Submitter:

Dr. Francis Kraemer

Date: 07/11/2007

Organization:

University of Pennsylvania Medical Center

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.

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,

F. Wickham Kraemer III, MD

Submitter:

Dr. Paul calkinC

Organization:

Dr. Paul calkinC

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 P.O. Box 8018 Baltimore, MD 21244-8018

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Thank you for your consideration of this serious matter.

Paul M. Calkins Md

Submitter:

Date: 07/11/2007

Organization:

Category:

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

Re: CMS-1385-P

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Thank you for your consideration of this serious matter.

Submitter:

Dr. James Sisamis

Date: 07/11/2007

 ${\bf Organization:}$

American Society of Anesthesiologists

Category:

Physician

Issue Areas/Comments

GENERAL

GENERAL

I am a practicing anesthesiologist in a 50-60 % medicade/care area and I feel that with the passing of cms-1385-p, I can stay in this community and continue to provide care in an underserve environment.

Submitter:

Dr. Robin Seaberg

University of California San Dlego

Organization:
Category:

Physician

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.

Submitter:

Dr. David Clark

Date: 07/11/2007

Organization:

University of Missouri: Columbia, Healthcare

Category:

Physician

Issue Areas/Comments

GENERAL

GENERAL

The current and past reimbursement formula is antequated and mal-advised. Please do make it equitable!

Submitter:

Andrew Crook

Date: 07/11/2007

Organization:

Andrew Crook

Category:

Physician

Issue Areas/Comments

GENERAL

GENERAL

Please support this to correct an unfair payment for anesthesia service, which is grossly less than other specialities when compared (for example) to its fraction of private insurance payments.

Submitter:

Mr. Amit Patel

Re: CMS-1385-P ASA

Organization:
Category:

Individual

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.

Submitter:

Dr. Alan Smith

Date: 07/11/2007

Organization:
Category:

Individual

Greenville Anesthesiology, P.A.

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. Alan W. Smith, M.D.

Submitter:

Dr. Keith Stevens

Date: 07/11/2007

Organization:

Anesthesia Assocaites of Charleston

Category:

Physician

Issue Areas/Comments

GENERAL

GENERAL

Re: CMS-1385-P Anesthesia Coding

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Thank you for your consideration of this serious matter. C. Keith Stevens, MD Charleston SC

Submitter:

Dr. Patrick Ziemann-Gimmel

Organization:

Dr. Patrick Ziemann-Gimmel

Category:

Individual

Issue Areas/Comments

GENERAL

GENERAL

It would be of great help to physicians like myself in underserved areas if those changes would be supported.

Sincerely

CMS-1385-P-861-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)

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Thank you for your consideration of this serious matter.

Sincerely

Patrick Ziemann-Gimmel, MD

Submitter :

Dr. Eugene Moretti

Duke University Med.Ctr.Dept. of Anesthesiology

Organization: Category:

Physician

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.

Eugene W. Moretti M.D., MHSc. Associate Professor of Anesthesiology Department of Anesthesiology Duke University Medical Center Durham, NC 27710

Submitter:

Dr. Bryan Wales

Organization:

Olympia Anesthesia Associates

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.

Submitter:

Chirag Jani

Organization:

Chirag Jani

Category:

Physician

Issue Areas/Comments

Payment For Procedures And Services Provided In ASCs

Payment For Procedures And Services Provided In ASCs

A revision is needed to keep our specialty thriving.

Submitter:

Dr. Mona Halim-armanios

Date: 07/11/2007

Organization:

Ohio state University medical center

Category:

Physician

Issue Areas/Comments

Resource-Based PE RVUs

Resource-Based PE RVUs

As an anesthesiologist at highly ranked academic medical center for over 18 years as well as a member of the American society of anesthesiologist, I strongly support the proposed increases in anesthesia reimbursement in order to maintain adequate care for medicare paitents. The proposed increases will allow us to continue to provide the highest and safest anesthesia monitoring intervention and care to this increasingly older and sicker population. Thank you very much for your consideration and approval.

Mona Halim-Armanios, M.D.

Submitter:

Dr. Bradley Reid

Organization:

UTMB - Galveston, TX

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

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,

Bradley J. Reid, M.D.

Submitter:

Dr. Jianguo Cheng

Organization:

Cleveland Clinic

Category:

Physician

Issue Areas/Comments

GENERAL

GENERAL

Leslie V. Norwalk, Esq. Acting Administrator Centers for Medicare and Medicaid Scrvices 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:

nikhil thakkar

Organization:

nikhil thakkar

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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Submitter:

Dr. Chirag Jani

Organization:

Dr. Chirag Jani

Category:

Physician

Issue Areas/Comments

Payment For Procedures And Services Provided In ASCs

Payment For Procedures And Services Provided In ASCs

see attachment

CMS-1385-P-869-Attach-1.DOC

Page 265 of 857

July 12 2007 08:56 AM

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. Vicente Farinas

 ${\bf Organization:}$

Dr. Vicente Farinas

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.

Sincerely,

Vicente Farinas MD

Submitter:

Mr. Terry Pace

Date: 07/11/2007

Organization:

Azalea Orthopedics

Category:

Health Care Professional or Association

Issue Areas/Comments

Impact

Impact

I manage the largest orthopedic practice in east Texas. Our area is very popular with retirees thus our patient mix is almost 50% Medicare. The MGMA national median is 25% while the 90th percentile is 39%. While the proposed 2008 reductions may not be significant to a practice with 25% Medicare, it will be a tremendous hit to our practice. In addition, it is already difficult to recruit orthopedists with this payer mix. What is going to happen when the baby-boomers begin retiring? Who is going to fix their broken hips and replace their knees? You have got to get rid of the SGR. We are already seeing access issues with respect to hip and knee revisions and if we can't recruit it will get significantly worse. Ultimately, my concern is that if we continue down this path we will find that our bright young people won't go into medicine. I'm at the end of the baby boomers and I am worried that finding quality physicians when I retire may be difficult.

Submitter:

Dr. Steven Lagman

Date: 07/11/2007

Organization:

Madison Anesthesiology Consultants LLP

Category:

Physician

Issue Areas/Comments

GENERAL

GENERAL

CMS-1385-P

I am pleased to hear that CMS is considering a revision in payment to anesthesiologists. As you know, our specialty has been underpaid, relative to other provider groups for many years. I encourage you to continue with any plans to increase the anesthesiology conversion factor. Doing so will help maintain our enthusiasm for providing discounted services for our well-deserving older Americans. Even with an increase, please realize that we will still be providing services to Medicare patients at rates that are far below market, especially considering that patients in this population include (by virtue of coexisting illness) the most labor-intensive patients for whom we provide care. Nonetheless, a positive change will have a significant--perhaps practice-saving--impact on groups with high percentage of Medicare patients, and it will be much appreciated by all. Lastly, a positive change will send a clear message that CMS considers anesthesiologists to be important providers to Medicare patients. Thank you in advance for this act of fairness.

Submitter:

Dr. Brian Birimingham

Organization:

Rush University Medical Center

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
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Thank you for your consideration of this serious matter.

Brian Birmingham, MD

Submitter:

Dr. Peter Nagi

Date: 07/11/2007

Organization:

University of Alabama at Birmingham

Category:

Health Care Provider/Association

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:

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Thank you for your consideration of this serious matter.

Submitter:

Dr. Scott Mantell

Date: 07/11/2007

Organization:

AAPC

Category:

Physician

Issue Areas/Comments

GENERAL

GENERAL

Re: CMS-1385-P

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Submitter:

Dr. Stuart Behrens

Organization:

Dr. Stuart Behrens

Category:

Physician

Issue Areas/Comments

GENERAL

GENERAL

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.

Sincerely,

Stuart Behrens MD

Submitter:

Dr. Andre Kwa

Organization:

Dr. Andre Kwa

Category:

Physician

Issue Areas/Comments

Medicare Economic Index (MEI)

Medicare Economic Index (MEI)

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.

Sincerely, Andre Kwa M.D

Submitter:

Dr. baiju sheth

Organization:

metro health anesthesia

Category:

Physician

Issue Areas/Comments

GENERAL

GENERAL

please increase anesthesia payments

Page 274 of 857

July 12 2007 08:56 AM

Submitter:

James Cooney

Organization:

James Cooney

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
P.O. Box 8018
Baltimore, MD 21244-8018

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Thank you for your consideration of this serious matter.

James Cooney

Submitter:

Dr. David Grimes

University of Rochester

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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Thank you for your consideration of this serious matter.

Sincerely, Dr David D Grimes Department of Anesthesia University of Rochester Strong Memorial Hospital Rochester, New York 14642

Submitter:

Dr. Laurence Susser

Date: 07/11/2007

Organization:

New York University School of Medicine

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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Thank you for your consideration of this serious matter.

Submitter:

Dr. Joel McMasters

Dr. Joel McMasters

Organization:

Category:

Physician

Issue Areas/Comments

Ambulance Services

Ambulance Services

The medical specialty of anesthesiology is the key specialty in all of American medicine. Hospitals and patients depend on these outstanding anesthesiologists to ensure safe, expert care. Recent decreases in payments to anesthesiologists are unwise and potentially decremental to American healthcare. Please increase payments to anesthesiologists immediately!

Submitter :

Dr. Thomas Rymell

Organization:

Dr. Thomas Rymell

Category:

Physician

Issue Areas/Comments

Resource-Based PE RVUs

Resource-Based PE RVUs

Anesthesia needs these increases just to keep up with the cost of our employees. Our group is close to leaving the hospital we work at because it has too high of a medicare population and can not keep up with the cost of our employees to run anesthesia at a large referal center with a high medicare population. Thanks for your consideration. Thomas A. Rymell, M.D.

Submitter:

Dr. Jevin Smith

Organization: U

UAMS

Category:

Physician

Issue Areas/Comments

GENERAL

GENERAL

Leslie V. Norwalk, Esq.
Acting Administrator
Centers for Medicarc 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:

Daniel Cole

Organization: Daniel Cole

Category:

Individual

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. william mansfield

Date: 07/11/2007

Organization:

south oakland anesthesia associates

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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Sincerely,

WIlliam Mansfield, MD

Submitter:

Dr. Donald Stogsdill, M.D.

Organization:

Indiana Society of Anesthesiologists

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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Submitter:

Dr. Jennifer Gilbert

Organization:

Hershey Medical Center

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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Thank you for your consideration of this serious matter. Sincerely,

Jennifer Gilbert DO

Submitter:
Organization:

Dr. Scott Harper

Anesthesia Resources Management, Inc.

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 Baltimorc, MD 21244-8018

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Thank you for your consideration of this serious matter.

Submitter:

Connie Weintraub

Organization:

Connie Weintraub

Category:

Individual

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. John Wills

Organization:

University of New Mexico

Category:

Physician

Issue Areas/Comments

GENERAL

GENERAL

See Attachment

CMS-1385-P-891-Attach-1.DOC

Page 287 of 857

July 12 2007 08:56 AM



Department of Anesthesiology and Critical Care Medicine MSC11 6120 1 University of New Mexico Albuquerque, New Mexico 87131-0001 Telephone (505)272-2610 FAX (505)272-1300

July 11, 2007

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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John Wills, MBBS FANZCA MBA

Professor and Chair

John Wund

Department of Anesthesiology and CCM

Submitter:

Dr. Douglas Mest

Organization:

Dr. Douglas Mest

Category:

Physician

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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Submitter:

Dr. billy ford

Organization:

Dr. billy ford

Category:

Physician

Issue Areas/Comments

GENERAL

GENERAL

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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 ancesthesia 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. Mickey Gierhart

Organization:

Pinnacle Anesthesia Assoc.

Category:

Physician

Issue Areas/Comments

Resource-Based PE RVUs

Resource-Based PE RVUs

I strongly support an increase in anesthesia reimbursement for medicare patients. This will allow us to continue to be able to care for these patients.

Submitter:

Dr. Raymond Lupkas, Jr.

Organization:

Raymond R Lupkas, Jr MDPA

Category:

Physician

Issue Areas/Comments

GENERAL

GENERAL

see attachment

CMS-1385-P-895-Attach-1.PDF

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.

Raymond Lupkas, MD 35 Braemar Rd. Pinehurst, NC 28374 910-295-1343

Submitter:

Dr. Gerard Bassell

Date: 07/11/2007

Organization:

Mid-Continent Anesthesiology, Chartered

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 an anesthesiologist in Wichita, Kansas and 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. 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 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.

Gerard M. Bassell, M.D.

Submitter:

Kenneth Silverstein

Date: 07/11/2007

 ${\bf Organization:}$

Anesthesia Services, P.A.

Category: P

Physician

Issue Areas/Comments

GENERAL

GENERAL

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Thank you for your consideration of this serious matter.

Submitter:

Dr. denise joffe

Organization:

Dr. denise joffe

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.

Submitter:

Miss. Elizabeth Peek

Date: 07/11/2007

Organization:

University of Oklahoma Dept. of Anesthesia

Category:

Individual

Issue Areas/Comments

Payment For Procedures And Services Provided In ASCs

Payment For Procedures And Services Provided In ASCs

I believe that the government should fully support the \$3.30 increase in payment of anesthesiologists working for Medicare. They are grossly underpaid for their services. Although taking care of are elderly is necessary, we need to take care of our doctors. They've spent many many years in school and have gone through much toil to acheive the career they love. Grossly underpaying them is another way of saying we don't value you your hard work and services. How can we properly take care of our elderly, if we don't take care of our doctors? They deserve the pay increase.

Submitter:

Dr. Timothy Murray

Organization:

Dr. Timothy Murray

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,

Timothy J. Murray, M.D.

Submitter:

Dr. Steven Chang

Date: 07/11/2007

Organization:

Medical Anesthesia Consultants Medical Group Inc.

Category:

Physician

Issue Areas/Comments

GENERAL

GENERAL

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

Re: CMS-1385-P

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Submitter:

Date: 07/11/2007

Organization:

Category:

Physician

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

Re: CMS-1385-P

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Thank you for your consideration of this serious matter.

Jeff Ceschi MD

Submitter:

Dr. David Goodman

Organization:

Dr. David Goodman

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. Sincerely, David Goodman, MD Washington, DC

Submitter:

Dr. Monford Wolf

Date: 07/11/2007

Organization:

Southeast Anesthesiology Associates

Category:

Physician

Issue Areas/Comments

GENERAL

GENERAL

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

Dear Ms. Norwalk,

I am writing to voice support for the proposed increase in valuation for anesthesia services currently being considered. Anesthesia services have been undervalued for several years now and with an increasing proportion of surgical patients being covered by medicare, this undervaluation is being increasingly felt by our specialty. Many groups are having to turn to alternative means (stipends, staffing shortages, etc) to remain financially solvent and competitive. Full implamentation of the proposed increase would significantly help maintain the future viability of our specialty, which is crucial to maintaining and advancing the care of surgical patients.

Thank you for your consideration, Monford Wolf, M.D. 2221 Vaughan Rd Virginia Beach, VA 23457

Submitter:

Dr. BRIAN BORMANN

Organization:

Dr. BRIAN BORMANN

Category:

Physician

Issue Areas/Comments

Resource-Based PE RVUs

Resource-Based PE RVUs

I am in favor of the increase.

Submitter:

Dr. Robert Ponte

Organization:

Dr. Robert Ponte

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.

Robert A. Ponte, M.D.

Submitter:

Dr. Louis Levin

Organization:

Dr. Louis Levin

Category:

Physician

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.

Submitter:

Dr. Robert Andrews

Organization:

Parkway 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

Anesthesia Coding (Part of 5-Year Review)

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Thank you for your consideration of this serious matter.

Sincerely,

Robert A Andrews, M.D.

Submitter:

Organization:

Dr. Gary Mullen

Harvard Medical School

Category:

Physician

Issue Areas/Comments

GENERAL

GENERAL

This comment is in regarding CMS reimbursement for anesthesia services. It is imperative that we revise the "2-case rule" at teaching institutions, and raise the reimbursement of a more reasonable level. Excellent care that is provided at these institutions goes unfunded to the point that nearly all anesthesia practices at academic medical centers operate at a loss because of the number of CMS patients they provide care for (the best care available).

What is the natural incentive? It is clear that providors will migrate to the private sector, thus further increasing the gap that exists in coverage for the 40 million americans that lack coverage, because as more providors move to the private payer hospitals (and ASC environment), more "skimming" will have to occur as the PRIVATE patients are filtered away from the hospital-based practices. The downward spiral of an increasing percentage of hospital CMS patients, and reduced CMS reimbursement will ensue and again weaken the system.

OUR CONGRESS has the responsibility to offer fair and reasonable payments to the hospitals providing these services, especially since the numbers will continue to increase. What business can operate indefinitely at such a loss?

If there's ever a question that physician services are over-paid, and the drug/equipment manufacturing companies are underpaid, entertain the following questions:

1) and operating room table is \$50,000 (more than my internship salary--after 21 years of education)

2) Zofran tablets-generic--(a common nausea medication) is \$12 PER TABLET (that's \$72/day). Who could afford such a medication? Not even me, and I've been a practicing physician for 9 years.

Very Respectfully Submitted, Gary John Mullen, MD 18 VFW Parkway Boston, MA 02131 850-261-4322

Submitter:

Dr. Anne Lynn

Date: 07/11/2007

 ${\bf Organization:}$

Children's Hospital/ University of Washington

Category:

Physician

Issue Areas/Comments

GENERAL

GENERAL

As a pediatric subspecialist, my interest in CMS changing the reimbursement for anesthesiologist services may seem unusual. However, it is clear that the original fee structure undervalued anesthesiologist services, and this inequity has grown over time. It is gratifying that RMS has addressed this issue and suggested an increase that will help correct this undervaluation of anesthesia services. America's seniors and its pediatric patients deserve to access expert anesthesiologist services and this increase in fee structure will help make such care more widely available. Thank you for allowing me to comment.

Submitter:

Dr. carlos gracia

Organization:

Dr. carlos gracia

Category:

Physician

Issue Areas/Comments

GENERAL

GENERAL

i am in favor of the increase in anesthesia reimbursements.

Page 307 of 857

July 12 2007 08:56 AM

Submitter:

Mr. Adam Snavely

Organization:

Mr. Adam Snavely

Category:

Individual

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.

Best wishes for you and yours, Adam Snavely

Submitter:

Dr. Meredith Brooks

Organization:

BWH Hospital

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.

Dr. Meredith Brooks

Submitter:

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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Thank you for your consideration of this serious matter.

Ann Mrozowski, MBA Director, Department of Anesthesiology Allegheny General Hospital Pittsburgh, PA 15212

Submitter:

Dr. Shital Patel

Date: 07/11/2007

Organization:

Hanover Anesthesia Group

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.

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.

Shital Patel, MD

Submitter:

Dr. Michael Umanoff

Organization:

NJSSA and ASA

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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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. Again this is long overdue!

Thank you for your consideration of this serious matter.

Sincerely,

Michael Umanoff MD CMS-1385-P

Submitter:

Dr. Mario Conol

Organization:

Dr. Mario Conol

Category:

Physician

Issue Areas/Comments

GENERAL

GENERAL

See Attachment

CMS-1385-P-917-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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Thank you for your consideration of this serious matter.

Sincerely,

Mario Conol, MD Member, American Society of Anesthesiologists Board Certified, American Board of Anesthesiology

Submitter:

Dr. Anthony Chang

Organization:

Dr. Anthony Chang

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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Thank you for your consideration of this serious matter.

Submitter:

Dr. William Owens

Date: 07/11/2007

Organization:

Washington University School of Medicine

Category:

Physician

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
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Thank you for your consideration of this serious matter.

William D. Owens, M.D.

Submitter:

Organization:

Dr. Ammar Divan

St. Vincent's Hospital - Manhattan

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.

Submitter:

Ms. Silva Tirana

Organization:

Suburban Hospital

Category:

Nurse

Issue Areas/Comments

Resource-Based PE RVUs

Resource-Based PE RVUs

see attached

CMS-1385-P-921-Attach-1.DOC

Page 317 of 857

July 12 2007 08:56 AM

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.

Silva Tirana, R.N.

Submitter:

Dr. Eduardo Moreno

Date: 07/11/2007

Organization:

American Society of Anesthesiologists

Category:

Physician

Issue Areas/Comments

GENERAL

GENERAL

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

Eduardo E. Moreno, M.D. University of Texas Medical Branch Department of Anesthesiology

Submitter:

Dr. Melissa Ennen

Organization:

Stanford University

Category:

Physician

Issue Areas/Comments

GENERAL

GENERAL

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

Melissa Ennen, MD

Submitter:

Dr. Patrick Segeleon

Organization:

Emory University

Category:

Physician

Issue Areas/Comments

GENERAL

GENERAL

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. Scott Springman

Date: 07/11/2007

Organization:

University of Wisconsin Medical School

Category:

Physician

Issue Areas/Comments

GENERAL

GENERAL

Leslie V. Norwalk, Esq.
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 important matter.

Scott Springman, MD Professor of Anesthesiology University of Wiseonsin Medical School Madison, Wisconsin 608-263-8100

Submitter:

Dr. Frederick Bunke

Date: 07/11/2007

Organization:

Hartford Anesthesiology Associates

Category:

Physician

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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Thank you for your consideration of this serious matter.

Submitter:

Dr. Steve Starling

_

Anesthesia Resources Management

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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Thank you for your consideration of this serious matter.

Submitter:

Dr. Daniel Levinthal

Organization:

Adventist Health Systems

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
P.O. Box 8018
Baltimore, MD 21244-8018

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Thank you for your consideration of this serious matter.

Daniel J. Levinthal, M.D.

Submitter:

Dr. David Beebe

Date: 07/11/2007

Organization:

University of Minnesota Medical School

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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Thank you for your consideration of this serious matter.

Submitter:

Dr. stephen shuput

Organization:

Dr. stephen shuput

Category:

Physician

Issue Areas/Comments

GENERAL

GENERAL

Regarding CMS proposal 1385-P:

I am writing to support the payment increase for Anesthesia in the 2008 physician fee schedule. The payment disparity caused by the RBRVS system is causing Anesthesiologists to avoid areas where the concentration of senior citizens is high. I am grateful that this problem is being addressed before the access to care for seniors is a more serious problem. If the situation gets worse, recruitment of new talent into the field of Anesthesiology would become difficult.

The RUC has reccommended a nearly \$4.00 per anesthesia unit increase and I fully support this. Respectfully, Stephen R Shuput MD

Submitter:

Organization:

Dr. Joyal Degani

Adventist Health Systems

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
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Thank you for your consideration of this serious matter.

Joyal Degani, M.D.

Submitter:

Dr. Patricia Perry

Organization:

Rush University Medical Center

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
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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 yours, Patricia Perry, M.D.

Submitter:

Dr. Richard Shapiro

Organization:

Union Memorial Hospital

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 Schedulc. 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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Thank you for your consideration of this serious matter.

Submitter:

Dr. Jaime Ronderos

Organization:

Dr. Jaime Ronderos

Category:

Physician

Issue Areas/Comments

Resource-Based PE RVUs

Resource-Based PE RVUs

Re: CMS-1385-P Anesthesia Coding

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Thank you for your consideration of this serious matter.

Sincerely, Jaime R. Ronderos, MD

Submitter:

Dr. Creston Martin

Organization:

Dr. Creston Martin

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

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,

Creston Martin, M.D.

Submitter:

Dr. Thao Tran

Date: 07/11/2007

Organization:
Category:

Allenmore Anesthesia Assoc. 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.

Thao D.Tran D.O. Allenmore Anesthesia Assoc. Tacoma, WA

Submitter:

Dr. Steve Gerschultz

Organization:

None

Category: Physician

Issue Areas/Comments

GENERAL

GENERAL

Please see attachment.

CMS-1385-P-937-Attach-1.DOC

Steve Gerschultz 3602 Courtside Circle Huntington Beach, CA 92649 July 11, 2007

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 undervaluation of anesthesia services and is taking steps to address this issue.

Medicare reimbursement for anesthesia services has been significantly undervalued for some time. At this point it is less than half of our discounted HMO rates. My colleagues and I have again recently researched the opt out possibilities regarding Medicare. Of course this action would only hurt the mostly senior Medicare population and lead to other difficulties among all parties involved. Fortunately, dialogue, factual explainations, and reasonable solutions have prevailed.

I urge your support of the re-evaluation of anesthesia services. I feel a potential quandary can be averted with the long term benefit of the Medicare patient and their families.

Thank you for your time.

Sincerely,

Steve Gerschultz

Submitter:

Dr. Mahmood Siddique

Organization:

Fox Chase Anesthesiology Associates, P.C.

Category:

Physician

Issue Areas/Comments

GENERAL

GENERAL

SEE ATTACHMENT

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE AND MEDICAID SERIVICES
OFFICE OF STRATEGIC OPERATIONS & REGULATORY AFFAIRS

Please note: We did not receive the attachment that was cited in this comment. We are not able to receive attachments that have been prepared in excel or zip files. Also, the commenter must click the yellow "Attach File" button to forward the attachment.

Please direct your questions or comments to 1 800 743-3951.

Submitter:

Dr. Robert Hodson

Date: 07/11/2007

Organization:

ARM

Category:

Health Care Provider/Association

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.

Robert Hodson, MD

Submitter:

Dr. Alexander Rodarte

Organization:

None

Category:

Physician

Issue Areas/Comments

GENERAL

GENERAL

See attachment

CMS-1385-P-940-Attach-1.DOC

CMS-1385-P-940-Attach-2.DOC

Page 336 of 857

July 12 2007 08:56 AM

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.

Since I am a strong proponent of a single payer system, the Medicare model must be functional in order to continue to gain support for this solution to the inequality of our health care delivery system. If we physicians are not able to provide services at a reasonable compensation, then the system will never work. While congress debates the various solutions to this situation, you must act to preserve a system that has proven over the years to be excellent at delivering quality care to our senior citizens.

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.

Sincerely.

Alexander Rodarte, M.D., FCCM

Submitter:

Dr. Jason MItchell

Organization:

Dr. Jason MItchell

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:

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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. Jason Mitchell, M.D.

Submitter:

Dr. Richard Beers

Organization:

SUNY Upstate Medical University

Category:

Physician

Issue Areas/Comments

GENERAL

GENERAL

Please see attached MS Word document

CMS-1385-P-942-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 important issue.

When the RBRVS was instituted, anesthesia work was significantly undervalued compared to other physician services. Medicare payment for anesthesia services is less today by absolute dollar comparison than it was in 1990. In the teaching hospital in which I practice, this payment covers a little over half the cost of providing the care for our area's senior citizens. This is a tragedy, as it creates 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. This would be a major step towards 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.

This is, indeed, a very serious matter.

Sincerely,

Richard A. Beers, MD

Submitter:

Dr. Joseph Jaros

Date: 07/11/2007

Organization:

Anesthesia Specialists of Albuquerque

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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Thank you for your consideration of this serious matter.

Joseph A Jaros, MD

Submitter:

Dr. Phillip Carroll

Organization:

Fox Chase Anesthesiology Associates, P.C.

Category:

Physician

Issue Areas/Comments

GENERAL

GENERAL

SEE ATTACHMENT

Submitter:

Dr. Basil Karayannis

Organization:

Fox Chase Anesthesiology Associates

Category:

Physician

Issue Areas/Comments

GENERAL

GENERAL

see attachments

Submitter:

Dr. Jeffrey Anderegg

Organization:

Dr. Jeffrey Anderegg

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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I work in a small community in Northwest Wisconsin. 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.

Respectfully yours,

Jeffrey J Anderegg MD

Submitter:

Dr. Todd Patton

Organization:

Williams and Wagner

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.

Todd Patton M.D.

Submitter:

Dr. Richard Stilz

Date: 07/11/2007

Organization:

Anesthesia Associates of Cincinnati

Category:

Physician

Issue Areas/Comments

Resource-Based PE RVUs

Resource-Based PE RVUs

See attachment. Medicare payments for physician services in Anesthesiology have been absolutely inadequate for many years now, really since the RBRVS system was adopted. The original methodology for assigning fees in Anesthesiology was flawed, a fact acknowledged by the author of the study. It is long past time to rectify this situation. Failure to do so may well result in the inability of Medicare patients to obtain care. Since I will be one of those patients before too long, I hope you correct this quickly. Richard Stilz, M.D.

Submitter:

Dr. James Rockefeller

Organization:

Anesthesia Specialists of Albuquerque

Category:

Physician

Issue Areas/Comments

GENERAL

GENERAL

I am in favor of increased reimbursement under CMS 1385 P.

Submitter:

Dr. Myra Stamps

Organization:

Dr. Myra Stamps

Category:

Physician

Issue Areas/Comments

GENERAL

GENERAL

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