

**NEW PHYSICIAN SURVEY FINDS MEDICARE PAYMENT
CHANGE HURTS CARE COORDINATION EFFORTS**
Medical Organizations Call on CMS to Review Consultation Code Policy

Washington, D.C. — The elimination of Medicare’s consultation codes has had a negative impact on physician efforts to improve care coordination and reduced the treatment options available to Medicare patients, according to a new survey released today by medical specialty societies and the American Medical Association (AMA). Consultation codes are used most frequently by specialists after a patient referral from a primary care physician.

The survey indicates that the approximately 5,500 physicians who completed the survey have been forced to take a number of cost-cutting steps to offset revenue losses associated with the elimination of these codes. [Highlights from the survey](#) include:

- Three out of every ten (30%) have already reduced their services to Medicare patients or are contemplating cost-cutting steps that will impact care.
- One-fifth (20%) have already eliminated or reduced appointments for new Medicare patients.
- Nearly two-fifths (39%) will defer the purchase of new equipment and/or information technology.
- More than one-third (34%) are eliminating staff, including physicians in some cases.
- Following CMS’s suggestions that they no longer need to provide primary care physicians with a written report, about 6% have stopped providing these reports, while nearly another one-fifth (19%) plan to stop providing them.

These are real-world examples of the impact of this policy change on Medicare patients and physician offices in the medical specialties that participated in the survey. After analyzing survey data, representatives of these specialties and the AMA identified several technical improvements that would make the policy more equitable. They joined with 16 other organizations in a [letter](#) outlining their concerns and asking the Centers for Medicare and Medicaid Services (CMS) to review and modify its current policy to prevent further deterioration of care coordination between physicians.

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Editor’s Note: A list of survey participants, quotes and media contact information from participating medical societies follows.

Survey Participants

American Academy of Neurology
American Academy of Otolaryngology
American Association of Clinical Endocrinologists
American College of Cardiology
American College of Gastroenterology
American College of Rheumatology
American Gastroenterological Association
American Medical Association
American Psychiatric Association
American Society of Clinical Oncology

American Society of Gastrointestinal Endoscopy
American Society of Hematology
American Urological Association
Heart Rhythm Society
Infectious Diseases Society of America
Joint Council on Allergy, Asthma and Immunology
Society for Cardiovascular Angiography and Interventions
The Endocrine Society

Quotes from Medical Societies on Survey Findings

American Academy of Neurology (AAN): Since Medicare has stopped paying for consultations, nearly 75% of the neurologist respondents have seen revenues fall by more than 10%. To cope with this loss --- occurring in the face of rising costs of practice --- neurologists are forced to reduce the number of Medicare patients they accept, to reduce the amount of time spent with Medicare patients, and to avoid Medicare patients with complex conditions. AAN President Robert C. Griggs, M.D, FAAN, stated, “Our members have spoken loud and clear on this survey.” *For further information, contact Angela Babb at 651-695-2789.*

American Academy of Otolaryngology – Head and Neck Surgery (AAO-HNS): Among the otolaryngologist – head and neck surgeons who completed the survey, 57% reported they have experienced a more than 20% loss in their total revenue because of the elimination of the consultation codes. This reduction has resulted in concern for treating patients with complex conditions and could lead to fewer new and established Medicare patients obtaining care through the specialty. *For further information, contact Udo Kaja at 703-535-3727.*

American Association of Clinical Endocrinologists (AAACE): Seventy-nine percent of the responding consultants have modified their practices to decrease their exposure to Medicare patients or diminished their reporting mechanisms to primary care physicians as a result of this rule change. Both of these "unintended consequences" are directly antithetical to the spirit of healthcare reform in general. In light of the findings of this survey, the American Association of Clinical Endocrinologists asks that CMS reconsider the ill-conceived consultation code policy of January 1, 2010. *For further information, contact Anita Sumpter at 904-353-7878.*

American College of Cardiology (ACC): “The decision to eliminate the recognition of consultations has made it harder than ever for cardiologists to be appropriately paid for managing complex patients,” said Ralph Brindis, M.D., M.P.H., president of the American College of Cardiology. “This decision impairs the strong collaboration between physicians in the care of patients. The survey results show that physicians are already being forced to cut back on necessary patient care.” *For further information, contact Amy Murphy at 202-375-6476.*

American College of Gastroenterology (ACG): The American College of Gastroenterology is pleased to join numerous medical specialty groups participating in this essential data-gathering initiative. “For patients with digestive disorders, the implications of eliminating consultation codes could mean a more difficult time finding a GI specialist. The decision to stop paying for consultation codes flies in the face of the federal government’s goal of improving communication among providers and reducing unnecessary medical tests,” said Scott M. Tenner, M.D., FACP, Chair of ACG’s National Affairs Committee. *For further information, contact Brad Conway at 301-263-9000.*

American College of Rheumatology (ACR): The elimination of consultation codes has negatively affected 80 percent of the practicing rheumatologists who responded to this survey. Rheumatologists are physicians uniquely trained to treat the nearly 46 million adults and over 300,000 children in the United States who suffer from arthritis and other rheumatic diseases. “Rheumatic diseases are complex, chronic, debilitating and often times life threatening, and specialized care from a rheumatologist is essential to the livelihood of people with rheumatic diseases,” explains ACR President, Stanley B. Cohen, M.D. “By removing consultation service codes, CMS is stating that the advanced training and unique specialty care provided by rheumatologists is not valued.” Additionally, removing reimbursements from specialists will force many rheumatologists to stop seeing Medicare patients – causing a decrease in patient access to quality care. *For further information, contact Antanya A. Chung at 404-633-3777 ext 818.*

American Gastroenterological Association (AGA): “AGA members surveyed indicated that their total revenue stream has decreased as a result of Medicare's decision to eliminate the use of consultation codes,” stated Robert Burakoff, M.D. “Many GI physicians have had to modify their practices as a result, reducing the time spent with Medicare patients, deferring the purchase of new equipment and technology, and eliminating office staff.” *For further information, contact Anne Marie Bicha at 240-482-3223.*

American Medical Association (AMA): “Patient health is best managed when physicians can work together across specialties to coordinate care,” said AMA immediate past president J. James Rohack, M.D. “Twenty percent of patients over age 65 live with five or more chronic illnesses, and managing their care frequently requires primary care physicians to consult with a physician who specializes in the medical or surgical care of their conditions. CMS’s new policy eliminating Medicare consultation codes fails to adequately recognize the additional time and effort involved in these consultations and limits physicians' ability to work together as a comprehensive health care team for their patients.” *For further information contact Heather Lasher Todd at 202-789-7430.*

American Psychiatric Association (APA): “Almost a third of the psychiatrists responding to the survey said they have had to modify their practices because of the elimination of the consultation codes. Over half of these physicians say they have reduced the number of new Medicare patients they will see. This will create a real hardship for Medicare patients, many of whom have chronic medical conditions that can be exacerbated when their psychiatric issues are not treated. Coordination of care between physicians is vital to maintaining the health of our Medicare population.” Attribute to James H. Scully, Jr., M.D., Medical Director and CEO, American Psychiatric Association. *For further information, contact Jaime Valora at 703-907-8562.*

American Society of Clinical Oncology (ASCO): “These results are concerning, both because of what they foreshadow for the oncology workforce and because of their implications for access to cancer care,” said Dr. Allen Lichter, CEO of the American Society of Clinical Oncology. “Eleven percent of oncologists who responded reported they plan to close satellite offices, which often provide critical access points to patients in more remote locations. Fourteen percent plan to retire and more than 30% will eliminate staff, both of which will compound severe oncology workforce shortages already on the horizon.” *For more information, contact Aaron Talent at 571-483-1371.*

American Society of Gastrointestinal Endoscopy (ASGE): “Forty-seven percent of gastrointestinal endoscopists surveyed said that at least a quarter of their patients have a return visit within three years. Many of these return visits are for complex conditions unrelated to the first visit, requiring highly comprehensive evaluations that will not be adequately reimbursed. Changing the existing policy is a matter of fundamental fairness.” – Michael Brian Fennerty, M.D, FASGE, President, American Society for Gastrointestinal Endoscopy. *For more information, contact Anne Brownsey at 630-570-5635.*

Infectious Diseases Society of America (IDSA): “Of the more than 500 infectious diseases (ID) physicians who completed the survey, nearly all (95%) say their total revenue stream has decreased as a result of Medicare’s decision. This has led to staff layoffs, less time spent with patients, and fewer reports back to referring physicians. Additionally, nearly half of ID respondents (49%) plan to defer purchase of new equipment and/or information technology.” *For further information, contact Jason Scull at 703-299-5146.*

Society for Cardiovascular Angiography and Interventions (SCAI): “CMS’s failure to recognize the unique work that goes into providing consultation services shows a lack of appreciation for the additional training and expertise needed to be a consulting physician along with the additional intensity and stress of working with very sick patients that usually don’t have a pre-existing working relationship with the consultant. Routine new patient visits are just not the same as stressful encounters with very sick patients and CMS should not gloss over these differences.” *For further information, contact Dawn Hopkins at 202-741-9854.*