

SGO Member Sample Letter for Comments on E&M Code Proposed Changes

(Please personalize your letter by filling in the yellow highlighted sections below and making any other changes to the letter that helps convey your story about how these changes will impact your practice. Please take of the yellow highlighting before you send in your letter. Please place the letter on your practice or personal letterhead)

[DATE]

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

RE: CMS-1693-P

Dear Administrator Verma:

I am a gynecologic oncologist from [REDACTED] and I am writing to share my views with the Centers for Medicare and Medicaid Services (CMS) on the proposed changes to the documentation requirements and payment rates for Evaluation and Management (E&M) codes contained in the 2019 Medicare Physician Fee Schedule Proposed Rule, CMS-1693-P.

[Please add a sentence or two about your practice, the percentage of Medicare patients you treat and the complexity of your patients and how complicated it is to treat women with a gynecologic cancer.]

I appreciate your efforts to reduce the administrative burdens associated with the current E&M documentation requirements. While I support the proposals to change the required documentation of the patient's history to focus only on the interval history since the previous visit and the one that eliminates the requirement for physicians to re-document information that has already been documented in the patient's record by practice staff or by the patient, I do not support the proposed changes in the payments for E&M services in 2019.

I am concerned about the proposed blended payment rate and consolidation of E&M services and the impact of these changes on my patients. *[Please add a sentence of what that patient impact could be, e.g. increased wait times for appts, multiple visits, less office staff for telephone follow-up, etc.]* The proposed payment cuts for office visits for the sickest most complicated patients, penalizes physicians who treat these patients, especially if they are a new patient. It will certainly impact patients with gynecologic cancer. Impact analysis show that my specialties will be cut by more than 16 percent under this proposal.

Gynecologic Oncologists will no longer be able to spend the time they previously devoted to the care of their patients. *[Add a sentence regarding all that you do for your patients.]* Payments from newly proposed add-on codes, proposed to protect complex care by making up for the severe cuts, would not be enough to ensure continued patient access for a practice that predominantly consists of Level 4 & Level 5 patient encounters.

Initial projections applying the new payment rates suggest gynecologic oncologists will experience a significant reduction in Medicare reimbursements for office visits. This new payment scheme will potentially create a significant access to care issue.

If the proposed new payment rates are implemented, it will adversely impact my practice. *[Please state in a few sentences the actions you may have to take if the payments are implemented, for example:*

- *Reduce time for each patient visit and bring patients back repeatedly for visits to address separate issues*
- *Prolong patient wait times for appointments*
- *Stop taking any new Medicare patients*
- *Curtail investments in new office activities and systems to transition to value-based payment models*
- *Accelerate retirement plans*

While I urge you to move forward in a thoughtful manner with the implementation of the proposed changes to the documentation requirements for E&M codes, I also urge you to reconsider and not implement the current payment E&M payment proposal in 2019. Instead, CMS needs to work together with the medical specialty societies and organizations representing health care professionals to develop proposals that do not jeopardize access to care for the nation's sickest and most vulnerable elderly patients.

Sincerely,