The Honorable Seema Verma  
Administrator  
Centers for Medicare & Medicaid Services  
U.S. Department of Health and Human Services  
7500 Security Boulevard  
Baltimore, MD 21244

Dear Administrator Verma:

The undersigned organizations are committed to working with the Centers for Medicare and Medicaid Services (CMS) to reduce provider burden and increase Medicare beneficiaries’ access to appropriate care. We applaud CMS for recognizing the problems with the current evaluation and management documentation guidelines and codes and including a significant proposal address them in the CY 2019 physician fee schedule proposed rule. However, we urge CMS to reconsider this proposal to cut and consolidate evaluation and management services, which would severely reduce Medicare patients’ access to care by cutting payments for complex office visits, adversely affecting the care and treatment of patients with complex conditions, and potentially exacerbate physician workforce shortages. **Given the negative impacts of this well-intentioned proposal, we ask that CMS not finalize this concept as proposed, and instead urge CMS to work with stakeholders to identify alternative approaches that would accomplish its goal of reducing paperwork and administrative burden without endangering patient access to care.**

The proposals to consolidate the billing codes for physician evaluation and management so as to pay the same amount for office visits regardless of the complexity of the patient would cut payments for visits that are currently reimbursed at higher levels than simple or routine office visits, penalizing doctors who treat sicker patients or patients with multiple conditions. It is important to note that even small estimated changes in reimbursement will be magnified after physicians or their employers cover overhead business expenses. Additionally, payments from newly proposed add-on codes, which have been put forward with the intention of protecting complex care by making up for severe cuts, would not be sufficient to ensure continued patient access, and moreover the application of new codes to some specialties and not others would effectively result in CMS picking winners and losers.

This proposed approach to reducing paperwork would have unintended consequences for Medicare beneficiaries. To offset the reimbursement cut, some physicians may spend less time with their patients and limit each office visit to one or two problems forcing patients to return for a second additional visit to address additional medical issues. Not only will this result in an additional burden on patients with more copayments and costs associated with time and travel, it will also reduce the quality of care, particularly for patients with complex medical conditions. We are also concerned that this proposal would incentivize physicians to cherry-pick healthy patients to avoid financial losses. It would also severely exacerbate physician shortages by discouraging young physicians from going into careers that provide complex care.

We agree with CMS’ ultimate goal of increasing the amount of time physicians have to spend with patients instead of paperwork and computers, but the collapsing of evaluation and management codes would have an immediate and lasting effect of restricting patient access to care. **We therefore urge CMS not to move forward with the proposal as it currently stands, and instead convene stakeholders to identify other strategies to reduce paperwork and administrative burden that do not threaten patient access to care.** We stand ready to work with you to ensure physicians have the resources they need to provide patients with the high-quality care they deserve. Thank you for your consideration.

Sincerely,
Society for Neuro-Oncology
Society of Gynecologic Oncology
South Carolina Neurological Association
South Carolina Rheumatism Society
State of Texas Association of Rheumatologists
Tennessee Rheumatology Society
Texas Neurological Society
Texas Rheumatology Care
The ALS Association
The Childhood Brain Tumor Foundation
The Headache and Migraine Policy Forum
The Michael J. Fox Foundation for Parkinson's Research
The US Oncology Network
Tourette Association of America
United Spinal Association
Virginia Society of Rheumatologists
Washington Rheumatology Alliance
Washington State Neurological Society
West Virginia Rheumatology State Society
Wisconsin Neurological Society
Wisconsin Rheumatology Association
World Health Education Foundation
Wyoming Neurological Society