers.

Thank you for the opportunity to comment,

Paul J Savaryn MD

Submitter : Dr. PETER RODRIGUEZ
Organization : ANESTHESIA CARE TEAM, INC.
Category : Physician

Date: 07/17/2007

Issue Areas/Comments

CAP Issues

CAP Issues

Peter Rodriguez, M.D.
Anesthesia Care Team, Inc.
3309 SW 34th Circle, Ste 101
Ocala, FL 34474

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

Dear Sir:

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Thank you for your consideration of this serious matter.

Sincerely,

Peter Rodriguez, M.D.
352-237-2400

Submitter : Dr. JOHN A. HEINBOCKEL
Organization : ANESTHESIA CARE TEAM, INC.
Category : Physician

Date: 07/17/2007

Issue Areas/Comments

CAP Issues

CAP Issues

John A. Heinbockel, M.D.
Anesthesia Care Team, Inc.
3309 SW 34th Circle, Ste 101
Ocala, FL 34474

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Anesthesia Coding (Part of 5-Year Review)

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Sincerely,

John A. Heinbockel, M.D.
352-237-2400

Submitter : Dr. CHRISTIAN LARSEN
Organization : ANESTHESIA CARE TEAM, INC.
Category : Physician

Date: 07/17/2007

Issue Areas/Comments

CAP Issues

CAP Issues

Christian Larsen, D.O.
Anesthesia Care Team, Inc.
3309 SW 34th Circle, Ste 101
Ocala, FL 34474

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

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Sincerely,

Christian Larsen, D.O.
352-237-2400

Submitter : Dr. MANUEL TAN
Organization : ANESTHESIA CARE TEAM, INC.
Category : Physician

Date: 07/17/2007

Issue Areas/Comments

CAP Issues

CAP Issues

Manuel Tan, M.D.
Anesthesia Care Team, Inc.
3309 SW 34th Circle, Ste 101
Ocala, FL 34474

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Sincerely,

Manuel Tan, M.D.
352-237-2400

Submitter : Dr. REDDY DEVARAPALLI
Organization : ANESTHESIA CARE TEAM, INC.
Category : Physician

Date: 07/17/2007

Issue Areas/Comments

CAP Issues

CAP Issues

Reddy Devarapalli, M.D.
3309 SW 34th Circle, Ste 101
Ocala, FL 34474

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Anesthesia Coding (Part of 5-Year Review)

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Thank you for your consideration of this serious matter.

Sincerely,

Reddy Devarapalli, M.D.
352-237-2400

Submitter :

Date: 07/17/2007

Organization : American Society of Anesthesiology

Category : Physician

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

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Thank you for your consideration of this serious matter.

South Georgia Anesthesiologist
Member ASA

Submitter : Dr. jeffrey wagner
Organization : milford anesthesia associates pc
Category : Physician

Date: 07/17/2007

Issue Areas/Comments

GENERAL

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jeffrey alan wagner md mba

Submitter : Dr. Edmond Freis
Organization : ASA
Category : Physician

Date: 07/17/2007

Issue Areas/Comments

GENERAL

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see attachment

CMS-1385-P-2923-Attach-1.DOC

Leslie V. Norwalk, Esq.
Acting Administrator
Centers for Medicare and Medicaid Services
Attention: CMS-1385-P
P.O. Box 8018
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Submitter : Dr. Ninette Hart
Organization : Hilo Medical Center Department of Anesthesiology
Category : Physician

Date: 07/17/2007

Issue Areas/Comments

GENERAL

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Acting Administrator
Centers for Medicare and Medicaid Services
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Sincerely,

Ninette Hart, MD
110 Alae Street
Hilo, HI 96720

Submitter : Dr. Sue J. Knight
Organization : San Ramon Valley Primary Care Medical Group
Category : Physician

Date: 07/17/2007

Issue Areas/Comments

GENERAL

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Acting Administrator
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Submitter : Dr. Robert Dado
Organization : Midwest Anesthesiologists, P.A.
Category : Physician

Date: 07/17/2007

Issue Areas/Comments

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Acting Administrator
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Sincerely,

Robert J. Dado, M.D., Ph.D.
Anesthesiologist
Stillwater, MN 55082

Submitter : Dr. Ma. Victoria Bendebel

Date: 07/17/2007

Organization : Dr. Ma. Victoria Bendebel

Category : Physician

Issue Areas/Comments

GENERAL

GENERAL

it is about time that we anesthesiologists, be appropriately paid for servces or procedures we do to all our patients. i am getting tired to see those reductions they do in our professional fees but fees to practice keeps going up--this is enough--we have to paid properly.

Submitter : Dr. James McGrath

Date: 07/17/2007

Organization : Dr. James McGrath

Category : Physician

Issue Areas/Comments

GENERAL

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Acting Administrator
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When the RBRVS was instituted, it created a huge payment disparity for anesthesia care, mostly 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 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.

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 undervaluation a move that 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. I am pleased that the Agency accepted this recommendation in its proposed rule, and I support full implementation of the RUC's recommendation.

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.

Respectfully,
Dr. James McGrath
LaGrange, Illinois

Submitter : Dr. David Holder
Organization : Dr. David Holder
Category : Physician

Date: 07/17/2007

Issue Areas/Comments

GENERAL

GENERAL

Leslie V. Norwalk, Esq.
Acting Administrator
Centers for Medicare and Medicaid Services
Attention: CMS-1385-P

Re: CMS-1385-P

Dear Ms. Norwalk:

My name is Dave Holder and I am a practicing anesthesiologist of over 20 years. I am writing to express support for the proposal to increase anesthesia payments under the 2008 Physician Fee Schedule.

When the RBRVS was instituted, it created a huge payment disparity for anesthesia care, as you know. Today's \$16.19 per unit does not cover the cost of caring for our nation's seniors, and it is hard to rationalize care for this frequently complicated population in the face of high legal risk and significantly inadequate AND DECLINING reimbursement.

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 undervaluation a move that 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. I am pleased that the Agency accepted this recommendation in its proposed rule, and I support full implementation of the RUC's recommendation.

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. Herman Tse

Date: 07/17/2007

Organization : ASA

Category : Physician

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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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. Patsy Hedges
Organization : Dr. Patsy Hedges
Category : Physician

Date: 07/17/2007

Issue Areas/Comments

GENERAL

GENERAL

Leslie V. Norwalk, Esq.
Acting Administrator
Centers for Medicare and Medicaid Services
Attention: CMS-1385-P

Re: CMS-1385-P

Anesthesia Coding (Part of 5-Year Review)

Dear Ms. Norwalk:

My name is Patsy Hedges and I am a practicing anesthesiologist in Texas. I support the proposal to increase anesthesia payments under the 2008 Physician Fee Schedule.

Anesthesia reimbursement has long been undervalued by Medicare. It is hard to allot time to this complicated and aging population with it actually "costs" me money. The current unit amount does not come close to covering the cost of caring for medicare patients, and is creating an unsustainable system in which anesthesiologists are being forced away from areas with disproportionately high Medicare populations.

I am pleased that the Agency accepted this recommendation in its proposed rule, and I support full implementation of the RUC s recommendation.

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. REDDY DEVARAPALLI

Date: 07/17/2007

Organization : ANESTHESIA CARE TEAM

Category : Physician

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)

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Thank you for your consideration of this serious matter.

YOURS

REDDY DEVARAPALLI

Submitter : Dr. Meghan Bost
Organization : Dr. Meghan Bost
Category : Physician

Date: 07/17/2007

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)

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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. Stephen Robinson
Organization : Dr. Stephen Robinson
Category : Physician

Date: 07/17/2007

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:

The purpose of this note is to express my strongest support for the proposal to increase anesthesia payments under the 2008 Physician Fee Schedule. CMS has appropriately recognized the gross undervaluation of anesthesia services the proposal provides an important step towards addressing the disparity caused by the original implementation of the conversion factor of anesthesia units into the RBRVS system.

When the RBRVS was instituted, it created a huge payment disparity for anesthesia care, mostly 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 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.

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Thank you for your consideration of this serious matter.

Stephen Robinson, MD

Submitter : Dr. robert moore

Date: 07/17/2007

Organization : anesthesia associates of lancaster, ltd.

Category : Physician

Issue Areas/Comments

GENERAL

GENERAL

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Thank you for your consideration of this serious matter.

Submitter : Dr. Barbara Watanabe
Organization : Sound Anesthesia
Category : Physician

Date: 07/17/2007

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)

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Thank you for your consideration of this serious matter.

Submitter : Dr. gerald callas
Organization : anesthesiologist
Category : Physician

Date: 07/17/2007

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)

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Thank you for your consideration of this serious matter.

Submitter : Dr. Bruce Johnson
Organization : n/a
Category : Physician

Date: 07/17/2007

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)

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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,

Bruce D. Johnson, MD

Submitter : Saad Hussain
Organization : Saad Hussain
Category : Physician

Date: 07/17/2007

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)

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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.

Greatest Regards,
Saad Hussain, MS IV

Submitter : Dr. Eric von Borstel
Organization : Santiam Memorial Hospital
Category : Physician

Date: 07/17/2007

Issue Areas/Comments

GENERAL

GENERAL

Please see attachment. Thank you.

CMS-1385-P-2940-Attach-1.DOC

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:

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Thank you for your consideration of this serious matter.

Submitter : Dr. James Deuel
Organization : Dr. James Deuel
Category : Physician

Date: 07/17/2007

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)

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Thank you for your consideration of this serious matter.

Submitter : Dr. Elizabeth Freck
Organization : Yale-New Haven Hospital
Category : Physician

Date: 07/17/2007

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)

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Thank you for your consideration of this serious matter.

Yours truly,
Dr. Elizabeth Freck

Submitter : Dr. Lawrence Shinbaum
Organization : Milford Anesthesia Associates
Category : Physician

Date: 07/17/2007

Issue Areas/Comments

GENERAL

GENERAL

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

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Thank you for your consideration of this serious matter.
Dr. Lawrence Shinbaum
Fairfield, CT

Submitter : Dr. John Shearer
Organization : Dr. John Shearer
Category : Individual

Date: 07/17/2007

Issue Areas/Comments

GENERAL

GENERAL

Sample Comment Letter:

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)

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Thank you for your consideration of this serious matter.

Submitter : Dr. William Gauert
Organization : New Mexico Society of Anesthesiologists
Category : Physician

Date: 07/17/2007

Issue Areas/Comments

**Payment For Procedures And
Services Provided In ASCs**

Payment For Procedures And Services Provided In ASCs

Critical that reimbursement for anesthesiologists not be decreased but actually increased. Currently very difficult to recruit anesthesiologists to New Mexico because of low Medicare reimbursement compared to other states. Quality of anesthesia care is directly related to qualified anesthesiologists practicing in the state. To discourage them through low reimbursement hurt the citizens of New Mexico related to their quality of care. As a senior citizen, and retired anesthesiologist, I want the standard of anesthesia care to at least stay the same, preferably improve, but certainly not deteriorate. Without improved reimbursement, that certainly will be the case.

Submitter : Dr. Alan Almengual
Organization : Dr. Alan Almengual
Category : Physician

Date: 07/17/2007

Issue Areas/Comments

GENERAL

GENERAL

CMS 1385P

Agree with increasing anesthesia payments by \$3.30 per unit.

Submitter : Dr. christopher holst

Date: 07/17/2007

Organization : Dr. christopher holst

Category : Physician

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)

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When the RBRVS was instituted, it created a huge payment disparity for anesthesia care, mostly 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 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.

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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. Gary Levin
Organization : University of California, Davis
Category : Physician

Date: 07/17/2007

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

When the RBRVS was instituted, it created a huge payment disparity for anesthesia care, mostly due to significant undervaluation of anesthesia work compared to other physician services. In fact, there was only one data point in the original RBRVS study that was used in an attempt to compare Anesthesiology to other specialties: the insertion of a central catheter. It remains a statistical joke and was clearly a political tool, not a valid one.

Today, more than a decade since the RBRVS took effect, Medicare payment for anesthesia services stands at just \$16.19 per unit. Inflation adjusted, it is nearly half of what it was initially valued. 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.

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 undervaluation a move that 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. I am pleased that the Agency accepted this recommendation in its proposed rule, and I support full implementation of the RUC's recommendation.

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Thank you for your consideration of this serious matter.

Gary Levin, MD MBA

Submitter : d maji
Organization : d maji
Category : Individual

Date: 07/17/2007

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

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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 :

Date: 07/17/2007

Organization :

Category : Physician

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

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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. Thomas N Rooke
Organization : ASA
Category : Physician

Date: 07/17/2007

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)

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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. James Merrell
Organization : American Society of Anesthesiologist
Category : Physician

Date: 07/17/2007

Issue Areas/Comments

GENERAL

GENERAL

see attachment

CMS-1385-P-2952-Attach-1.TXT

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)**

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Thank you for your consideration of this serious matter.

Sincerely,

James Merrell M.D.

Submitter : Dr. Matthew Barton
Organization : Clallam Anesthesiologists Associated
Category : Physician

Date: 07/17/2007

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)

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Thank you for your consideration of this serious matter.

Submitter : Dr. Jeffrey Roth

Date: 07/17/2007

Organization : OAA

Category : Physician

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)

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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.

Jeffrey L. Roth M.D.

Submitter : Dr. Steven Whittler
Organization : Whittler Anesthesia PC
Category : Physician

Date: 07/17/2007

Issue Areas/Comments

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

Coding-- Additional Codes From 5-Year Review

Dear Ms. Norwalk:

As a solo anesthesia practitioner, 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.

When the RBRVS was instituted, it created a huge payment disparity for anesthesia care, mostly 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 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.

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Thank you for your consideration of this serious matter.

Submitter : Dr. Edward Leonard

Date: 07/17/2007

Organization : Dr. Edward Leonard

Category : Physician

Issue Areas/Comments

GENERAL

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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)

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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. Edwin Cunningham
Organization : Medical Anesthesia Group, P.A.
Category : Physician

Date: 07/17/2007

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)

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Thank you for your consideration of this serious matter.

Submitter : Dr. Phillip Marzolino
Organization : Austin Anesthesiology Group
Category : Physician

Date: 07/17/2007

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)

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Thank you for your consideration of this serious matter.

Dr Phillip S Marzolino

Submitter : Dr. Al Lopez
Organization : USC
Category : Physician

Date: 07/17/2007

Issue Areas/Comments

GENERAL

GENERAL

Please increase the Anesthesia RBRVS by \$3.00. I support those efforts as do many of my fellow constituents

Submitter : Dr. Evan Kharasch
Organization : Washington University
Category : Physician

Date: 07/17/2007

Issue Areas/Comments

GENERAL

GENERAL

Re: CMS-1385-P

Anesthesia Coding (Part of 5-Year Review)

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.

When the RBRVS was instituted, it created a huge payment disparity for anesthesia care, mostly 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 is just \$16.19 per unit. 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.

Moreover, this is disproportionately affecting our teaching institutions, which care for a disproportionately high fraction of Medicare patients, are the training sites for future anesthesiologists who will care for our Seniors, and which rely on Medicare revenue to help support their teaching missions.

To rectify this untenable situation, the RUC recommended that CMS increase the anesthesia conversion factor to offset a calculated 32 percent work undervaluation. This 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. I am pleased that the Agency accepted this recommendation in its proposed rule, and I support full implementation of the RUC's recommendation.

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Thank you for your consideration of this serious matter.

Very truly yours,
Evan Kharasch MD PhD

Submitter : Dr. Richard Redfern
Organization : Dr. Richard Redfern
Category : Physician

Date: 07/17/2007

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

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Thank you for your consideration of this serious matter.

Submitter : Dr. sanjeev chhangani
Organization : university of rochester
Category : Physician

Date: 07/17/2007

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

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Thank you for your consideration of this serious matter.

Submitter : Dr. Paul Piazza
Organization : Dr. Paul Piazza
Category : Physician

Date: 07/17/2007

Issue Areas/Comments

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

Coding-- Additional Codes From 5-Year Review

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)

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Thank you for your consideration of this serious matter.

Sincerely,

Paul A. Piazza, M.D.

Submitter : Dr. Diego Gonzalez
Organization : Dr. Diego Gonzalez
Category : Physician

Date: 07/17/2007

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

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Thank you for your consideration of this serious matter

Submitter : Dr. James Evans
Organization : Dr. James Evans
Category : Physician

Date: 07/17/2007

Issue Areas/Comments

GENERAL

GENERAL

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

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When the RBRVS was instituted, it created a huge payment disparity for anesthesia care, mostly 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 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.

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 undervaluation a move that 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. I am pleased that the Agency accepted this recommendation in its proposed rule, and I support full implementation of the RUC's recommendation.

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.

Dr. James Evans

Submitter : Dr. Bryant Murphy
Organization : Cumberland Anesthesia Associates, PA
Category : Physician

Date: 07/17/2007

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.

When the RBRVS was instituted, it created a huge payment disparity for anesthesia care, mostly 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 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.

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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. Roger Kinkor
Organization : Medical Center Anesthesiologists, P.C.
Category : Physician

Date: 07/17/2007

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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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.

In addition, another inequity in the state of Iowa is the availability of additional CRNA pay for serving in outlying areas that is unavailable to physicians. In the future, please consider rectifying that inequity.

Thank you for your consideration of this serious matter.

Submitter : George Woodrum
Organization : George Woodrum
Category : Physician

Date: 07/17/2007

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)

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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.

Sincerely,

George O. Woodrum

Submitter : Dr. Seabury Davies
Organization : Mountain West Anesthesia
Category : Physician

Date: 07/17/2007

Issue Areas/Comments

GENERAL

GENERAL

Anesthesia services have improved dramatically in the last 15 years.

Lower morbidity and mortality, faster recovery and better patient satisfaction are all well documented. Despite this Medicare has substantially under reimbursed Anesthesia services. Please do take this opportunity to right years of unwarranted discrimination against Anesthesiologists. Anesthesia Medicare fees should be adjusted to match the marketplace. Thank you

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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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. Babak Maharlouei
Organization : East End Anesthesiologists, LLC.
Category : Physician

Date: 07/17/2007

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:

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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.

CMS-1385-P-2970-Attach-1.DOC

Submitter : Dr. edward YAGHMOUR

Date: 07/17/2007

Organization : Dr. edward YAGHMOUR

Category : Physician

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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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.

EDWARD A YAGHMOUR,
DEPT OF ANESTHESIOLOGY
NORTHWESTERN UNIVERSITY
FEINBERG SCHOOL OF MEDICINE
CHICAGO, IL 60611

Submitter : Dr. Christopher Luis Fernandez
Organization : Dr. Christopher Luis Fernandez
Category : Physician

Date: 07/17/2007

Issue Areas/Comments

GENERAL

GENERAL

see attahment

CMS-1385-P-2972-Attach-1.DOC

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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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.

Christopher Luis R. Fernandez, M.D.
Gulf Shores Anesthesia Associates

Submitter : Dr. Troy Tortorici
Organization : Northwest Anesthesia, P.C.
Category : Physician

Date: 07/17/2007

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)

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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.

Troy Tortorici, M.D.

Submitter : Dr. Matthew Cohen
Organization : Michigan State University
Category : Physician

Date: 07/17/2007

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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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.

Matthew D. Cohen, D.O.

Submitter : Dr. thomas hunley
Organization : thomas hunley, m.d.
Category : Physician

Date: 07/17/2007

Issue Areas/Comments

GENERAL

GENERAL

the senior citizens of this country deserve to be treated by physicians who adequately reimbursed for there expertise. please vote yes to an increase in physician reimbursement.

Submitter : Dr. RANDY SASSONE
Organization : RIVER REGION HEALTH SYSTEMS
Category : Physician

Date: 07/17/2007

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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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 undervaluation a move that 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. I am pleased that the Agency accepted this recommendation in its proposed rule, and I support full implementation of the RUC's recommendation.

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.

RANDY E. SASSONE MD

Submitter : Dr. Christopher Campese
Organization : North American Partners in Anesthesia
Category : Physician

Date: 07/17/2007

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)

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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.

Sincerely,

Christopher Campese, M.D.

Submitter : Dr. DONG DAI
Organization : Mid-Continant Anesthesiology Chartered
Category : Physician

Date: 07/17/2007

Issue Areas/Comments

GENERAL

GENERAL

See Attachment

CMS-1385-P-2978-Attach-1.RTF

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 an anesthesiologist practicing in Wichita, Kansas and I am writing to express my very very strong 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. Our anesthesiology group consists of nine anesthesiologists and 10 employed nurse anesthetists. We provide anesthesiology services to Medicare beneficiaries at an ambulatory surgery center in the city of Wichita.

When the RBRVS was instituted, it created a huge payment disparity for anesthesia care, mostly 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 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. In order for our anesthesiology group be able to cover the costs of providing services to Medicare beneficiaries, it is necessary to use payments received from other payers. That means that it is only our ability to care for non-Medicare patients that allows us to provide services to Medicare beneficiaries. No anesthesiology practice could survive financially if it was limited to providing services to Medicare beneficiaries!

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 undervaluation—a move that 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. I am pleased that the Agency accepted this recommendation in its proposed rule, and I support full implementation of the RUC's recommendation.

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.

DONG DAI, M.D.

Submitter : Dr. Alar Saaremets
Organization : Tahoe Forest Hospital
Category : Physician

Date: 07/17/2007

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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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.

Thank you.
Sincerely,

Alar Saaremets
Tahoe Forest Hospital
Truckee, CA 96160

Submitter : Dr. Harold Voss

Date: 07/17/2007

Organization : Dr. Harold Voss

Category : Physician

Issue Areas/Comments

GENERAL

GENERAL

See Attachment

Submitter : Dr. Harold Voss

Date: 07/17/2007

Organization : Dr. Harold Voss

Category : Physician

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)

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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.

Sincerely,

Harold M. Voss, Jr., M.D.
9728 S. Knoxville Ave.
Tulsa, OK 74137-5250

Submitter : Dr. Robert Hutsell
Organization : American Society of Anesthesiologists
Category : Physician

Date: 07/17/2007

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)

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Thank you for your consideration of this serious matter.

Robert Hutsell, MD

Submitter : Dr. Paul Fellenbaum
Organization : Anesthesia Consultants of Central Jersey, LLP
Category : Physician

Date: 07/17/2007

Issue Areas/Comments

CAP Issues

CAP Issues

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)

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Thank you for your consideration of this serious matter.
Paul Fellenbaum, MD

Submitter : Dr. Paul Corey
Organization : Anesthesia Service Medical Group, Inc.
Category : Physician

Date: 07/17/2007

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:

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Thank you for your consideration of this serious matter.

Sincerely,
Paul W. Corey, MD.

Submitter : Dr. Cameron Burrup
Organization : Anesthesia Associates of New Mexico
Category : Physician

Date: 07/17/2007

Issue Areas/Comments

GENERAL

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Leslie V. Norwalk, Esq.
Acting Administrator
Centers for Medicare and Medicaid Services
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Baltimore, MD 21244-8018

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Thank you for your consideration of this serious matter.

Cameron E. Burrup, M.D.

Submitter : Dr. Mickey Dobson

Date: 07/17/2007

Organization : Dr. Mickey Dobson

Category : Physician

Issue Areas/Comments

GENERAL

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Leslie V. Norwalk, Esq.
Acting Administrator
Centers for Medicare and Medicaid Services
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Baltimore, MD 21244-8018

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P.O. Box 8018

Submitter : Dr. Karen Mitchell
Organization : Baylor College of Medicine
Category : Physician

Date: 07/17/2007

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

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Submitter : Dr. w scott blessing
Organization : pa
Category : Physician

Date: 07/17/2007

Issue Areas/Comments

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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Submitter : Mr. James Mitchell
Organization : Mr. James Mitchell
Category : Individual

Date: 07/17/2007

Issue Areas/Comments

TRHCA--Section 108: CAP

TRHCA--Section 108: CAP

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. Don Frost
Organization : Little Rock Anesthesia Services
Category : Physician

Date: 07/17/2007

Issue Areas/Comments

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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Dr. Don A. Frost
553 Silverwood Trail
North Little Rock, AR 72116

Submitter : Mrs. Patricia Mitchell
Organization : Mrs. Patricia Mitchell
Category : Individual

Date: 07/17/2007

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
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Submitter : Dr. Matthew Linsenhardt
Organization : WAAI
Category : Physician

Date: 07/17/2007

Issue Areas/Comments

GENERAL

GENERAL

See attachment

Submitter : Dr. Chang J Feng
Organization : Caldwell Anesthesia and Pain Medicine, PLLC
Category : Physician

Date: 07/17/2007

Issue Areas/Comments

GENERAL

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Leslie V. Norwalk, Esq.
Acting Administrator
Centers for Medicare and Medicaid Services
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Sincerely,
CJ Feng, MD

Submitter :

Date: 07/17/2007

Organization :

Category : Other Government

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

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Submitter : Dr. Peter Herbig
Organization : Dr. Peter Herbig
Category : Individual

Date: 07/17/2007

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

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Submitter : Miss. Tarun Bhalla

Date: 07/17/2007

Organization : Miss. Tarun Bhalla

Category : Physician

Issue Areas/Comments

GENERAL

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Submitter : Dr. Carey Weiss
Organization : Dr. Carey Weiss
Category : Physician

Date: 07/17/2007

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
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Thank you for your consideration of this serious matter.

Submitter : Dr. Robert Forstot
Organization : Western Anesthesia Associates, Inc
Category : Physician

Date: 07/17/2007

Issue Areas/Comments

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

Coding-- Additional Codes From 5-Year Review

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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Robert Forstot, MD

Submitter : Dr. David Leggett
Organization : Medical Anesthesia Group
Category : Physician

Date: 07/17/2007

Issue Areas/Comments

GENERAL

GENERAL

See Attachment

CMS-1385-P-2999-Attach-1.DOC

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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Sincerely,

David C. Leggett, MD
Chairman, Department of Anesthesiology
Methodist Healthcare Systems
Memphis, TN

Submitter : Dr. Adam Collins

Date: 07/17/2007

Organization : UCSF

Category : Physician

Issue Areas/Comments

GENERAL

GENERAL

Leslie V. Norwalk, Esq.
Acting Administrator
Centers for Medicare and Medicaid Services
Attention: CMS-1385-P
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Adam Collins MD,
Associate Clinical Professor of Anesthesia,
Department of Anesthesia and Perioperative Care,
University of California, San Francisco

Submitter : Mr. Joe Pulvermacher
Organization : Oak Creek Fire Department
Category : Other Health Care Professional

Date: 07/17/2007

Issue Areas/Comments

Beneficiary Signature

Beneficiary Signature

I strongly oppose any regulation that imposes additional required statements and signatures from the hospital staff (even if the patient is not able or willing to sign the patient care report). Our emergency medical service is limited by the availability of our ambulances. Many times, emergency rooms are filled to capacity- waiting for a member of the hospital staff to draft a contemporaneous statement will keep our ambulances out of their primary response area- placing an additional strain on our commitment to readiness.

You say that you are sympathetic to the concerns of ambulance providers. Please be sympathetic to our need to remain available to our constituency. Lengthening our stay at the hospital to get a statement (that can be documented by our ambulance crew) is not a responsible act. We better serve our public when we are able to return to our communities in a timely manner.

Thank you for your attention to the matter. Please feel free to contact me for additional feedback.

Captain Joe Pulvermacher
Oak Creek (WI) Fire Rescue

Submitter : Dr. MArgaret Garahan
Organization : Dr. MArgaret Garahan
Category : Physician

Date: 07/17/2007

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.

When the RBRVS was instituted, it created a huge payment disparity for anesthesia care, mostly 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 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.

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 undervaluation a move that 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. I am pleased that the Agency accepted this recommendation in its proposed rule, and I support full implementation of the RUC's recommendation.

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. Michael Mullins
Organization : Ingham Regional Medical Center
Category : Physician

Date: 07/17/2007

Issue Areas/Comments

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Thank you for your consideration of this serious matter.

Submitter : Dr. Jaemy Hwang
Organization : Dr. Jaemy Hwang
Category : Physician

Date: 07/17/2007

Issue Areas/Comments

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Dear Ms. Norwalk:

I would like to express my strongest support for the proposal to increase anesthesia payments under the 2008 Physician Fee Schedule. I am reassured that CMS has recognized the critical undervaluation of Anesthesia 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.

Sincerely,
Jaemy Hwang, MD
Indianapolis, IN

Submitter : Dr. Kimberly Mulligan
Organization : Old Pueblo Anesthesia
Category : Physician

Date: 07/18/2007

Issue Areas/Comments

GENERAL

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Dear Ms. Norwalk,

I am writing in regards to CMS-1385-P, specifically regarding the proposal to increase payment for anesthesia services under the 2008 Physician Fee Schedule.

As an anesthesiologist, I know that anesthesia services are grossly undervalued by Medicare. The current Medicare payment is just \$16.19 per unit. It is unfortunate that we are paid so much less to care for America's frailest and sickest patients than we are for the average patient with private insurance.

The RUC recommended that CMS increase the anesthesia conversion factor by 32%. I urge you to do so.

Thank you,

Kimberly Mulligan, M.D.

Submitter : Dr. Theresa Sloma
Organization : Straub Clinic & Hospital
Category : Physician

Date: 07/18/2007

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Thank you for your consideration of this serious matter.

Submitter : Dr. Michael Noud
Organization : Northern Rockies Anesthesia Consultants
Category : Physician

Date: 07/18/2007

Issue Areas/Comments

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Thank you for your consideration of this serious matter.

Submitter : Dr. Thomas Martin
Organization : University of Texas Southwestern
Category : Physician

Date: 07/18/2007

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Submitter : Dr. Wade Martin
Organization : U. of Texas, Southwestern, Dallas
Category : Physician

Date: 07/18/2007

Issue Areas/Comments

Resource-Based PE RVUs

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