

## **Letter Sent to All Members of the U.S. House of Representatives**

August 12, 2013

Dear Representative:

The undersigned organizations strongly urge you to oppose H.R. 2914, the Promoting Integrity in Medicare Act of 2013, which would limit patient access to in-office services that physicians provide under the physician self-referral or Stark law. If enacted, this bill would limit access to life-saving services for many patients and stifle new innovative reforms already underway to improve care delivery and quality improvement. It would raise the costs to Medicare beneficiaries and the Medicare program by driving patients to more costly facilities thereby requiring additional expenditures.

The Stark law currently allows physicians to provide some services in the office setting, including advanced diagnostic imaging (MRI, PET, and CT scans), radiation therapy, anatomic pathology, and physical therapy, when complex and detailed supervision, location, and billing requirements are met. Integration of these medical services facilitates the development of coordinated clinical pathways, improves communication between specialists, offers better quality control of ancillary services and enhances data collection – all of which improves patient care and maximizes efficiencies. In addition, in-office patient access to these services can facilitate immediate diagnosis, physician communication with other members of the care team, and rapid, appropriate treatment of the disease condition.

H.R. 2914 would prohibit all these services in an office setting, force patients to receive services in a new and unfamiliar setting, increase costs, present significant barriers to appropriate screenings and treatments, and make health care less accessible. In its June 2011 Report to Congress, the Medicare Payment Advisory Commission (MedPAC) recommended against limiting the Stark law exception for ancillary services, citing potential “unintended consequences, such as inhibiting the development of organizations that integrate and coordinate care within a physician practice.” The General Accounting Office (GAO) recently issued a series of reports on self-referral and flatly rejected the recommendation to limit the Stark exception.

Over the years, the medical profession has taken significant steps to develop tools to promote the medically necessary and appropriate use of ancillary services. These steps include accreditation, as well as the development and implementation of training guidance, appropriate use criteria, practice guidelines, and clinical decision support tools which assist physicians in delivering the most appropriate care.

Our organizations seek to protect Medicare beneficiaries and taxpayers alike by providing high quality, ethical care in a setting that benefits patients and facilitates care

coordination. We strongly urge you to oppose H.R. 2914, legislation that would only limit patient access, undermine competition in the healthcare market, force patients to receive care in more expensive settings and contravene new innovative reforms already underway.

Sincerely,

American Academy of Dermatology Association  
American Academy of Neurology  
American Academy of Ophthalmology  
American Academy of Otolaryngology—Head and Neck Surgery  
American Association of Clinical Urologists  
American Association of Neurological Surgeons  
American Association of Neuromuscular & Electrodagnostic Medicine  
American Association of Orthopaedic Surgeons  
American College of Cardiology  
American College of Gastroenterology  
American College of Mohs Surgery  
American College of Rheumatology  
American College of Surgeons  
American Gastroenterological Association  
American Medical Association  
American Society for Dermatologic Surgery Association  
American Society for Gastrointestinal Endoscopy  
American Society for Mohs Surgery  
American Society of Echocardiography  
American Society of Neuroimaging  
American Society of Nuclear Cardiology  
American Urological Association  
Association of Black Cardiologists  
Association of Freestanding Oncologists  
Cardiology Advocacy Alliance  
Large Urology Group Practice Association  
Medical Group Management Association  
National Association of Spine Specialists  
Society for Cardiovascular Angiography and Interventions  
Society for Vascular Surgery  
The US Oncology Network