

January 12, 2010

The Honorable Senator Harry Reid  
Majority Leader  
U.S. Senate  
S-221, U.S. Capitol  
Washington D.C. 20510

The Honorable Nancy Pelosi  
Speaker  
U.S. House of Representatives  
H-232 U.S. Capitol  
Washington, D.C. 20515

We, the undersigned physician organizations, respectfully request that you include Senator Arlen Specter's amendment, offered to the Senate health care reform bill, to delay the Centers for Medicare and Medicaid Services' (CMS) decision to eliminate payments for consultation service codes in the final health system reform conference agreement or any other legislative vehicle anticipated to expeditiously pass Congress early in this new year. A one-year delay is imperative to ensure that Medicare beneficiaries are not harmed by the disruptions that are occurring now due to the inadequate education and ramp up time for the implementation of this significant new Medicare policy.

In its CY 2010 final physician fee schedule rule, CMS eliminated payments for consultation codes and instructed all physicians to use the hospital admission codes or other applicable new and established patient evaluation and management (E&M) codes in their place.

Consultations, which typically occur when one physician requests an expert opinion from a specialist regarding a particular patient's medical condition and subsequent treatment plan, are an established and critical part of medical practice. Consultations are utilized by virtually all physicians to coordinate care, often for the most medically complex patients and, until now, have been recognized by virtually all payers as distinct medical services. The elimination of consultation codes is a significant change that requires substantial physician and contractor education.

CMS implemented this new policy on January 1<sup>st</sup> having issued initial guidance about how to comply with the new coding and billing procedures only two weeks prior. As a result, there has been inadequate time for physician and contractor education and the new policy has created numerous questions related to billing and claims processing for which Medicare contractors have yet to answer or have issued conflicting information.

Moreover, this new policy change is promulgated by an agency that does not yet have an administrator, and is in direct conflict with congressional efforts to promote the coordination of care. We believe that it undermines the implementation of new care delivery models proposed in pending health care legislation, such as accountable care organizations and the patient centered medical home, that are predicated on the team/consultative approach.

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To address the issues outlined above, we request that you include Senator Specter's amendment to delay implementation of the new policy on consultation codes for one year in the final health care reform conference agreement or any legislative vehicle expected to expeditiously pass the Congress. This one year delay would allow the Secretary to work with the American Medical Association Current Procedural Terminology (CPT) Editorial Panel to modify existing consultation codes or establish new codes to accurately reflect the work of consultation services and to minimize coding errors. A delay will ensure that the impact of this new policy is thoroughly studied and patients and physicians are not negatively impacted by the expedited implementation.

Thank you for your consideration of this request.

Sincerely,

American Academy of Allergy, Asthma and Immunology (AAAAI)  
American Academy of Neurology (AAN)  
American Association of Clinical Endocrinologists (AACE)  
American College of Allergy, Asthma and Immunology (ACAAI)  
American College of Cardiology (ACC)  
American College of Gastroenterology (ACG)  
American College of Rheumatology (ACR)  
American Gastroenterological Association (AGA)  
American Headache Society (AHS)  
American Medical Association (AMA)  
American Medical Group Association (AMGA)  
American Psychiatric Association (APA)  
American Society of Clinical Oncology (ASCO)  
American Society for Gastrointestinal Endoscopy (ASGE)  
American Society of Hematology (ASH)  
American Urological Association (AUA)  
Coalition of State Rheumatology Organizations (CSRO)  
Heart Rhythm Society (HRS)  
Infectious Diseases Society of America (IDSA)  
Joint Council of Allergy, Asthma and Immunology (JCAAI)  
North American Neuro-Ophthalmology Society (NANOS)  
Society for Cardiovascular Angiography and Interventions (SCAI)  
The Endocrine Society (TES)

Attachment

cc: Senator Arlen Specter

**SA 3163.** Mr. SPECTER submitted an amendment intended to be proposed to amendment SA 2786 proposed by Mr. *Reid* (for himself, Mr. *Baucus*, Mr. *Dodd*, and Mr. *Harkin*) to the bill H.R. 3590, to amend the Internal Revenue Code of 1986 to modify the first-time homebuyers credit in the case of members of the Armed Forces and certain other Federal employees, and for other purposes; which was ordered to lie on the table; as follows:

On page 869, between lines 14 and 15, insert the following:

**SEC. 3143. REVISION TO PAYMENT FOR CONSULTATION CODES.**

(a) *Temporary Delay of Elimination of Payment for Consultation Codes.*-- Notwithstanding any other provision of law, the Secretary of Health and Human Services shall not, prior to January 1, 2011, implement any provision contained in a final rule that eliminates or discontinues payment for consultation codes under the physician fee schedule and part B of title XVIII of the Social Security Act.

(b) *Evaluation Period.*--During the period prior to January 1, 2011, the Secretary of Health and Human Services shall consult with the Current Procedural Terminology Editorial Panel of the American Medical Association for the purpose of developing proposals to--

(1) modify existing consultation codes or establish new consultation codes to more accurately reflect the value provided through such consultation services; and

(2) minimize coding errors.