

**Submitter :** Dr. BettyLou Koffel  
**Organization :** Northwest Permanente, PC  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

**GENERAL**

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

When the RBRVS was instituted, it created a huge payment disparity for anesthesia care, mostly due to significant undervaluation of anesthesia work compared to other physician services. Today, more than a decade since the RBRVS took effect, Medicare payment for anesthesia services stands at just \$16.19 per unit. This amount does not cover the cost of caring for our nation's seniors, and is creating an unsustainable system in which anesthesiologists are being forced away from areas with disproportionately high Medicare populations.

In an effort to rectify this untenable situation, the RUC recommended that CMS increase the anesthesia conversion factor to offset a calculated 32 percent work undervaluation a move that would result in an increase of nearly \$4.00 per anesthesia unit and serve as a major step forward in correcting the long-standing undervaluation of anesthesia services. I am pleased that the Agency accepted this recommendation in its proposed rule, and I support full implementation of the RUC's recommendation.

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

Thank you for your consideration of this serious matter.

**Submitter :** Dr. Joe Liu

**Date:** 07/11/2007

**Organization :** ASA

**Category :** Physician

**Issue Areas/Comments**

**GENERAL**

**GENERAL**

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

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

Dear Ms. Norwalk:

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

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**Submitter :** Dr.  
**Organization :** Dr.  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**Impact**

Impact

impact

**Submitter :** Dr. Kristin Commito  
**Organization :** Dr. Kristin Commito  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

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Thank you for your consideration of this serious matter.

**Submitter :** Dr. Andrew Strigenz  
**Organization :** Overlake Anesthesiologists PS  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

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

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To ensure that our patients have access to expert anesthesiology medical care, it is imperative that CMS follow through with the proposal in the Federal Register by fully and immediately implementing the anesthesia conversion factor increase as recommended by the RUC. The future of our Seniors getting the quality health care they deserve is at stake.

Thank you for your consideration of this serious matter.

Andrew T. Strigenz MD  
9417 Points Dr NE  
Clyde Hill, WA 98004

**Submitter :** Dr. H. W. Collier

**Date:** 07/11/2007

**Organization :** Kansas Soc. of Anesthesiologists

**Category :** Physician

**Issue Areas/Comments**

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

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

I am in support of the proposed increase in payments for anesthesia services. Currently, Medicare payments cover only about 30 to 33% of anesthesiologist's fees. While the proposed increase will not make up the current gap it will help to keep the losses sustained in caring for Medicare patients less of a burden.

**Submitter :** Dr. Jeffrey Richards

**Date:** 07/11/2007

**Organization :** University of Texas Medical Branch at Galveston

**Category :** Physician

**Issue Areas/Comments**

**GENERAL**

**GENERAL**

As an academic anesthesiologist who takes care of a large number of Medicare patients, I am thankful that the conversion factor for Medicare is being increased. I would like to include this letter as support for this increase.

CMS-1385-P-1057-Attach-1.DOC

#1057

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. Jane Ahn

**Date:** 07/11/2007

**Organization :** ASA

**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 21244-80

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, Jane Ahn M.D.

**Submitter :** Dr. Richard Hindin  
**Organization :** Dr. Richard Hindin  
**Category :** Other Technician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

**GENERAL**

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

Rc: CMS-1385-P  
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**Submitter :** Dr. Xin Liu  
**Organization :** West Penn Hospital  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

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**Submitter :** Dr. Douglas Unger  
**Organization :** Pinnacle Anesthesia Consultants  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

GENERAL

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see attachment

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

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

**Submitter :** Dr. Margaret Brock  
**Organization :** Wake Forest University School of Medicine  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**Medicare Telehealth Services**

Medicare Telehealth Services

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

Dear Ms. Norwalk:

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**Submitter :** Dr. Mark Lema  
**Organization :** American Society of Anesthesiologists  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

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

Dr. Mark J. Lema  
President, ASA

**Submitter :** Dr. Fun-Sun Yao  
**Organization :** Weill Cornell Medical College  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

**GENERAL**

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

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Sincerely  
Fun-Sun Yao, MD



**Submitter :** Dr. Michael Tilson  
**Organization :** North Hills Anesthesia Associates  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**Background**

Background

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

**Submitter :** Dr. Hariharan Shankar  
**Organization :** Medical College of Wisconsin  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

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Leslie V. Norwalk, Esq.  
Acting Administrator  
Centers for Medicare and Medicaid Services  
Attention: CMS-1385-P  
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**Submitter :** Dr. Monson Shuh  
**Organization :** Cumberland Anesthesia Associates  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

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See Attachment

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTERS FOR MEDICARE AND MEDICAID SERVICES  
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**Submitter :** Dr. MARTY CLAYMAN

**Date:** 07/11/2007

**Organization :** Dr. MARTY CLAYMAN

**Category :** Physician

**Issue Areas/Comments**

**GENERAL**

GENERAL

See Attachment

CMS-1385-P-1068-Attach-1.TXT

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

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Sincerely,

Marty S. Clayman, MD, MS

**Submitter :** Dr. Hagop Karpanian  
**Organization :** American Society of Anesthesiologists  
**Category :** Hospital

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

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Centers for Medicare and Medicaid Services  
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Hagop V. Karpanian, MD

**Submitter :** Dr. George Katsoyannis

**Date:** 07/11/2007

**Organization :** Rusch Univ Med Ctr

**Category :** Physician

**Issue Areas/Comments**

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

Payment For Procedures And Services Provided In ASCs

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Thank you for your consideration of this serious matter.

George Katsoyannis, MD



**Submitter :** Dr. Mahmood Siddique  
**Organization :** Fox Chase Anesthesiology Associates  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

GENERAL

see attachment

CMS-1385-P-1071-Attach-1.DOC

**Fox Chase Anesthesiology Associates**  
*A Professional Corporation*

---

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 Yours,

Mahmood Siddique, M.D.

**Submitter :** Dr. Stephen Surgenor  
**Organization :** Dartmouth Hitchcock Medical Center  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

**GENERAL**

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

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

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

Thank you for your consideration of this serious matter.

Sincerely,  
Stephen D. Surgenor, MD

**Submitter :** Dr. Basil Karayannis

**Date:** 07/11/2007

**Organization :** Fox Chase Anesthesiology Associates, P.C.

**Category :** Physician

**Issue Areas/Comments**

**GENERAL**

GENERAL

SEE ATTACHMENT

CMS-1385-P-1073-Attach-1.DOC

**Fox Chase Anesthesiology Associates**  
*A Professional Corporation*

---

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 Yours,

Basil Karayannis, M.D.

**Submitter :** Dr. Stephen Surgenor  
**Organization :** Dartmouth Hitchcock Medical Center  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

**GENERAL**

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

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

Dear Ms. Norwalk:

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Thank you for your consideration of this serious matter.

Stephen Surgenor

**Submitter :** Dr. Phillip Carroll

**Date:** 07/11/2007

**Organization :** Fox Chase Anesthesiology Associates, P.C.

**Category :** Physician

**Issue Areas/Comments**

**GENERAL**

GENERAL

SEE ATTACHMENTS

CMS-1385-P-1075-Attach-1.DOC

**Fox Chase Anesthesiology Associates**  
*A Professional Corporation*

---

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.

Sincerely Yours,

Phillip Carroll, M.D.



**Submitter :** Dr. cooper hagerty  
**Organization :** ARM. INC.  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

**GENERAL**

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

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

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Thank you for your consideration of this serious matter.

**Submitter :** Dr. clark cross

**Date:** 07/11/2007

**Organization :** uab

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

Dear Ms. Norwalk:

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Thank you for your consideration of this serious matter.

Clark Cross M.D.

**Submitter :** Dr. Lydia Conlay  
**Organization :** American Society of Anesthesiologists  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

**GENERAL**

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

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

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**Submitter :** Dr. Tom Webb

**Date:** 07/11/2007

**Organization :** Dr. Tom Webb

**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 :** Edgar Celis  
**Organization :** Edgar Celis  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

GENERAL

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

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

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Thank you for your consideration of this serious matter.

Edgar Celis, MD

**Submitter :** Dr. Jeff Gardner

**Date:** 07/11/2007

**Organization :** Dr. Jeff Gardner

**Category :** Physician

**Issue Areas/Comments**

GENERAL

GENERAL

See Attachment

CMS-1385-P-1081-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,  
Jeff Gardner, MD

**Submitter :** Dr. Alexis Carras

**Date:** 07/11/2007

**Organization :** Dr. Alexis Carras

**Category :** Physician

**Issue Areas/Comments**

**GENERAL**

GENERAL

I'm writing to request your support for medicare physician reimbursement increases. Maryland is finding it more and more difficult to attract good quality physicians. If medicare reimbursement increases, it may help with this situation.



**Submitter :** Dr. Russell Graf  
**Organization :** Physicians Anesthesia Service  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

GENERAL

GENERAL

See Attached

CMS-1385-P-1083-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.

**Submitter :** Dr. Ralph Fillmore  
**Organization :** Anesthesia Consultants Medical Group  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

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

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

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

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

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Thank you for your consideration of this serious matter.

Ralph B. Fillmore, M.D.

**Submitter :** Dr. christopher oneill  
**Organization :** Dr. christopher oneill  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

GENERAL

See Attachment:

Please halt the continued cuts in re-imburement. We need to at least keep pace with the increased cost of living and inflation. Private insurers continue to make paltry (if any) increases in re-imburement as well and often use medicare as a guide. We are paid pennies on the dollar as it is. Continued cuts will lead to animosity and a decrease in quality personnel going into our field and medicine as a whole.

**Submitter :** Dr. Jeff WeinsteinA

**Date:** 07/11/2007

**Organization :** ASA

**Category :** Physician

**Issue Areas/Comments**

**GENERAL**

**GENERAL**

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

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

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Thank you for your consideration of this serious matter.

**Submitter :** Dr. John Helmick

**Date:** 07/11/2007

**Organization :** Physicians Anesthesia Service, Inc

**Category :** Physician

**Issue Areas/Comments**

**GENERAL**

GENERAL

See Attachment

CMS-1385-P-1087-Attach-1.DOC

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

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

Dear Ms. Norwalk:

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Thank you for your consideration of this serious matter.

**Submitter :** Dr. Tsung lin

**Date:** 07/11/2007

**Organization :** Physicians Anesthesia Service, Inc

**Category :** Physician

**Issue Areas/Comments**

**GENERAL**

GENERAL

See Attachment

CMS-1385-P-1088-Attach-1.DOC



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

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

Dear Ms. Norwalk:

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

When the RBRVS was instituted, it created a huge payment disparity for anesthesia care, mostly due to significant undervaluation of anesthesia work compared to other physician services. Today, more than a decade since the RBRVS took effect, Medicare payment for anesthesia services stands at just \$16.19 per unit. This amount does not cover the cost of caring for our nation's seniors, and is creating an unsustainable system in which anesthesiologists are being forced away from areas with disproportionately high Medicare populations.

In an effort to rectify this untenable situation, the RUC recommended that CMS increase the anesthesia conversion factor to offset a calculated 32 percent work undervaluation—a move that would result in an increase of nearly \$4.00 per anesthesia unit and serve as a major step forward in correcting the long-standing undervaluation of anesthesia services. I am pleased that the Agency accepted this recommendation in its proposed rule, and I support full implementation of the RUC's recommendation.

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

Thank you for your consideration of this serious matter.

**Submitter :** Dr. Alfonso Lopez  
**Organization :** Physicians Anesthesia Service  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

GENERAL

See Attachment

CMS-1385-P-1089-Attach-1.DOC

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

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

Dear Ms. Norwalk:

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

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Thank you for your consideration of this serious matter.

**Submitter :** Dr. Jennifer Mogan  
**Organization :** Anesthesia Associates of Rochester  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

**GENERAL**

Leslie V. Norwalk, Esq.

Acting Administrator

Centers for Medicare and Medicaid Services

Attention: CMS-1385-P

P.O. Box 8018

Baltimore, MD 21244-8018

Re: CMS-1385-P

Anesthesia Coding (Part of 5-Year Review)

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Thank you for your consideration of this serious matter.

Sincerely,  
Jennifer Mogan, MD

**Submitter :** Dr. James Bridges

**Date:** 07/11/2007

**Organization :** Dr. James Bridges

**Category :** Physician

**Issue Areas/Comments**

**GENERAL**

GENERAL

cms-1385-p

CMS-1385-P-1091-Attach-1.DOC

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

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

Dear Ms. Norwalk:

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Thank you for your consideration of this serious matter.

**Submitter :**

**Date:** 07/11/2007

**Organization :** The Mount Sinai 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.

Sincerely yours,

Dean Laochamroonvorapongse M.D.,M.P.H.

**Submitter :**

**Date:** 07/11/2007

**Organization :**

**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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**Submitter :** Dr. Charles Cowles  
**Organization :** Univ of Texas Houston  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

GENERAL

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. Brian Vaughan  
**Organization :** Dr. Brian Vaughan  
**Category :** Individual

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

**GENERAL**

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

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

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Thank you for your consideration of this serious matter.

**Submitter :** Dr. Shari Matvey  
**Organization :** Physicians Anesthesia Service, Inc.  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

GENERAL

See Attachment

CMS-1385-P-1096-Attach-1.DOC

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

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

Dear Ms. Norwalk:

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Thank you for your consideration of this serious matter.

**Submitter :** Dr. Grace Sta Rinala  
**Organization :** Physicians Anesthesia Service  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

GENERAL

See Attached

CMS-1385-P-1097-Attach-1.DOC

#1097

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

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

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Thank you for your consideration of this serious matter.

**Submitter :** Dr. Andrew F. Stasic  
**Organization :** American Society of Anesthesiologists  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

GENERAL

See Attachment

CMS-1385-P-1098-Attach-1.DOC

11 July 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:

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Thank you for your consideration of this serious matter.

Sincerely,

Andrew F. Stasic, M.D.



**Submitter :** Dr. Daphne Lenox  
**Organization :** Dr. Daphne Lenox  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**Resource-Based PE RVUs**

**Resource-Based PE RVUs**

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

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

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Thank you for your consideration of this serious matter.

Daphne M. Lenox

**Submitter :** Dr. Brett Wolff  
**Organization :** Washington University School of Medicine  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

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

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

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

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

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Thank you for your consideration of this serious matter.

Brett Wolff, M.D.  
Assistant Professor  
Department of Anesthesiology  
Washington University School of Medicine

**Submitter :** Dr. Blake Reuter  
**Organization :** Dr. Blake Reuter  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

**GENERAL**

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

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

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Thank you for your consideration of this serious matter.

**Submitter :** Dr. Thomas Schmidt  
**Organization :** Physicians Anesthesia Service, Inc.  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

GENERAL

See Attachment

CMS-1385-P-1102-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.

**Submitter :** Dr. Tracy Cotter

**Date:** 07/11/2007

**Organization :** Dr. Tracy Cotter

**Category :** Physician

**Issue Areas/Comments**

**GENERAL**

**GENERAL**

I would encourage you to support the fee increase for anesthesia services.

Thank you for your time.

Tracy Cotter

**Submitter :** Dr. Oluwole Longe  
**Organization :** SUNY Downstate Medical Center  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

GENERAL

See attachment

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTERS FOR MEDICARE AND MEDICAID SERVICES  
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. Benjamin Davis

**Date:** 07/11/2007

**Organization :** Anesthesia Medical Group

**Category :** Physician

**Issue Areas/Comments**

**Background**

Background

Anesthesia Services continue to be undervalued. The only access to care for seniors is available is because of the ability of anesthesia providers to shift the cost of providing services to medicare patients to non medicare payors. That is we overcharge non medicare patients to compensate for underpayment by medicare.

**Submitter :** Dr. Michael Vigoda  
**Organization :** University of Miami  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

**GENERAL**

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

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

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Our population is aging and more and more elderly and "very old" patients are undergoing anesthesia. In the current environment the compensation for caring for older, more frail patients will ultimately affect the market conditions and ultimately limit access for the elderly.

In an effort to rectify this untenable situation, the RUC recommended that CMS increase the anesthesia conversion factor to offset a calculated 32 percent work undervaluation a move that would result in an increase of nearly \$4.00 per anesthesia unit and serve as a major step forward in correcting the long-standing undervaluation of anesthesia services. I am pleased that the Agency accepted this recommendation in its proposed rule, and I support full implementation of the RUC's recommendation.

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Thank you for your consideration of this serious matter.

If you are ever in Miami, I invite you to visit our operating rooms at Jackson Memorial Hospital and see first hand the conditions that we face.

Sincerely,  
Michael Vigoda MD MBA

**Submitter :** Dr. Thomas Sobolewski  
**Organization :** Physicians Anesthesia Service, Inc.  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

GENERAL

See Attachment

CMS-1385-P-1107-Attach-1.DOC

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

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

Dear Ms. Norwalk:

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

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Thank you for your consideration of this serious matter.

**Submitter :** Dr. Laurence Rothstein  
**Organization :** Madison Anesthesiology Consultants, LLP  
**Category :** Physician

**Date:** 07/11/2007

**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.

**Submitter :** Dr. Brent Stewart  
**Organization :** Dr. Brent Stewart  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

**GENERAL**

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

Attention: CMS-1385-P

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**Submitter :** Dr. Craig McFarland

**Date:** 07/11/2007

**Organization :** BAMC

**Category :** Physician

**Issue Areas/Comments**

**GENERAL**

**GENERAL**

Leslie V. Norwalk, Esq.  
Acting Administrator  
Centers for Medicare and Medicaid Services  
Attention: CMS-1385-P  
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Craig C. McFarland MD  
Associate Professor of Anesthesiology  
Uniformed Services University

**Submitter :** Dr. Tom Beris  
**Organization :** Dupage Valley Anesthesiologists  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

**GENERAL**

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

Dr. Tom D. Beris MD



**Submitter :** Dr. Rishi Moorthy  
**Organization :** American Society of Anesthesia  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

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

Payment For Procedures And Services Provided In ASCs

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

**Submitter :**

**Date:** 07/11/2007

**Organization :**

**Category :** Hospital

**Issue Areas/Comments**

**Therapy Standards and Requirements**

**Therapy Standards and Requirements**

RE: COTA and PTA requirements

COTA requirements state: graduation from an accredited OTA curriculum and successful completion of the certification exam administered by NBCOT.

PTA requirements state: 'PTAs be accredited by CAPTE'. Intent is probably graduation from a CAPTE accredited PTA curriculum.

Question: Will there be a completion of examination requirement for PTAs?

The examination requirement will assure that the individual graduated from a PTA program and also meets requirements for PTA. There are states that require it for PTAs.

Since one of the intent is to apply personnel qualifications equally to all, the proposal requires certification exam for COTAs but no exam requirements for PTAs.

The certification requirements of up to 90 days, is a good idea. The first 30 days comes too quickly for the complex patient.

Am glad to see that there is an attempt to make all personnel qualifications equal. It minimizes confusion.

Thank you for the opportunity to respond to the proposed changes.

**Submitter :** Dr. Shannon Sorah

**Date:** 07/11/2007

**Organization :** Dr. Shannon Sorah

**Category :** Physician

**Issue Areas/Comments**

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

Coding-- Additional Codes From 5-Year Review

Dear Ms. Norwalk:

I'm an anesthesiologist who finished residency in 2004. While my career is short it was disheartening to learn the fee schedule and the history of payment decreases for anesthesiologists. We are the physicians at your side during critical moments. We are dependent upon surgeons for our patients since we are not able to recruit our own. therefore, I am writing to express my strongest support for the proposal to increase anesthesia payments under the 2008 Physician Fee Schedule. I am grateful that CMS has recognized the gross undervaluation of anesthesia services, and that the Agency is taking steps to address this complicated issue.

When the RBRVS was instituted, it created a huge payment disparity for anesthesia care, mostly due to significant undervaluation of anesthesia work compared to other physician services. Today, more than a decade since the RBRVS took effect, Medicare payment for anesthesia services stands at just \$16.19 per unit. This amount does not cover the cost of caring for our nation s seniors, and is creating an unsustainable system in which anesthesiologists are being forced away from areas with disproportionately high Medicare populations.

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Thank you for your consideration of this serious matter.

**Submitter :** Dr. Cynthia Nkana

**Date:** 07/11/2007

**Organization :** American Society of Anesthesiology

**Category :** Physician

**Issue Areas/Comments**

**GENERAL**

GENERAL

WITH THE AGING OF THE U.S POPULATION AS AN ANESTHESIOLOGIST I AM CARING FOR A MORE ELDERLY POPULATION WITH MORE COMPLEX MEDICAL PROBLEMS. ALL PAIETNTS RECEIVE THE SAME EXPERT CARE. WE AS A SPECIALTY HAVE HAD OUR PRACTICES DEVALUED YET WE ARE EXPECTED TO CARE FOR THISMORE MEDICALLY COMPLEX GROUP OF PEOPLE. THE MAINTENANCE OF LIFE DURING SURGERY DEMANDS A FAIR MARKET VALUE.

**Submitter :** dan wajsman  
**Organization :** dan wajsman  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

**GENERAL**

No other physician besides anesthesiologists receive such low compensation for medicare work---about 25% of what we would expect for same service from insurance.....this difference is far greater then what surgeons or primary care doctors get between insurance and medicare payment---why would medicare regard anesthesia services for patients as so unimportant???

For working from 7 am to 5 pm, doing 3 medicare cases of 2.5 hours each i would gross about \$800. From that take 5% for collection fees--now i have \$760. Overhead for that day (malpractice, office, insurance,staff, etc) is another 15-20%--now i have \$600. I then pay income tax at 33%--so i have \$400 for working 10 hour day. About \$50 an hour----i pay alot more then that for a car mechanic. Why are medical specialist who have huge student loans, huge responsibility, valued far below car mechanics by CMS????

I have great respect for my mechanic----i expect the same from CMS at a minimum. My mechanic did not go to school for 12 years after high school either and owe \$200,000 in educational loans----shame on CMS if anesthesia payments are not increased.

How many professionals do you work with who have our level of education and responsibility and make \$50 an hour????Average home in this are is \$500,000???? Should anesthesiologists be forced to rent apartments the rest of our lives???

I love my job, but for \$50 an hour I can not afford to treat medicare patients and live a decent life, pay to have a home or family...in Northern California, in Bay area \$50 an hour is what one would pay for skilled labor. Nurses make alot more then that, all professionals make more then double that.....CMS needs to adress this as soon as possible, or we will suffer, and medicare patients will have to find other sources of anesthesa services.

**Submitter :** Dr. Aneeta Bhatia  
**Organization :** American Society Anesthesiology  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

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

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

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

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

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Thank you for your consideration of this serious matter.

**Submitter :**

**Date: 07/11/2007**

**Organization :**

**Category : Physician**

**Issue Areas/Comments**

**GENERAL**

**GENERAL**

Agree with proposed

**Submitter :** Dr. Brett Simon  
**Organization :** Dr. Brett Simon  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

GENERAL

please see attached letter for comment on CMS-1385-P

Brett A. Simon, MD, PhD

CMS-1385-P-1119-Attach-1.PDF





**Johns Hopkins  
Anesthesiology and  
Critical Care Medicine**

600 North Wolfe Street, Tower 711  
Baltimore, MD 21287-8711  
(410) 614-1515/ FAX (410) 955-0994  
bsimon@jhmi.edu

Brett A. Simon, M.D., Ph.D.  
*Associate Professor  
Vice Chair for Faculty Development  
Chief, Division of Adult Anesthesia*

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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Thank you for your consideration of this serious matter.

Brett A. Simon, MD, PhD

**Submitter :** Dr. Dickson Wu  
**Organization :** Rush North Shore Medical Center  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

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

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

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

Dickson Wu, M.D.

**Submitter :** Dr. James Harper

**Date:** 07/11/2007

**Organization :** Dr. James Harper

**Category :** Physician

**Issue Areas/Comments**

**Resource-Based PE RVUs**

Resource-Based PE RVUs

Strongly support raise in anesthesia payment rate.

James D. Harper, M.D.

**Submitter :** Dr. Kathleen Parr  
**Organization :** Dr. Kathleen Parr  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

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

Coding-- Additional Codes From 5-Year Review  
See Attachment

**Submitter :** Mrs. Karen DiPietro

**Date:** 07/11/2007

**Organization :** Mrs. Karen DiPietro

**Category :** Individual

**Issue Areas/Comments**

**GENERAL**

GENERAL

I am in support of increasing the anesthesia reimbursement to physicians. The previous rate has been too low for too many years.

**Submitter :** Dr. Brian Spence  
**Organization :** Dr. Brian Spence  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

GENERAL

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

Sincerely,  
Brian Spence, M.D.

**Submitter :** Dr. Jeremie Perry  
**Organization :** American Society of Anesthesiologists  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

**GENERAL**

Leslie V. Norwalk, Esq.

Acting Administrator

Centers for Medicare and Medicaid Services

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**Submitter :** Dr. Doug Robison

**Date:** 07/11/2007

**Organization :** Anesthesiologist

**Category :** Physician

**Issue Areas/Comments**

**GENERAL**

**GENERAL**

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Acting Administrator  
Centers for Medicare and Medicaid Services  
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Sincerely,

Dr. Doug Robison



**Submitter :** Dr. Laura Bennett  
**Organization :** American Society of Plastic Surgery  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

**GENERAL**

Leslie V. Norwalk, Esq.

Acting Administrator

Centers for Medicare and Medicaid Services

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In an effort to rectify this untenable situation, the RUC recommended that CMS increase the anesthesia conversion factor to offset a calculated 32 percent work undervaluation—a move that would result in an increase of nearly \$4.00 per anesthesia unit and serve as a major step forward in correcting the long-standing undervaluation of anesthesia services. I am pleased that the Agency accepted this recommendation in its proposed rule, and I support full implementation of the RUC's recommendation.

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

Thank you for your consideration of this serious matter.

**Submitter :** Dr. Travis Slade  
**Organization :** Rocky Mountain Anesthesiology  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

GENERAL

I am writing to encourage your organization to vote affirmative in increasing the RVU compensation for Anesthesiology. There has been a chronic underpayment for these services by Medicaid and Medicare for years. This will help to make up that gap.

I find it ironic on the day I performed a very challenging anesthetic for coronary artery bypass grafting, I paid \$580 to my plumber for 5 hours of work and received less for a very difficult and lengthy open heart surgical anesthetic. While one can argue the value of a good plumber is significant, how can one say it is more valuable than the excellent care I gave a very sick patient that day? There is an undervaluing of Anesthesia services inherent in your reimbursement rates and I strongly urge you to help correct this as soon as possible.

Sincerely yours,

Travis Slade M.D.

**Submitter :** Dr. Jenny Geracci  
**Organization :** University of Nebraska Anesthesiology  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

**GENERAL**

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

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

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Thank you for your consideration of this serious matter.

Jenny Geracci  
Assistant Professor and Director of Cardiac Anesthesia, University of Nebraska Medical Center

**Submitter :** Dr. Satya Krishna Ramachandran  
**Organization :** University of Michigan Hospital  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

**GENERAL**

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

Dr Satya Krishna Ramachandran

**Submitter :** Dr. Ted Noel  
**Organization :** JLR Medical Group  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

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

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

The pay increase is long overdue. Current Medicare payment rates force our group to employ CRNA's at a loss. Private patients subsidize Medicare patients to make up the loss. If our practice was 100% Medicare, we would have to close our anesthesia practice at current payment rates.

**Submitter :** jeffrey sugarman  
**Organization :** jeffrey sugarman  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

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Leslie V. Norwalk, Esq.  
Acting Administrator  
Centers for Medicare and Medicaid Services  
Attention: CMS-1385-P  
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**Submitter :** Jay Horrow  
**Organization :** Jay Horrow  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**Resource-Based PE RVUs**

Resource-Based PE RVUs

Leslie V. Norwalk, Esq.  
Acting Administrator  
Centers for Medicare and Medicaid Services  
Attention: CMS-1385-P  
P.O. Box 8018  
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Thank you for your consideration of this serious matter.

Sincerely,

Jay Horrow, MD

**Submitter :** Dr. Julie Warden  
**Organization :** American Society of Anesthesiologists  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

**GENERAL**

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Thank you for your consideration of this serious matter.

Julie Warden



**Submitter :** Dr. alessia pedoto  
**Organization :** memorial sloan-kettering cancer center  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

**GENERAL**

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Acting Administrator  
Centers for Medicare and Medicaid Services  
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**Submitter :** Dr. Jim Dirting  
**Organization :** Porter and Sone and associates  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

**GENERAL**

Dear Medicare

I am an anesthesiologist and think a pay raise is more than justified. I have much schooling; 4years college,4 years medical school and 4 years post doctoral training. Medicare pays me LESS per hour than a massage therapist or a personal trainer you can get at a health club. We SAVE LIVES! We work at ALL hours of the day and night,weekends and Holidays.

Please help our specialty as fewer and fewer medical students are choosing to do an anesthesia training program because our reimbursement is so poor. It will be very difficult to take care of the aging population without enough qualified anesthesiologists.

Also, there will come a point where the pay is so low and the risks are so high that many anesthesiologists are discussing not taking medicare patients.

Please raise our rates

Thanks

Jim Dirting MD

**Submitter :** Dr. Howard Davis

**Date:** 07/11/2007

**Organization :** Dr. Howard Davis

**Category :** Individual

**Issue Areas/Comments**

**GENERAL**

**GENERAL**

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Acting Administrator  
Centers for Medicare and Medicaid Services  
Attention: CMS-1385-P  
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Sincerely,  
Howard Davis, M.D.

**Submitter :** Dr. C HARDY

**Date:** 07/11/2007

**Organization :** GULF COAST ANESTHESIA

**Category :** Physician

**Issue Areas/Comments**

**GENERAL**

**GENERAL**

An increase is certainly long overdue! With the cost of living continuing to rise, and as our hours become longer, patients sicker and more complex while our incomes have continued to go down; our quality of life has eroded and also has our job satisfaction. The baby boomer MDs are approaching retirement and the number of physicians continue to decline and the problem will only get worse. With poorer working conditions and declining income, there is decreasing incentive to go into medicine. Maintaining competitive incomes is imperative to maintaining an adequate work force to meet the increasing societal demands on health care practitioners.

Thank you.

C. Hardy, M.D.

**Submitter :** Dr. Yevgeniy Printsev  
**Organization :** Stamford Anesthesiology Services  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

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

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

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

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Thank you for your consideration of this serious matter.

**Submitter :** Dr. Mitch Minana

**Date:** 07/11/2007

**Organization :** Dr. Mitch Minana

**Category :** Physician

**Issue Areas/Comments**

**Background**

**Background**

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.

Mitch Minana, MD

**Submitter :** Dr. Frank Johnson  
**Organization :** Frank R Johnson, MD, PC  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

GENERAL

July 11, 2007

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

Sincerely yours,  
(signed)  
Frank R Johnson, MD  
97 Park Avenue  
Bronxville, NY 10708  
Email at frankjohnson@aol.com

CMS-1385-P-1141-Attach-1.DOC

July 11, 2007

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

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Sincerely yours,  
(signed)  
Frank R Johnson, MD  
97 Park Avenue  
Bronxville, NY 10708  
Email at frankrjohnson@aol.com



**Submitter :** Dr. Charles Cote  
**Organization :** Massachusetts General Hospital  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

**GENERAL**

As an academic anesthesiologist with more than 30 years experience I wish to comment on a mJOR economic issue that is currently decimating acadmeic anesthesiology and our ability to teach and traqin our residents. In an acadmeic environment the salary structure is always significantly lower than private practice for a variety of reasons but one major one is the reimbursment for patient care. University and academic hospitals often receive those patient populations that no one else wants to care for and we never turn them away. Thus if reimbursement is disproportionately low the privat e physicians tend to weed out those with insurance and send the less insured to us. Obvioulsy our salary has to come from somewhere but what has happened is that the difference between academic and private practice has become so great that we struggle every day to retain excellent teaching faculty and the ability to provide adequate salary support for young faculty. The net result is erosion of faculty, inabilityu to replaxce them and eventual loss of all acadademic anesthesia. I urge you to make the paymetns we receive fair by passing the proposed increase in unit value for anesthesia services. At present the current rate of reimbursment, minus my costs for insurance make my hourly fee less than my electrician or plumber!

**Submitter :** Dr. Neil Lipke  
**Organization :** Amer, Soc. of Anesthesiologists  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

**GENERAL**

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Acting Administrator  
Centers for Medicare and Medicaid Services  
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**Submitter :** Michael Stella

**Date:** 07/11/2007

**Organization :** Michael Stella

**Category :** Physician

**Issue Areas/Comments**

**GENERAL**

GENERAL

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Acting Administrator  
Centers for Medicare and Medicaid Services  
Attention: CMS-1385-P  
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**Submitter :** Dr. RICHA WARDHAN  
**Organization :** YALE ANESTHESIOLOGY  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

**GENERAL**

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In an effort to rectify this untenable situation, the RUC recommended that CMS increase the anesthesia conversion factor to offset a calculated 32 percent work undervaluation a move that would result in an increase of nearly \$4.00 per anesthesia unit and serve as a major step forward in correcting the long-standing undervaluation of anesthesia services. I am pleased that the Agency accepted this recommendation in its proposed rule, and I support full implementation of the RUC's recommendation.

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

Thank you for your consideration of this serious matter.

sincerely,

Richa Wardhan

**Submitter :** Dr. Eric Huczko  
**Organization :** University of California San Francisco  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

**GENERAL**

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

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

Dear Ms. Norwalk:

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**Submitter :** Dr. Thomas Bladek  
**Organization :** Medical Anesthesiology Associates, P.C.  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

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Thank you for your consideration of this serious matter.

Thomas R. Bladek, M.D.  
Chairman

**Submitter :** Dr. Charles Michael Crowder  
**Organization :** Washington University School of Medicine  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

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Thank you for your consideration of this serious matter.

**Submitter :** Dr. Steven Barker  
**Organization :** University of Arizona College of Medicine  
**Category :** Physician

**Date:** 07/11/2007

**Issue Areas/Comments**

**GENERAL**

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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.

I am the chairman of an academic anesthesia department that has a patient mix of 60% federal payers. Our future survival depends on correcting the disparity in Medicare payments to anesthesiologists, who are currently undervalued with respect to other specialties. In addition, we need your help in repairing the "Anesthesia Teaching Rule," which cuts our Medicare payments in half in the academic setting.

When the RBRVS was instituted, it created a huge payment disparity for anesthesia care, 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 \$16.19 per unit, whereas the average HMO payment in our department is \$55 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.

Thank you for your consideration of this serious matter.

Sincerely,

Steven J. Barker, PhD, MD  
Professor and Chair, Anesthesiology  
University of Arizona College of Medicine



**Submitter :**

**Date:** 07/11/2007

**Organization :**

**Category :** Individual

**Issue Areas/Comments**

**GENERAL**

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