

Submitter : Mr. William Pedersen
Organization : Mr. William Pedersen
Category : Consumer Group

Date: 09/26/2005

Issue Areas/Comments

GENERAL

GENERAL

Department of Health and Human Services
Attention: CMS-1502-P
PO Box 8017
Baltimore, MD 21244-8017

Re: GPCIs

I am a Medicare beneficiary who receives medical care from a physician in Sonoma County, California. I understand that Medicare is proposing to create a new payment locality for Sonoma County, which is an increasingly expensive place to live and work. In the new locality, the Medicare reimbursement rate would be more closely matched to actual practice expenses than it is now.

The new locality would help Sonoma County physicians improve the quantity and quality of care they deliver to me and other Medicare beneficiaries. The locality change would also benefit efforts to recruit and retain physicians in the county, which has a large Medicare population.

I fully support your proposal to change Sonoma County's payment locality, and I appreciate the opportunity to comment on this important issue.

Sincerely,

Mr. & Mrs. Wm. & Patricia Pedersen
1653 Julianne Place
Santa Rosa, CA. 95404

Submitter : ANN KRAMLICH
Organization : ANN KRAMLICH
Category : Individual

Date: 09/26/2005

Issue Areas/Comments

GENERAL

GENERAL

ANN KRAMLICH
325 PATTON ST
SANTA ROSA, CA 95405

MEMORANDUM

DATE: September 20, 2005

TO: Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attention: CMS-1502-P
PO Box 8017
Baltimore, MD 21244-8017

FROM: Joyce Coughlin

Re: GPCIs

I am a Medicare beneficiary who receives medical care from a physician in Sonoma County, California. I understand that Medicare is proposing to create a new payment locality for Sonoma County, which is an increasingly expensive place to live and work. In the new locality, the Medicare reimbursement rate would be more closely matched to actual practice expenses than it is now.

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I fully support your proposal to change Sonoma County's payment locality, and I appreciate the opportunity to comment on this important issue.

Submitter : GRACE YANK

Date: 09/26/2005

Organization : GRACE YANK

Category : Individual

Issue Areas/Comments

GENERAL

GENERAL

GRACE YANK
19416 MARNA LN
SANTA ROSA, CA 95405

MEMORANDUM

DATE: September 20, 2005

TO: Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attention: CMS-1502-P
PO Box 8017
Baltimore, MD 21244-8017

FROM: Joyce Coughlin

Re: GPCIs

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I fully support your proposal to change Sonoma County's payment locality, and I appreciate the opportunity to comment on this important issue.

Submitter : ROBERT YANK
Organization : ROBERT YANK
Category : Individual

Date: 09/26/2005

Issue Areas/Comments

GENERAL

GENERAL

ROBERT YANK
19416 MARNA LN
SANTA ROSA, CA 95405

MEMORANDUM

DATE: September 20, 2005

TO: Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attention: CMS-1502-P
PO Box 8017
Baltimore, MD 21244-8017

FROM: Joyce Coughlin

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The new locality would help Sonoma County physicians improve the quantity and quality of care they deliver to me and other Medicare beneficiaries. The locality change would also benefit efforts to recruit and retain physicians in the county, which has a large Medicare population.

I fully support your proposal to change Sonoma County's payment locality, and I appreciate the opportunity to comment on this important issue.

Submitter : Toby Jacknowitz
Organization : Toby Jacknowitz
Category : Individual

Date: 09/26/2005

Issue Areas/Comments

GENERAL

GENERAL

As a retired medical assistant I urge you to revise Sonoma County's payment schedule so our physicians and other health care members can be reimbursed accordingly. Too many our good doctors are leaving the area because the reimbursement rate is way too low.

Submitter : James KENNEDY
Organization : James KENNEDY
Category : Individual

Date: 09/26/2005

Issue Areas/Comments

GENERAL

GENERAL

JAMES KENNEDY
161 CLOVER SPRINGS DR
SANTA ROSA, CA 95405

MEMORANDUM

DATE: September 20, 2005

TO: Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attention: CMS-1502-P
PO Box 8017
Baltimore, MD 21244-8017

FROM: Joyce Coughlin

Re: GPCIs

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I fully support your proposal to change Sonoma County's payment locality, and I appreciate the opportunity to comment on this important issue.

Submitter : THOMAS ANDERSON
Organization : THOMAS ANDERSON
Category : Individual

Date: 09/26/2005

Issue Areas/Comments

GENERAL

GENERAL

THOMAS ANDERSON
10326 MILL STATION
SEBASTOPOL, CA 95472

MEMORANDUM

DATE: September 20, 2005

TO: Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attention: CMS-1502-P
PO Box 8017
Baltimore, MD 21244-8017

FROM: Joyce Coughlin

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I fully support your proposal to change Sonoma County's payment locality, and I appreciate the opportunity to comment on this important issue.

Submitter : JAMES PUGH
Organization : JAMES PUGH
Category : Individual

Date: 09/26/2005

Issue Areas/Comments

GENERAL

GENERAL

JAMES PUGH
3729 GREENCREST
SANTA ROSA, CA 95405

MEMORANDUM

DATE: September 20, 2005

TO: Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attention: CMS-1502-P
PO Box 8017
Baltimore, MD 21244-8017

FROM: Joyce Coughlin

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The new locality would help Sonoma County physicians improve the quantity and quality of care they deliver to me and other Medicare beneficiaries. The locality change would also benefit efforts to recruit and retain physicians in the county, which has a large Medicare population.

I fully support your proposal to change Sonoma County's payment locality, and I appreciate the opportunity to comment on this important issue.

Submitter : David Jacknowitz
Organization : David Jacknowitz
Category : Individual

Date: 09/26/2005

Issue Areas/Comments

GENERAL

GENERAL

As a private individual I urge you to update the physicians reimbursement rate for Sonoma County

Submitter : Stephen Burke

Date: 09/26/2005

Organization : Retired Housing and Redev Dir- City of Santa Rosa

Category : Federal Government

Issue Areas/Comments

GENERAL

GENERAL

I strongly support having Medicare create a new payment locality for Sonoma County California.

Recruiting physicians to our area is currently threatened and the quantity and quality of care will be greatly enhanced by the established of a new locality in our area which is located in a costly area in close proximity to San Francisco.

I fully support your proposal to change Sonoma County's payment locality, and I very much appreciate the opportunity to comment on this important issue.

Thank you, Stephen F. Burke
5255 Beaumont Way
Santa Rosa, CA 95409

Submitter : WARREN BEAVERT
Organization : WARREN BEAVERT
Category : Individual

Date: 09/26/2005

Issue Areas/Comments

GENERAL

GENERAL

WARREN BEAVERT
58 BRIANE CR
WINDSOR, CA 95492

MEMORANDUM

DATE: September 20, 2005

TO: Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attention: CMS-1502-P
PO Box 8017
Baltimore, MD 21244-8017

FROM: Joyce Coughlin

Re: GPCIs

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The new locality would help Sonoma County physicians improve the quantity and quality of care they deliver to me and other Medicare beneficiaries. The locality change would also benefit efforts to recruit and retain physicians in the county, which has a large Medicare population.

I fully support your proposal to change Sonoma County's payment locality, and I appreciate the opportunity to comment on this important issue.

Submitter : Mr. Fred Levin
Organization : Mr. Fred Levin
Category : Individual

Date: 09/26/2005

Issue Areas/Comments

GENERAL

GENERAL

I am a Medicare beneficiary who receives medical care from a physician in Sonoma County, California. I support Medicare's proposal to create a new payment locality for Sonoma County, California. This area is increasingly expensive place to work and live. This change in Medicare's reimbursement rate would have the positive effective of retaining and recruiting physicians for our area. Additionally, this area has a growing Medicare population. Thanks for the opportunity to comment on this important issue.

Submitter : Ms. sandra martensen

Date: 09/26/2005

Organization : Ms. sandra martensen

Category : Individual

Issue Areas/Comments

GENERAL

GENERAL

My husband and I believe that Sonoma County doctors ought to be compensated at the urban rate instead of the rural rate. This is a very expensive county to live in and is similar to Marin County in that way. It has the same or similar cost of living as other urban areas in the San Francisco vicinity.

Submitter : DORIS THOMAS
Organization : DORIS THOMAS
Category : Individual

Date: 09/26/2005

Issue Areas/Comments

GENERAL

GENERAL

DORIS THOMAS
6550 MEADOWRIDGE DR
SANTA ROSA, CA 95405

MEMORANDUM

DATE: September 20, 2005

TO: Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attention: CMS-1502-P
PO Box 8017
Baltimore, MD 21244-8017

FROM: Joyce Coughlin

Re: GPCIs

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I fully support your proposal to change Sonoma County's payment locality, and I appreciate the opportunity to comment on this important issue.

Submitter : RUTH SILVA
Organization : RUTH SILVA
Category : Individual

Date: 09/26/2005

Issue Areas/Comments

GENERAL

GENERAL

RUTH SILVA
751 ADOBE DR.
SANTA ROSA, CA 95405

MEMORANDUM

DATE: September 20, 2005

TO: Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attention: CMS-1502-P
PO Box 8017
Baltimore, MD 21244-8017

FROM: Joyce Coughlin

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I fully support your proposal to change Sonoma County's payment locality, and I appreciate the opportunity to comment on this important issue.

Submitter : CLAUDE SCHWARZ
Organization : CLAUDE SCHWARZ
Category : Individual

Date: 09/26/2005

Issue Areas/Comments

GENERAL

GENERAL

CLAUDE SCHWARZ
434 JACQUELINE DR
SANTA ROSA, CA 95405

MEMORANDUM

DATE: September 20, 2005

TO: Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attention: CMS-1502-P
PO Box 8017
Baltimore, MD 21244-8017

FROM: Joyce Coughlin

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I fully support your proposal to change Sonoma County's payment locality, and I appreciate the opportunity to comment on this important issue.

Submitter : Dr. Helen Lee
Organization : University of Chicago Hospital
Category : Physician

Date: 09/26/2005

Issue Areas/Comments

GENERAL

GENERAL

Mark McClellan, M.D., Ph.D.
Administrator
Centers for Medicare and Medicaid Services
Department of Health and Human Services
Attn: CMS-1502-P/TEACHING ANESTHESIOLOGISTS
P.O. Box 8017
Baltimore, MD 21244-8017

Dear Dr. McClellan:

I am writing as an anesthesiologist at the University of Chicago Hospital to urge the Centers for Medicare and Medicaid Services (CMS) to change the Medicare anesthesiology teaching payment policy.

Medicare's discriminatory payment arrangement, which applies only to anesthesiology teaching programs, has had a serious detrimental impact on the ability of programs to retain skilled faculty and to train the new anesthesiologists necessary to help alleviate the widely-acknowledged shortage of anesthesia providers -- a shortage that will be exacerbated in coming years by the aging of the baby boom generation and their need for surgical services.

Under current Medicare regulations, teaching surgeons and even internists are permitted to work with residents on overlapping cases and receive full payment so long as the teacher is present for critical or key portions of the procedure. Teaching surgeons may bill Medicare for full reimbursement for each of the two procedures in which he or she is involved. An internist may supervise residents in four overlapping office visits and collect 100% of the fee when certain requirements are met.

Teaching anesthesiologists are also permitted to work with residents on overlapping cases so long as they are present for critical or key portions of the procedure.

However, unlike teaching surgeons and internists, since 1995 the teaching anesthesiologists who work with residents on overlapping cases face a discriminatory payment penalty for each case. The Medicare payment for each case is reduced 50%. This penalty is not fair, and it is not reasonable.

Correcting this inequity will go a long way toward assuring the application of Medicare's teaching payment rules consistently across medical specialties and toward assuring that anesthesiology teaching is reimbursed on par with other teaching physicians.

Please end the anesthesiology teaching payment penalty.

Dr. Helen Lee
University of Chicago Hospital

Submitter : Dr. William Hetrick
Organization : Mercy Hospital of Pittsburgh
Category : Physician

Date: 09/26/2005

Issue Areas/Comments

GENERAL

GENERAL

See Attachment

CMS-1502-P-1519-Attach-1.DOC

Pittsburgh Mercy Health System
1400 Locust Street
Pittsburgh, PA 15219-5166

412.232.8006 telephone
412.232.7384 facsimile

1519

September 26, 2005

Mark McClellan, M.D., Ph.D.
Administrator
Centers for Medicare and Medicaid Services
Department of Health and Human Services
Attn: CMS-1502-P/TEACHING ANESTHESIOLOGISTS
P.O. Box 8017
Baltimore, MD 21244-8017

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Correcting this inequity will go a long way toward assuring the application of Medicare's teaching payment rules consistently across medical specialties and toward assuring that anesthesiology teaching is reimbursed on par with other teaching physicians.

Please end the anesthesiology teaching payment penalty.

Sincerely,

William D. Hetrick, M.D.



Submitter : SALLY RAFF
Organization : SALLY RAFF
Category : Individual

Date: 09/26/2005

Issue Areas/Comments

GENERAL

GENERAL

SALLY RAFF
142 BRUSH CREEK RD
SANTA ROSA, CA 95405

MEMORANDUM

DATE: September 20, 2005

TO: Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attention: CMS-1502-P
PO Box 8017
Baltimore, MD 21244-8017

FROM: Joyce Coughlin

Re: GPCIs

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The new locality would help Sonoma County physicians improve the quantity and quality of care they deliver to me and other Medicare beneficiaries. The locality change would also benefit efforts to recruit and retain physicians in the county, which has a large Medicare population.

I fully support your proposal to change Sonoma County's payment locality, and I appreciate the opportunity to comment on this important issue.

Submitter : FAYE LAPPENDORFF
Organization : FAYE LAPPENDORFF
Category : Individual

Date: 09/26/2005

Issue Areas/Comments

GENERAL

GENERAL

FAYE LAPPENDORFF
380 SINGING BR CIRCLE
SANTA ROSA, CA 95405

MEMORANDUM

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Department of Health and Human Services
Attention: CMS-1502-P
PO Box 8017
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I fully support your proposal to change Sonoma County's payment locality, and I appreciate the opportunity to comment on this important issue.

Submitter : DOROTHY MCCRAY
Organization : DOROTHY MCCRAY
Category : Individual

Date: 09/26/2005

Issue Areas/Comments

GENERAL

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DOROTHY MCCRAY
506 OAK VISTA LANE
SANTA ROSA, CA 95405

MEMORANDUM

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Department of Health and Human Services
Attention: CMS-1502-P
PO Box 8017
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I fully support your proposal to change Sonoma County's payment locality, and I appreciate the opportunity to comment on this important issue.

Submitter : OWEN REEVES
Organization : OWEN REEVES
Category : Individual

Date: 09/26/2005

Issue Areas/Comments

GENERAL

GENERAL

OWEN REEVES
4159 BAYBERRY DR.
SANTA ROSA, CA 95404

MEMORANDUM

DATE: September 20, 2005

TO: Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attention: CMS-1502-P
PO Box 8017
Baltimore, MD 21244-8017

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I fully support your proposal to change Sonoma County's payment locality, and I appreciate the opportunity to comment on this important issue.

Submitter : SHIRLEY REEVES
Organization : SHIRLEY REEVES
Category : Individual

Date: 09/26/2005

Issue Areas/Comments

GENERAL

GENERAL

SHIRLEY REEVES
4159 BAYBERRY DR
SANTA ROSA, CA 95404

MEMORANDUM

DATE: September 20, 2005

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Department of Health and Human Services
Attention: CMS-1502-P
PO Box 8017
Baltimore, MD 21244-8017

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I fully support your proposal to change Sonoma County's payment locality, and I appreciate the opportunity to comment on this important issue.

Submitter : Mrs. Charlene Simmons
Organization : Medicare
Category : Federal Government

Date: 09/26/2005

Issue Areas/Comments

GENERAL

GENERAL

As a senior citizen I feel it is imperative to increase our local Physician's percentage of reimbursement to 8% in lieu of the current reimbursement. We need to keep our doctors in Sonoma County! We have approximately 16.6 percent of senior citizens over 60 yrs. of age in this county.

Submitter : HELEN HARGRAVE
Organization : HELEN HARGRAVE
Category : Individual

Date: 09/26/2005

Issue Areas/Comments

GENERAL

GENERAL

HELEN HARGRAVE
407 WOODLEY PL
SANTA ROSA, CA 95405

MEMORANDUM

DATE: September 20, 2005

TO: Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attention: CMS-1502-P
PO Box 8017
Baltimore, MD 21244-8017

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I fully support your proposal to change Sonoma County's payment locality, and I appreciate the opportunity to comment on this important issue.

Submitter : DAVID HARGRAVE
Organization : DAVID HARGRAVE
Category : Individual

Date: 09/26/2005

Issue Areas/Comments

GENERAL

GENERAL

DAVID HARGRAVE
407 WOODLEY PL
SANTA ROSA, CA 95405

MEMORANDUM

DATE: September 20, 2005

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Department of Health and Human Services
Attention: CMS-1502-P
PO Box 8017
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Submitter : PAMELA MOORE
Organization : PAMELA MOORE
Category : Individual

Date: 09/26/2005

Issue Areas/Comments

GENERAL

GENERAL

PAMELA MOORE
7149 OAK LEAF DR
SANTA ROSA, CA 95405

MEMORANDUM

DATE: September 20, 2005

TO: Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attention: CMS-1502-P
PO Box 8017
Baltimore, MD 21244-8017

FROM: Joyce Coughlin

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I fully support your proposal to change Sonoma County's payment locality, and I appreciate the opportunity to comment on this important issue.

Submitter : Janna Dosch, M.A., CCC-A
Organization : Audiologist
Category : Other Health Care Professional

Date: 09/26/2005

Issue Areas/Comments

GENERAL

GENERAL

RE: CMS-1502-P

To Whom it May Concern:

I am writing to object to the proposed reduction in the reimbursement rates for audiologists, which CMS has included in its proposed fee structure. The sudden elimination the "non-physician zero work pool" codes without any consideration of practice expense or patient management factors is inappropriate. CMS has not recognized nor collected data for audiologic care that would justify this change to a policy that has existed for decades. This is especially egregious in view of CMS' considerations for other non-physician practitioners.

In view of this proposed policy change that results in a four times greater reduction for audiologists' reimbursement than any other profession, CMS should impose a moratorium on reimbursement changes for audiologists. A moratorium would allow for collection of data to justify or refute the current reimbursement levels to audiologists. As you are aware, your proposed change would affect more than the 40 million Medicare subscribers today, particularly as CMS' rates are used almost universally by other health care insurers. The number of those impacted will only increase as America's population grows and ages.

In view of this massive change on hearing and balance care services for such a large number of Americans, it would seem reasonable to request such a period of study. As a practicing audiologist, a cut of this proportion would negatively impact my ability and that of most audiologists to provide the type of care patients deserve. Thus, I respectfully request that CMS impose a moratorium on audiologists' reimbursement reductions in its most recent proposed physician fee schedule.

Sincerely,

Janna Dosch, M.A., CCC-A
Board Certified in Audiology

Submitter : Dr. Keith Melda
Organization : Dr. Keith Melda
Category : Other Health Care Professional

Date: 09/26/2005

Issue Areas/Comments

GENERAL

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RE: CMS-1502-P

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I am writing to object to the proposed reduction in the reimbursement rates for audiologists, which CMS has included in its proposed fee structure. The sudden elimination the ?non-physician zero work pool? codes without any consideration of practice expense or patient management factors is inappropriate. CMS has not recognized nor collected data for audiologic care that would justify this change to a policy that has existed for decades. This is especially egregious in view of CMS? considerations for other non-physician practitioners.

In view of this proposed policy change that results in a four times greater reduction for audiologists? reimbursement than any other profession, CMS should impose a moratorium on reimbursement changes for audiologists. A moratorium would allow for collection of data to justify or refute the current reimbursement levels to audiologists. As you are aware, your proposed change would affect more than the 40 million Medicare subscribers today, particularly as CMS? rates are used almost universally by other health care insurers. The number of those impacted will only increase as America?s population grows and ages.

In view of this massive change on hearing and balance care services for such a large number of Americans, it would seem reasonable to request such a period of study. As a practicing audiologist, a cut of this proportion would negatively impact my ability?and that of most audiologists?to provide the type of care patients deserve. Thus, I respectfully request that CMS impose a moratorium on audiologists? reimbursement reductions in its most recent proposed physician fee schedule.

Sincerely,
Keith A. Melda, Au.D.
Doctor of Audiology

Submitter : Mrs. Dawn Maniskas
Organization : Aberdeen Audiology
Category : Other Practitioner

Date: 09/26/2005

Issue Areas/Comments

GENERAL

GENERAL

RE: CMS-1502-P

To Whom it May Concern:

I am writing to object to the proposed reduction in the reimbursement rates for audiologists, which CMS has included in its proposed fee structure. The sudden elimination the ?non-physician zero work pool? codes without any consideration of practice expense or patient management factors is inappropriate. CMS has not recognized nor collected data for audiologic care that would justify this change to a policy that has existed for decades. This is especially egregious in view of CMS? considerations for other non-physician practitioners.

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Thus, I respectfully request that CMS impose a moratorium on audiologists? reimbursement reductions in its most recent proposed physician fee schedule.

Sincerely,

Dawn W. Maniskas, MS, CCC-A, FAAA
doctoral candidate
Audiologist

Submitter : SUZY SAKATO
Organization : SUZY SAKATO
Category : Individual

Date: 09/26/2005

Issue Areas/Comments

GENERAL

GENERAL

SUZY SAKATO
406 TWIN LAKES CR
SANTA ROSA, CA 95405

MEMORANDUM

DATE: September 20, 2005

TO: Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attention: CMS-1502-P
PO Box 8017
Baltimore, MD 21244-8017

FROM: Joyce Coughlin

Re: GPCIs

I am a Medicare beneficiary who receives medical care from a physician in Sonoma County, California. I understand that Medicare is proposing to create a new payment locality for Sonoma County, which is an increasingly expensive place to live and work. In the new locality, the Medicare reimbursement rate would be more closely matched to actual practice expenses than it is now.

The new locality would help Sonoma County physicians improve the quantity and quality of care they deliver to me and other Medicare beneficiaries. The locality change would also benefit efforts to recruit and retain physicians in the county, which has a large Medicare population.

I fully support your proposal to change Sonoma County's payment locality, and I appreciate the opportunity to comment on this important issue.

Submitter : HUGH CALVIN
Organization : HUGH CALVIN
Category : Individual

Date: 09/26/2005

Issue Areas/Comments

GENERAL

GENERAL

HUGH CALVIN
2025 URBAN PL
CALISTOGA, CA 94515

MEMORANDUM

DATE: September 20, 2005

TO: Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attention: CMS-1502-P
PO Box 8017
Baltimore, MD 21244-8017

FROM: Joyce Coughlin

Re: GPCIs

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The new locality would help Sonoma County physicians improve the quantity and quality of care they deliver to me and other Medicare beneficiaries. The locality change would also benefit efforts to recruit and retain physicians in the county, which has a large Medicare population.

I fully support your proposal to change Sonoma County's payment locality, and I appreciate the opportunity to comment on this important issue.

Submitter : James Thacker

Date: 09/26/2005

Organization : James Thacker

Category : Individual

Issue Areas/Comments

GENERAL

GENERAL

September 26, 2005

Centers for Medicare and Medicaid Services
Department of Health & Human Services
Attn: CMS-1502-P
P.O. Box 8017
Baltimore, MD 21244-8017

Dear Centers for Medicare & Medicaid Services ? Comment Division:

As an employee of a radiology group practicing in Florida, I appreciate the opportunity to comment on the 2006 Medicare proposed fee schedule and the associated multiple-procedure discount for certain diagnostic imaging services. Our organization is a group with 20 radiologists, four outpatient imaging centers and outpatient hospital services. We provide Medicare services that are based on the best clinical decisions for our patients and not on administrative decisions driven by costs and reimbursement.

We vigorously oppose the multiple services grouping reimbursement for this reason: Performing multiple tests requires additional time, skill, power, and resources and directly affects both patients and staff. Grouping procedures to justify a lower reimbursement provides no medical or monetary benefit to the patients and is ultimately detrimental to overall long-term patient care.

Florida has a large elderly population ? in the areas we serve, approximately 60% or greater of the population are Medicare eligible. Twenty-five percent of our practice supports the Medicare population ? imposing a 4.3% reduction in Medicare reimbursement and instituting a multiple procedure discount results in a combined revenue decrease of 6% while operating and practice expenses continue to rise. This decrease will create budget reductions in staffing, customer services, embracing new technology and other items critical to providing quality patient care and comfort.

We strongly urge you to reconsider the proposed physician payment cuts for 2006 and ask that you design a new payment system that would more appropriately reflect the cost of practicing good medicine.

Sincerely,

James Thacker

Submitter : PAMELA MOORE
Organization : PAMELA MOORE
Category : Individual

Date: 09/26/2005

Issue Areas/Comments

GENERAL

GENERAL

PAMELA MOORE
7149 OAK LEAF DR.
SANTA ROSA, CA 95405

MEMORANDUM

DATE: September 20, 2005

TO: Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attention: CMS-1502-P
PO Box 8017
Baltimore, MD 21244-8017

FROM: Gicela Barajas

Re: GPCIs

I understand that Medicare is proposing to create a new payment locality for Sonoma County, which is an increasingly expensive place to live and work. In the new locality, the Medicare reimbursement rate would be more closely matched to actual practice expenses than it is now.

The new locality would help Sonoma County physicians improve the quantity and quality of care they deliver to me and other Medicare beneficiaries. The locality change would also benefit efforts to recruit and retain physicians in the county, which has a large Medicare population.

I fully support your proposal to change Sonoma County's payment locality, and I appreciate the opportunity to comment on this important issue.

Submitter : Mrs. Deanna Frazier
Organization : Bluegrass Hearing Clinic
Category : Other Health Care Professional

Date: 09/26/2005

Issue Areas/Comments

GENERAL

GENERAL

RE: CMS-1502-P

To Whom it May Concern:

I am writing to object to the proposed reduction in the reimbursement rates for audiologists, which CMS has included in its proposed fee structure. The sudden elimination the "non-physician zero work pool" codes without any consideration of practice expense or patient management factors is inappropriate. CMS has not recognized nor collected data for audiologic care that would justify this change to a policy that has existed for decades. This is especially egregious in view of CMS' considerations for other non-physician practitioners.

In view of this proposed policy change that results in a four times greater reduction for audiologists' reimbursement than any other profession, CMS should impose a moratorium on reimbursement changes for audiologists. A moratorium would allow for collection of data to justify or refute the current reimbursement levels to audiologists. As you are aware, your proposed change would affect more than the 40 million Medicare subscribers today, particularly as CMS' rates are used almost universally by other health care insurers. The number of those impacted will only increase as America's population grows and ages.

In view of this massive change on hearing and balance care services for such a large number of Americans, it would seem reasonable to request such a period of study. As a practicing audiologist, a cut of this proportion would negatively impact my ability and that of most audiologists to provide the type of care patients deserve. Thus, I respectfully request that CMS impose a moratorium on audiologists' reimbursement reductions in its most recent proposed physician fee schedule.

Sincerely,

Deanna Frazier, M.A., CCC-A

Submitter : KATHRYN SAKATO
Organization : KATHRYN SAKATO
Category : Individual

Date: 09/26/2005

Issue Areas/Comments

GENERAL

GENERAL

KATHRYN SAKATO
406 TWIN LAKES CR
SANTA ROSA, CA 95405

MEMORANDUM

DATE: September 20, 2005

TO: Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attention: CMS-1502-P
PO Box 8017
Baltimore, MD 21244-8017

FROM: Gicela Barajas

Re: GPCIs

I understand that Medicare is proposing to create a new payment locality for Sonoma County, which is an increasingly expensive place to live and work. In the new locality, the Medicare reimbursement rate would be more closely matched to actual practice expenses than it is now.

The new locality would help Sonoma County physicians improve the quantity and quality of care they deliver to me and other Medicare beneficiaries. The locality change would also benefit efforts to recruit and retain physicians in the county, which has a large Medicare population.

I fully support your proposal to change Sonoma County's payment locality, and I appreciate the opportunity to comment on this important issue.

Submitter : Mrs. Helen Broadway
Organization : Mrs. Helen Broadway
Category : Individual

Date: 09/26/2005

Issue Areas/Comments

GENERAL

GENERAL

I strongly urge you to increase the Medicare payments to Doctors in Sonoma County, CA. We recently moved here from Santa Clara County and are finding it difficult to find Doctors who will accept Medicare. This is a very Urban area and it makes no sense to me that you would not pay these Doctors in line with other urban areas - ie. Marin County, Santa Clara County, etc.

Thank you

Regards

Helen Broadway

helen.broadway@sbcglobal.net

Submitter : Dr. Paula Marcinkevich
Organization : Dr. Paula Marcinkevich
Category : Other Health Care Professional

Date: 09/26/2005

Issue Areas/Comments

GENERAL

GENERAL

RE: CMS-1502-P

I am writing to object to the proposed reduction in the reimbursement rates for audiologists, which CMS has included in its proposed fee structure. The sudden elimination of the "non-physician zero work pool" codes without any consideration of practice expense or patient management factors is inappropriate. CMS has not recognized nor collected data for audiologic care that would justify this change to a policy that has existed for decades. This is especially egregious in view of CMS' considerations for other non-physician practitioners.

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In view of this massive change on hearing and balance care services for such a large number of Americans, it would seem reasonable to request such a period of study. As a practicing audiologist, a cut of this proportion would negatively impact my ability - and that of most audiologists - to provide the type of care patients deserve. Thus, I respectfully request that CMS impose a moratorium on audiologist's reimbursement reductions in its most recent proposed physician fee schedule.

Sincerely,

Paula B. Marcinkevich, AuD, CCC/A
Doctor of Audiology

Submitter : Dr. Cindi Butler
Organization : Dr. Cindi Butler
Category : Other Health Care Professional

Date: 09/26/2005

Issue Areas/Comments

GENERAL

GENERAL

To Whom it May Concern:

I am writing to object the proposed reduction in the reimbursement rates for audiologists, which CMS has included in its proposed fee structure. The sudden elimination of the "non-physician zero work pool" codes without any consideration of practice expense or patient management factors is inappropriate. CMS has not recognized nor collected data for audiologic care that would justify this change to a policy that has existed for decades. This is especially egregious in view of CMS' considerations for other non-physician practitioners.

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In view of this massive change on hearing and balance care services for such a large number of Americans, it would seem reasonable to request such a period of study. As a practicing audiologist, a cut of this proportion would negatively impact my ability-and that of most audiologists-to provide the type of care patients deserve. Thus, I respectfully request that CMS impose a moratorium on audiologists' reimbursement reductions in its most recent proposed physician fee schedule.

Sincerely,

Cindi L. Butler, Au.D., CCC-A
Doctor of Audiology

Submitter : CHRISTINE LeCUJER
Organization : CHRISTINE LeCUJER
Category : Individual

Date: 09/26/2005

Issue Areas/Comments

GENERAL

GENERAL

CHRISTINE LeCUJER
1153 GUAYMAS ST
SANTA ROSA, CA 95405

MEMORANDUM

DATE: September 20, 2005

TO: Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attention: CMS-1502-P
PO Box 8017
Baltimore, MD 21244-8017

FROM: Gicela Barajas

Re: GPCIs

I understand that Medicare is proposing to create a new payment locality for Sonoma County, which is an increasingly expensive place to live and work. In the new locality, the Medicare reimbursement rate would be more closely matched to actual practice expenses than it is now.

The new locality would help Sonoma County physicians improve the quantity and quality of care they deliver to me and other Medicare beneficiaries. The locality change would also benefit efforts to recruit and retain physicians in the county, which has a large Medicare population.

I fully support your proposal to change Sonoma County's payment locality, and I appreciate the opportunity to comment on this important issue.

Submitter : VALERIE WAIDLER
Organization : VALERIE WAIDLER
Category : Individual

Date: 09/26/2005

Issue Areas/Comments

GENERAL

GENERAL

VALERIE WAIDLER
529 BENTON ST
SANTA ROSA, CA 95404

MEMORANDUM

DATE: September 20, 2005

TO: Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attention: CMS-1502-P
PO Box 8017
Baltimore, MD 21244-8017

FROM: Gicela Barajas

Re: GPCIs

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I fully support your proposal to change Sonoma County's payment locality, and I appreciate the opportunity to comment on this important issue.

Submitter : STEPHANIE HUTCHINS
Organization : STEPHANIE HUTCHINS
Category : Individual

Date: 09/26/2005

Issue Areas/Comments

GENERAL

GENERAL

STEPHANIE HUTCHINS
429 BOWERS PLACE
GRATON, CA 95447

MEMORANDUM

DATE: September 20, 2005

TO: Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attention: CMS-1502-P
PO Box 8017
Baltimore, MD 21244-8017

FROM: Gicela Barajas

Re: GPCIs

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I fully support your proposal to change Sonoma County's payment locality, and I appreciate the opportunity to comment on this important issue.

Submitter : GINA OSBECK

Date: 09/26/2005

Organization : GINA OSBECK

Category : Individual

Issue Areas/Comments

GENERAL

GENERAL

GINA OSBECK
1413 HEIDI PL
WINDSOR, CA 95492

MEMORANDUM

DATE: September 20, 2005

TO: Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attention: CMS-1502-P
PO Box 8017
Baltimore, MD 21244-8017

FROM: Gicela Barajas

Re: GPCIs

I understand that Medicare is proposing to create a new payment locality for Sonoma County, which is an increasingly expensive place to live and work. In the new locality, the Medicare reimbursement rate would be more closely matched to actual practice expenses than it is now.

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I fully support your proposal to change Sonoma County's payment locality, and I appreciate the opportunity to comment on this important issue.

Submitter : Nancy Dickey
Organization : Professional Hearing Mgt.
Category : Other Health Care Professional

Date: 09/26/2005

Issue Areas/Comments

GENERAL

GENERAL

RE: CMS-1502-P

To Whom it May Concern:

I am writing to object to the proposed reduction in the reimbursement rates for audiologists, which CMS has included in its proposed fee structure. The sudden elimination of the "non-physician zero work pool" codes without any consideration of practice expense or patient management factors is inappropriate. CMS has not recognized nor collected data for audiologic care that would justify this change to a policy that has existed for decades. This is especially egregious in view of CMS' considerations for other non-physician practitioners.

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Nancy Dickey, Au.D.

Submitter : BARBARA AMAN
Organization : BARBARA AMAN
Category : Individual

Date: 09/26/2005

Issue Areas/Comments

GENERAL

GENERAL

BARBARA AMAN
1116 HYLAND DR
SANTA ROSA, CA 95404

MEMORANDUM

DATE: September 20, 2005

TO: Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attention: CMS-1502-P
PO Box 8017
Baltimore, MD 21244-8017

FROM: Gicela Barajas

Re: GPCIs

I understand that Medicare is proposing to create a new payment locality for Sonoma County, which is an increasingly expensive place to live and work. In the new locality, the Medicare reimbursement rate would be more closely matched to actual practice expenses than it is now.

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I fully support your proposal to change Sonoma County's payment locality, and I appreciate the opportunity to comment on this important issue.

Submitter :

Date: 09/26/2005

Organization :

Category : Physician

Issue Areas/Comments

GENERAL

GENERAL

SEE ATTACHMENT

CMS-1502-P-1547-Attach-1.DOC

1547

September 26, 2005

Centers for Medicare and Medicaid Services
Department of Health & Human Services
Attn: CMS-1502-P
P.O. Box 8017
Baltimore, MD 21244-8017

Dear Centers for Medicare & Medicaid Services – Comment Division:

As an employee of a radiology group practicing in Florida, I appreciate the opportunity to comment on the 2006 Medicare proposed fee schedule and the associated multiple-procedure discount for certain diagnostic imaging services. Our organization is a group with 20 radiologists, four outpatient imaging centers and outpatient hospital services. We provide Medicare services that are based on the *best clinical decisions* for our patients and not on administrative decisions driven by costs and reimbursement.

We vigorously oppose the multiple services grouping reimbursement for this reason: Performing multiple tests requires *additional* time, skill, power, and resources and directly affects both patients and staff. Grouping procedures to justify a lower reimbursement provides no medical or monetary benefit to the patients and is ultimately detrimental to overall long-term patient care.

Florida has a large elderly population – in the areas we serve, approximately 60% or greater of the population are Medicare eligible. Twenty-five percent of our practice supports the Medicare population – imposing a 4.3% reduction in Medicare reimbursement *and* instituting a multiple procedure discount results in a combined revenue *decrease* of 6% while operating and practice expenses continue to rise. This decrease will create budget reductions in staffing, customer services, embracing new technology and other items critical to providing quality patient care and comfort.

We strongly urge you to reconsider the proposed physician payment cuts for 2006 and ask that you design a new payment system that would more appropriately reflect the cost of practicing good medicine.

Sincerely,

Submitter : CINDI WHITE
Organization : CINDI WHITE
Category : Individual

Date: 09/26/2005

Issue Areas/Comments

GENERAL

GENERAL

CINDI WHITE
17263 VER BALN
GUERNEVILLE, CA 95446

MEMORANDUM

DATE: September 20, 2005

TO: Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attention: CMS-1502-P
PO Box 8017
Baltimore, MD 21244-8017

FROM: Gicela Barajas

Re: GPCIs

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I fully support your proposal to change Sonoma County's payment locality, and I appreciate the opportunity to comment on this important issue.

Submitter : Dr. Susan Whitney
Organization : University of Missouri -Kansas City
Category : Physician

Date: 09/26/2005

Issue Areas/Comments

GENERAL

GENERAL

See attachment

CMS-1502-P-1549-Attach-1.DOC

Mark McClellan, M.D., Ph.D.
Administrator
Centers for Medicare and Medicaid Services
Department of Health and Human Services
Attn: CMS-1502-P/TEACHING ANESTHESIOLOGISTS
P.O. Box 8017
Baltimore, MD 21244-8017

Dear Dr. McClellan:

I am writing as an anesthesiologist at Children's Mercy Hospital to urge the Centers for Medicare and Medicaid Services (CMS) to change the Medicare anesthesiology teaching payment policy.

Medicare's discriminatory payment arrangement, which applies only to anesthesiology teaching programs, has had a serious detrimental impact on the ability of programs to retain skilled faculty and to train the new anesthesiologists necessary to help alleviate the widely-acknowledged shortage of anesthesia providers -- a shortage that will be exacerbated in coming years by the aging of the baby boom generation and their need for surgical services.

Under current Medicare regulations, teaching surgeons and even internists are permitted to work with residents on overlapping cases and receive full payment so long as the teacher is present for critical or key portions of the procedure. Teaching surgeons may bill Medicare for full reimbursement for each of the two procedures in which he or she is involved. An internist may supervise residents in four overlapping office visits and collect 100% of the fee when certain requirements are met.

Teaching anesthesiologists are also permitted to work with residents on overlapping cases so long as they are present for critical or key portions of the procedure. However, unlike teaching surgeons and internists, since 1995 the teaching anesthesiologists who work with residents on overlapping cases face a discriminatory payment penalty for each case. The Medicare payment for each case is reduced 50%. This penalty is not fair, and it is not reasonable.

Correcting this inequity will go a long way toward assuring the application of Medicare's teaching payment rules consistently across medical specialties and toward assuring that anesthesiology teaching is reimbursed on par with other teaching physicians.

Please end the anesthesiology teaching payment penalty.

Sincerely,

Susan J Whitney, MD

Submitter : Dr. Niels Chapman
Organization : University of New Mexico School of Medicine
Category : Critical Access Hospital

Date: 09/26/2005

Issue Areas/Comments

GENERAL

GENERAL

Subject Issue: Teaching anesthesiologist's compensation

In the context of compensation for anesthesiologists supervising 2 residents, I would like to ask CMS to increase the compensation from 40 to 100% (as is the case for surgeons and internists supervising multiple locations). The challenges of an increasingly older and sicker population combined with ever more complex interventions demand a strong academic teaching environment for future anesthesiologists. Well trained physicians will ultimately prove cost saving by reducing expensive complications. Thank you very much.

Niels Chapman, MD