

Submitter : Dr. Candace Metcalf
Organization : Dr. Candace Metcalf
Category : Physician

Date: 07/25/2007

Issue Areas/Comments

GENERAL

GENERAL

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

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

Dear Ms. Norwalk:

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

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

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

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

Thank you for your consideration of this serious matter.

Candace Metcalf, D.O.

Submitter : Dr. Donald Martin
Organization : American Society of Anesthesiologists
Category : Physician

Date: 07/25/2007

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
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P.O. Box 8018
Baltimore, MD 21244-8018
Re: CMS-1385-P

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When the RBRVS was instituted, it created a huge payment disparity for anesthesia care, mostly due to significant undervaluation of anesthesia work compared to other physician services which occurred in part because: 1) anesthesia services remain 'time based' and so are difficult to compare directly with most other procedural services, and 2) The anesthesia services used as 'crosswalks', to compare with services in other specialties, happened to be some of the lowest values services provided by our specialty. Today, more than a decade since the RBRVS took effect, Medicare payment for anesthesia services stands at just \$16.19 per unit. This amount is currently less than 38% of the amount actually paid by the largest private payers in the state of Pennsylvania! Further, 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 medical care from specialist anesthesiologists, it is imperative that CMS approve the proposal in the Federal Register by fully and immediately implement the anesthesia conversion factor increase as recommended by the RUC.

Thank you for your consideration of this matter which is important in insuring access to surgical and anesthesia services for our nation's seniors.

Submitter : Dr. Jay Tendler, M.D.

Date: 07/25/2007

Organization : Dr. Jay Tendler, M.D.

Category : Physician

Issue Areas/Comments

Resource-Based PE RVUs

Resource-Based PE RVUs

I have been in practice for 25 years and have felt extremely frustrated that Anesthesiology is such a poorly compensated field by Medicare. My surgical colleagues have been able to care for Medicare patients and not feel financially burdened. This has not been the case for anesthesiologists. For years I have taken care of very ill patients who require the most skill and effort, for unreasonably low reimbursement rates.

This issue has been studied under many different methodologies which have consistently demonstrated that anesthesiology is relatively undervalued compared to other medical and surgical specialties. This needs to be corrected---the sooner, the better.

Jay Tendler, MD

Submitter : Dr. Donna Pearce

Date: 07/25/2007

Organization : Columbia University- Harlem Hospital Center

Category : Physician

Issue Areas/Comments

GENERAL

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See Attachment

CMS-1385-P-4081-Attach-1.DOC

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. thomas ryan
Organization : summit anesthesiology
Category : Physician

Date: 07/25/2007

Issue Areas/Comments

TRHCA--Section 108: CAP

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Thank you for your consideration of this serious matter.

Sincerely,
Thomas J. Ryan, M.D.

Submitter : Christopher Gharibo
Organization : NYU Medical Center
Category : Physician

Date: 07/25/2007

Issue Areas/Comments

Ambulance Services

Ambulance Services

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. Herbert Luo
Organization : Associated Anesthesiologists, SC
Category : Physician

Date: 07/25/2007

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
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Thank you for your consideration of this serious matter.

Herbert Luo, MD

Submitter : Dr. Oscar Zagala
Organization : Good Samaritan Hospital
Category : Physician

Date: 07/25/2007

Issue Areas/Comments

GENERAL

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

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Thank you for your consideration of this serious matter.

Sincerely,

Dr. Oscar Zagala
Anesthesiologist

Submitter : Dr. Daniel LaValley
Organization : Duke University Dept. of Anesthesiology
Category : Physician

Date: 07/25/2007

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 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.

Submitter : Mrs. Freda Harper
Organization : Mrs. Freda Harper
Category : Individual

Date: 07/25/2007

Issue Areas/Comments

GENERAL

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

Submitter : Dr. Timothy Pastore

Date: 07/25/2007

Organization : Dr. Timothy Pastore

Category : Physician

Issue Areas/Comments

GENERAL

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I am an anesthesiologist in Pennsylvania. Our specialty has been exceptionally hard hit by the reductions in the anesthesia work rules and conversion factor by Medicare over the last 20 years. As of now, the Medicare conversion factor for anesthesiologist services is less than 30% of all other third party payors. In Penna. this hits us even harder as we have a comparatively large elderly population. We are unable to recruit young anesthesiologists as a result and thus we are faced with burning ourselves out or relocating to areas with younger populations. This is already occurring and eventually will result in great disruptions in access to care for the elderly. Please consider favorably the proposal to increase the anesthesia conversion factor.

Sincerely,
Timothy Pastore, MD

Submitter : Mrs. Dora Halford
Organization : Mrs. Dora Halford
Category : Individual

Date: 07/25/2007

Issue Areas/Comments

GENERAL

GENERAL

See Attachment

CMS-1385-P-4089-Attach-1.DOC

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

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Submitter :

Date: 07/25/2007

Organization :

Category : Physician

Issue Areas/Comments

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Submitter : Mr. James Rott

Date: 07/25/2007

Organization : Mr. James Rott

Category : Other Health Care Professional

Issue Areas/Comments

Therapy Standards and Requirements

Therapy Standards and Requirements

As a Physical Therapist Assistant who has been adversely effected by the interpretation of regulation CFR484.4, I was dissapointed to see in the new preposed regulation that you have done nothing to change the regulation so that those of us who have qualified by equivelency to take and have passed the board exams in California are still techincally not eligible to provide services to Medicare patients. I have been licensed by the State of California for 17 years now and find it appaling that the proposed regulation for those who started their practice before Jan 1, 2008 reads the same as it did before. The statement in the regulation in part ii for those starting their practice before Jan 1, 2008 that reads "except that these determinations of proficiency do not apply with respect to persons initially licensed by a state or seeking initial qualification as a physical therapist assistant after December 31, 1977" needs to be stricken so that the roughly 2000 of us who qualified by equivelency to take the boards in California and passed can continue to provide the high quality of care to Medicare patients like we were before. By not changing the regulation it is not only illegal to essentially de-license us but also is reducing the amount of providers available to treat Medicare patients and therefore reducing the quality of care available for these patients and increasing the cost of healthcare. It is also very frustrating to myself and everyone else effected to have worked hard to write everyone imaginable to try and change this illegal interpetation and to be told that the regulation was being re-written to see taxpayers money wasted on essentially nothing being done. I'm sure that if we all banded together and fought this the court system would agree and find in our favor. When did the federal government decide to control the licensing standards of the states? Please change this unfair and illegal interpretation of the regulation so that we can get back to providing the high quality of care to Medicare patients and keep the cost of healthcare affordable. Thank you for your time.

Submitter : Dennis Crane
Organization : Dennis Crane
Category : Physician

Date: 07/26/2007

Issue Areas/Comments

GENERAL

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Thank you for your consideration of this serious matter.

Dennis Crane, DO
Yakima, WA

Submitter : Dr. Robert Whitcomb
Organization : Elmhurst Anesthesiologists
Category : Physician

Date: 07/26/2007

Issue Areas/Comments

GENERAL

GENERAL

Sec attachment

CMS-1385-P-4094-Attach-1.DOC

CMS-1385-P-4094-Attach-2.DOC

CMS-1385-P-4094-Attach-3.DOC

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

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Submitter :

Date: 07/26/2007

Organization :

Category : Physician

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Thank you for your consideration of this serious matter.

Regards,
Christopher Collison, M.D.

Submitter : Dr. Kevin Tarrant

Date: 07/26/2007

Organization : Oregon anesthesiology group

Category : Physician

Issue Areas/Comments

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

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Submitter : Dr. Matthew Hoopes
Organization : Dr. Matthew Hoopes
Category : Physician

Date: 07/26/2007

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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. Thank you for speaking to us at the ASA Legislative Conference in May, I found it very informative and enjoyed your presentation.

Sincerely,

Matthew W. Hoopes, M.D.

Submitter : Dr. Gregory Miller
Organization : Physician Anesthesia Group
Category : Physician

Date: 07/26/2007

Issue Areas/Comments

GENERAL

GENERAL

see attachment

CMS-1385-P-4098-Attach-1.PDF

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

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

Dear Ms. Norwalk:

I am writing to express my strongest support for the proposal to increase anesthesia payments under the 2008 Physician Fee Schedule. Today, more than a decade since the RBRVS took effect, Medicare payment for anesthesia services stands at just \$16.19 per unit.

Medicare payment has not kept pace with our forms of reimbursement. The unit value is currently lower than it was 25 years ago. Because the dollar had considerably more purchasing power in 1982, this amounts to serious erosion in compensation.

Our anesthesia practice is typical of many groups. Medicare accounts for 40% of our time and effort, yet generates only 12% of our collections. I have yet to meet the person who would turn down giving up 12% of their pay in exchange for an additional 21 weeks of vacation. Medicare payments are reaching the point where "walking away", i.e. ceasing participation, will become less and less painful decision. The RUC recommendation to increase the anesthesia unit by almost \$4.00 increase will correct some of the undervaluation.

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,

Gregory Miller

Submitter : Dr. Sean Dobson
Organization : Duke University Health System
Category : Physician

Date: 07/26/2007

Issue Areas/Comments

GENERAL

GENERAL

Leslie V. Norwalk, Esq. Acting Administrator Centers for Medicare and Medicaid Services Attention: CMS-1385-P P.O. Box 8018 Baltimore, MD 21244-8018 Re: CMS-1385-P Anesthesia Coding (Part of 5-Year Review) Dear Ms. Norwalk: I am writing to express my strongest support for the proposal to increase anesthesia payments under the 2008 Physician Fee Schedule. I am grateful that CMS has recognized the gross undervaluation of anesthesia services, and that the Agency is taking steps to address this complicated issue. When the RBRVS was instituted, it created a huge payment disparity for anesthesia care, mostly due to significant undervaluation of anesthesia work compared to other physician services. Today, more than a decade since the RBRVS took effect, Medicare payment for anesthesia services stands at just \$16.19 per unit. This amount does not cover the cost of caring for our nation's seniors, and is creating an unsustainable system in which anesthesiologists are being forced away from areas with disproportionately high Medicare populations. In an effort to rectify this untenable situation, the RUC recommended that CMS increase the anesthesia conversion factor to offset a calculated 32 percent work undervaluation a move that would result in an increase of nearly \$4.00 per anesthesia unit and serve as a major step forward in correcting the long-standing undervaluation of anesthesia services. I am pleased that the Agency accepted this recommendation in its proposed rule, and I support full implementation of the RUC's recommendation. To ensure that our patients have access to expert anesthesiology medical care, it is imperative that CMS follow through with the proposal in the Federal Register by fully and immediately implementing the anesthesia conversion factor increase as recommended by the RUC.

Submitter : Dr. Timothy Gilbert
Organization : University of Maryland School of Medicine
Category : Physician

Date: 07/26/2007

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.

Timothy B Gilbert, MD, MBA, MSc

Submitter : Dr. Tim Adams
Organization : Dr. Tim Adams
Category : Physician

Date: 07/26/2007

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. Eric Knorr
Organization : Dr. Eric Knorr
Category : Physician

Date: 07/26/2007

Issue Areas/Comments

GENERAL

GENERAL

310 W Glenview Dr
Salisbury, NC 28147
July 26, 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)

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Thank you for your consideration of this serious matter.

Sincerely,
Eric J. Knorr, MD
Salisbury, NC

Submitter : Dr. BARBARA LEIGHTON
Organization : WASHINGTON UNIVERSITY IN SAINT LOUIS
Category : Physician

Date: 07/26/2007

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

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

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Thank you for your consideration of this serious matter.

GENERAL

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

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

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CMS-1385-P-4103

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. Gregory Erb
Organization : Midwest Anesthesia Assoc
Category : Physician

Date: 07/26/2007

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.

Gregory Erb, M.D.

Submitter : Dr. Igor Kravchenko

Date: 07/26/2007

Organization : Dr. Igor Kravchenko

Category : Physician

Issue Areas/Comments

GENERAL

GENERAL

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

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Anesthesia Coding (Part of 5-Year Review)

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Thank you for your consideration of this serious matter.

Submitter : Dr. Peter B. Sakas Sakas
Organization : Dubuque Anesthesia
Category : Physician

Date: 07/26/2007

Issue Areas/Comments

GENERAL

GENERAL

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

Re: CMS-1385-P

Anesthesia Coding (Part of 5-Year Review)

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Thank you for your consideration of this serious matter.

Dr. Peter B. Sakas

Submitter : Dr. Anthony Gigliobianco
Organization : Northwest anesthesia and Pain
Category : Physician

Date: 07/26/2007

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. Billye Gosnell
Organization : Northwest Anesthesia and Pain
Category : Physician

Date: 07/26/2007

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. Naushaba Habib
Organization : Northwest Anesthesia and Pain
Category : Physician

Date: 07/26/2007

Issue Areas/Comments

GENERAL

GENERAL

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

Re: CMS-1385-P

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Thank you for your consideration of this serious matter.

Submitter : Mr. Marvin mason
Organization : Mr. Marvin mason
Category : Individual

Date: 07/26/2007

Issue Areas/Comments

GENERAL

GENERAL

CMS-1385-P Support the proposal to increase anesthesia payments under the 2008 Physician Fee Schedule.

Submitter : Dr. Joseph Kuang
Organization : Northwest Anesthesia and Pain
Category : Physician

Date: 07/26/2007

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. Ramachan Lahori
Organization : Northwest Anesthesia and Pain
Category : Physician

Date: 07/26/2007

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 : Mrs. Deborah Mason

Date: 07/26/2007

Organization : Mrs. Deborah Mason

Category : Individual

Issue Areas/Comments

GENERAL

GENERAL

CMS 1385P I support the proposal to increase anesthesia payments under the 2008 Physician Fee Schedule.

Submitter : Dr. King Lai
Organization : Northwest Anesthesia and Pain
Category : Physician

Date: 07/26/2007

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. Larry Lessard
Organization : Northwest Anesthesia and Pain
Category : Physician

Date: 07/26/2007

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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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. Joseph Liu
Organization : Northwest Anesthesia and Pain
Category : Physician

Date: 07/26/2007

Issue Areas/Comments

GENERAL

GENERAL

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

Re: CMS-1385-P

Anesthesia Coding (Part of 5-Year Review)

Dear Ms. Norwalk:

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

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Thank you for your consideration of this serious matter.

Submitter : Dr. John Longwell
Organization : Northwest Anesthesia and Pain
Category : Physician

Date: 07/26/2007

Issue Areas/Comments

GENERAL

GENERAL

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

Re: CMS-1385-P

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Thank you for your consideration of this serious matter.

Submitter : Dr. Bing Lu
Organization : Northwest Anesthesia and Pain
Category : Physician

Date: 07/26/2007

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. Alexis Lynley
Organization : Northwest Anesthesia and Pain
Category : Physician

Date: 07/26/2007

Issue Areas/Comments

GENERAL

GENERAL

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

Re: CMS-1385-P

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Thank you for your consideration of this serious matter.

Submitter : Dr. Benjamin Deratzou

Date: 07/26/2007

Organization : Dr. Benjamin Deratzou

Category : Physician

Issue Areas/Comments

GENERAL

GENERAL

see attachment

CMS-1385-P-4120-Attach-1.DOC

CMS-1385-P-4120-Attach-2.TXT

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

Re: CMS-1385-P

Anesthesia Coding (Part of 5-Year Review)

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Thank you for your consideration of this serious matter.

Submitter : Dr. Michelle McLellan
Organization : Northwest Anesthesia and Pain
Category : Physician

Date: 07/26/2007

Issue Areas/Comments

GENERAL

GENERAL

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

Re: CMS-1385-P

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Thank you for your consideration of this serious matter.

Submitter : Dr. charles hearn
Organization : Dr. charles hearn
Category : Individual

Date: 07/26/2007

Issue Areas/Comments

Impact

Impact

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. Leslie Milde
Organization : Mayo Clinic
Category : Physician

Date: 07/26/2007

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.

Leslie Milde, M.D.
Professor of Anesthesiology

Submitter : Dr. David Berger

Date: 07/26/2007

Organization : Dr. David Berger

Category : Physician

Issue Areas/Comments

GENERAL

GENERAL

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Thank you for your consideration of this serious matter.

Submitter : Dr. Thomas Scozzafava

Date: 07/26/2007

Organization : Dr. Thomas Scozzafava

Category : Physician

Issue Areas/Comments

GENERAL

GENERAL

see attachment

CMS-1385-P-4125-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.
Organization : American Society of Anesthesiologists
Category : Physician

Date: 07/26/2007

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. Thomas Scozzafava
Organization : Dr. Thomas Scozzafava
Category : Physician

Date: 07/26/2007

Issue Areas/Comments

GENERAL

GENERAL

see attachment

CMS-1385-P-4127-Attach-1.DOC

4127

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. BobbieJean Sweitzer
Organization : University of Chicago
Category : Physician

Date: 07/26/2007

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.

BobbieJean Sweitzer, M.D.

Submitter :

Date: 07/26/2007

Organization :

Category : Academic

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.

Samuel Clay

Submitter : Dr. Martin Szafran
Organization : University of Chicago
Category : Physician

Date: 07/26/2007

Issue Areas/Comments

GENERAL

GENERAL

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

Re: CMS-1385-P

Anesthesia Coding (Part of 5-Year Review)

Dear Ms. Norwalk:

I am writing to express my strongest support for the proposal to increase anesthesia payments under the 2008 Physician Fee Schedule. Along with my patients, 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 10 years 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.

I believe that the proposed increase of nearly \$4.00 per anesthesia unit would 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. It will go a long way towards ensuring access to expert anesthesiology care in the future.

I urge CMS to 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.

M. Szafran, M.D.

Submitter : Dr. Wendy Binstock
Organization : American Society of Anesthesiologist
Category : Physician

Date: 07/26/2007

Issue Areas/Comments

GENERAL

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Thank you for your consideration of this serious matter.

Submitter : Mr. Kevin Paige

Date: 07/26/2007

Organization : NA

Category : Individual

Issue Areas/Comments

GENERAL

GENERAL

As an individual, I am happy to see the recommendations that medicare payments are being adjusted upwards to reflect adequate compensation for anesthesiologists - a move which is long overdue. In order to provide the best medical care to our elderly population, we need to attract and retain the best physicians. Higher compensation will continue to draw the most talented people to the medical field, promoting better care, greater discovery in research and better overall satisfaction for patients. As you know, anesthesiologists play an integral role in the care provided to our elderly, especially given the increased use of invasive procedures and surgeries to improve their health. I am encouraged to see my tax dollars at work in the correct manner, putting health care dollars in the hands of physicians who deliver the care.

Submitter : Dr. Charles Collard
Organization : Baylor College of Medicine
Category : Physician

Date: 07/26/2007

Issue Areas/Comments

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

Coding-- Additional Codes From 5-Year Review

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

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

Regards,

C. David Collard, MD
Professor & Vice Chair
Baylor College of Medicine
Department of Anesthesiology
Texas Heart Institute
6720 Bertner Avenue, Room 0520
MC1-226
Houston, TX 77030

Telephone: 832-355-2666
Fax: 832-355-6500

Submitter : Dr. Saraswathy Shekar
Organization : Dr. Saraswathy Shekar
Category : Physician

Date: 07/26/2007

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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Sara Shekar

Submitter : Dr. Terrence Trentman
Organization : Dr. Terrence Trentman
Category : Physician

Date: 07/26/2007

Issue Areas/Comments

GENERAL

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Acting Administrator
Centers for Medicare and Medicaid Services
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Submitter : Dr. Craig Wagner

Date: 07/26/2007

Organization : South Jersey Anesthesia and Pain Physicians PC

Category : Physician

Issue Areas/Comments

GENERAL

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Submitter : Dr. Loran Mounir Soliman
Organization : Cleveland Clinic Ohio
Category : Physician

Date: 07/26/2007

Issue Areas/Comments

GENERAL

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Submitter : Dr. James Berny
Organization : American Society of Anesthesiologists
Category : Physician

Date: 07/26/2007

Issue Areas/Comments

Resource-Based PE RVUs

Resource-Based PE RVUs

Leslie V. Norwalk, Esq.
Acting Administrator
Centers for Medicare and Medicaid Services
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P.O. Box 8018
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Dr. James Berny MD

Submitter : Dr. Eric Buehler
Organization : American Society of Anesthesiologists
Category : Health Care Professional or Association

Date: 07/26/2007

Issue Areas/Comments

GENERAL

GENERAL

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Submitter : Mr. Peter Kearns CRNA
Organization : American Association of Nurse Anesthetists
Category : Nurse Practitioner

Date: 07/26/2007

Issue Areas/Comments

Resource-Based PE RVUs

Resource-Based PE RVUs

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

Peter Kearns CRNA



Submitter : Mr. Joseph Giampietro CRNA
Organization : American Association of Nurse Anesthetists
Category : Nurse Practitioner

Date: 07/26/2007

Issue Areas/Comments

Resource-Based PE RVUs

Resource-Based PE RVUs

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Thank you for your consideration of this serious matter.

Joseph Giampietro CRNA

Submitter : Miss. Tracy Osborn
Organization : American Association of Nurse Anesthetists
Category : Nurse Practitioner

Date: 07/26/2007

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Resource-Based PE RVUs

Resource-Based PE RVUs

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Tracy Osborn CRNA

Submitter : Mrs. Dawn Holloway
Organization : American Association of Nurse Anesthetists
Category : Nurse Practitioner

Date: 07/26/2007

Issue Areas/Comments

Resource-Based PE RVUs

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Dawn Holloway CRNA

Submitter : Dr. Chinubhai Patel
Organization : Preferred Anesthesia Consultants, P.C.
Category : Physician

Date: 07/26/2007

Issue Areas/Comments

GENERAL

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Leslic 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,

Chinubhai Patel, MD
Preferred Anesthesia Consultants, P.C.

Submitter : Dr. Seetharamaiah Atluri
Organization : Preferred Anesthesia Consultants, P.C.
Category : Physician

Date: 07/26/2007

Issue Areas/Comments

GENERAL

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Sincerely,

Seetharamaiah Atluri, M.D.

Submitter : Dr. Robert Davis
Organization : American Academy of Pediatric Dentists
Category : Physician

Date: 07/26/2007

Issue Areas/Comments

Resource-Based PE RVUs

Resource-Based PE RVUs

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Dr. Robert Davis DMD

Submitter : Dr. David Peng

Date: 07/26/2007

Organization : Dr. David Peng

Category : Physician

Issue Areas/Comments

GENERAL

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

Date: 07/26/2007

Issue Areas/Comments

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Sincerely,

Robert Goldstrom, M.D.

Submitter : Dr. Pardha Kanagala
Organization : Preferred Anesthesia Consultants, P.C.
Category : Physician

Date: 07/26/2007

Issue Areas/Comments

GENERAL

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Centers for Medicare and Medicaid Services
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Sincerely,

Pardha Kanagala, M.D.

Submitter : Dr. zoya mehta
Organization : MACC
Category : Physician

Date: 07/26/2007

Issue Areas/Comments

GENERAL

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Acting Administrator
Centers for Medicare and Medicaid Services
Attention: CMS-1385-P
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Rc: CMS-1385-P

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Zoya Mehta M.D.

Submitter : Dr. Terrence Zipfel
Organization : American Society of Otolaryngology
Category : Physician

Date: 07/26/2007

Issue Areas/Comments

Resource-Based PE RVUs

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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, disabled, and handicapped, and is creating an unsustainable system in which anesthesiologists are being forced away from areas with disproportionately high Medicare populations.

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

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

Thank you for your consideration of this serious matter.

Dr. Terrence Zipfel MD

Submitter : Dr. Venkateswara Kanubaddi
Organization : Preferred Anesthesia Consultants, P.C.
Category : Physician

Date: 07/26/2007

Issue Areas/Comments

GENERAL

GENERAL

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

Venkateswara Kanubaddi, M.D.

Submitter : Dr. D'Andrae Douse
Organization : Preferred Anesthesia Consultants, P.C.
Category : Physician

Date: 07/26/2007

Issue Areas/Comments

GENERAL

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Sincerely,

D'Andrae Douse, M.D.

Submitter : Dr. Gerald Snyder
Organization : Preferred Anesthesia Consultants, P.C.
Category : Physician

Date: 07/26/2007

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Sincerely,

Gerald Snyder, M.D.

Submitter : Dr. Kian Porter
Organization : Preferred Anesthesia Consultants, P.C.
Category : Physician

Date: 07/26/2007

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Sincerely,

Kian Porter, M.D.

Submitter : Dr. James DeSimone
Organization : Preferred Anesthesia Consultants, P.C.
Category : Physician

Date: 07/26/2007

Issue Areas/Comments

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Sincerely,

James DeSimone, M.D.

Submitter : Dr. Rao Gummadi
Organization : Preferred Anesthesia Consultants, P.C.
Category : Physician

Date: 07/26/2007

Issue Areas/Comments

GENERAL

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Sincerely,

Rao Gummadi, M.D.

Submitter : Dr. Zoya Mehta

Date: 07/26/2007

Organization : MACC

Category : Physician

Issue Areas/Comments

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Acting Administrator
Centers for Medicare and Medicaid Services
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ZOya Mehta

Submitter : Dr. Louis Knoble
Organization : Preferred Anesthesia Consultants, P.C.
Category : Physician

Date: 07/26/2007

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Sincerely,

Louis Knoble, M.D.

Submitter : Dr. Brian Jenkins
Organization : Preferred Anesthesia Consultants, P.C.
Category : Physician

Date: 07/26/2007

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Sincerely,

Brian Jenkins, M.D.

Submitter : Dr. Joseph Yurkanin
Organization : Preferred Anesthesia Consultants, P.C.
Category : Physician

Date: 07/26/2007

Issue Areas/Comments

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Joseph Yurkanin, M.D.

Submitter : Dr. Michael Yurkanin
Organization : Preferred Anesthesia Consultants, P.C.
Category : Physician

Date: 07/26/2007

Issue Areas/Comments

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Sincerely,

Michael Yurkanin, M.D.

Submitter : Dr. Edward Tompa
Organization : Preferred Anesthesia Consultants, P.C.
Category : Physician

Date: 07/26/2007

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Edward Tompa, M.D.

Submitter : Dr. Ramabrahmam Gullapalli
Organization : Preferred Anesthesia Consultants, P.C.
Category : Physician

Date: 07/26/2007

Issue Areas/Comments

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Sincerely,

Ramabrahmam Gullapalli, M.D.

Submitter : Dr. Scott Davis

Date: 07/26/2007

Organization : Preferred Anesthesia Consultants, P.C.

Category : Physician

Issue Areas/Comments

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Sincerely,

Scott Davis, M.D.

Submitter : Dr. Venkatarao Vemula
Organization : Preferred Anesthesia Consultants, P.C.
Category : Physician

Date: 07/26/2007

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Sincerely,

Venkatarao Vemula, M.D.

Submitter : Dr. David Donaldson

Date: 07/26/2007

Organization : Preferred Anesthesia Consultants, P.C.

Category : Physician

Issue Areas/Comments

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David Donaldson, M.D.

Submitter : Dr. Ray Tople
Organization : Preferred Anesthesia Consultants, P.C.
Category : Physician
Issue Areas/Comments

Date: 07/26/2007

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

Re: CMS-1385-P
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,

Ray Tople, M.D.

Submitter : Mrs. Marilyn Bowes

Date: 07/26/2007

Organization : N/A

Category : Individual

Issue Areas/Comments

GENERAL

GENERAL

Leslie V. Norwalk, Esq.
Acting Administrator
Centers for Medicare and Medicaid Services
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I'm sure that you're aware that Medicare patients are among the sickest, with the most co-morbidities, and are the most likely to need the very best of anesthesiologists. If we continue to limit reimbursement, will there be anyone at the ready when you or I need a qualified anesthesiologist to attend us for our own procedure? To ensure that 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.

Marilyn R. Bowes

Submitter : Dr. Satya Tummala
Organization : Preferred Anesthesia Consultants, P.C.
Category : Physician

Date: 07/26/2007

Issue Areas/Comments

GENERAL

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Sincerely,

Satya Tummala, M.D.

Submitter : Dr. Alton Liu
Organization : Preferred Anesthesia Consultants, P.C.
Category : Physician

Date: 07/26/2007

Issue Areas/Comments

GENERAL

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Sincerely,

Alton Liu, M.D.

Submitter : Dr. Magdy Toma
Organization : Preferred Anesthesia Consultants, P.C.
Category : Physician

Date: 07/26/2007

Issue Areas/Comments

GENERAL

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Sincerely,

Magdy Toma, M.D.

Submitter : daniel obrien
Organization : daniel obrien
Category : Physician

Date: 07/26/2007

Issue Areas/Comments

GENERAL

GENERAL

see attachment

Submitter : Dr. James Alifimoff
Organization : Preferred Anesthesia Consultants, P.C.
Category : Physician

Date: 07/26/2007

Issue Areas/Comments

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Sincerely,

James Alifimoff, M.D.

Submitter : Dr. Anthony Cheng

Date: 07/26/2007

Organization : Preferred Anesthesia Consultants, P.C.

Category : Physician

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Sincerely,

Anthony Cheng, M.D.

Submitter : Dr. Michael Cozzi
Organization : Preferred Anesthesia Consultants, P.C.
Category : Physician

Date: 07/26/2007

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Sincerely,

Michael Cozzi, M.D.

Submitter : Dr. Gil Mendoza

Date: 07/26/2007

Organization : Preferred Anesthesia Consultants, P.C.

Category : Physician

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Sincerely,

Gil Mendoza, M.D.

Submitter : Dr. Garry Walker
Organization : Preferred Anesthesia Consultants, P.C.
Category : Physician

Date: 07/26/2007

Issue Areas/Comments

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Sincerely,

Garry Walker, M.D.