

**FOR IMMEDIATE RELEASE**  
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## **GIs LEAD CHARGE FOR MORE TRANSPARENCY IN MEDICARE RATE-SETTING PROCESS**

*Changes in reimbursement rates could limit patients' access to the healthcare system*

**WASHINGTON (May 29, 2014)** – The gastroenterology societies have joined together in a push for increased transparency, fairness and accuracy in the Medicare reimbursement rate-setting process. Today, [Senator Kelly Ayotte \(R-NH\)](#) joined [47 members of the U.S. House of Representatives](#) and a diverse coalition of leading medical societies calling for a fair and open process in setting reimbursement rates. The current process allows physicians little time to challenge and prepare for changes that impact their practice.

“We are committed to ensuring access to life-saving procedures and improving the quality and affordability of healthcare for all Americans,” said Harry E. Sarles, Jr., MD, FACP, president of the American College of Gastroenterology. “A more transparent process for valuing medical procedures will help physicians across disciplines better serve our patients.”

The Centers for Medicare and Medicaid Services (CMS) is required by law to periodically review the value of thousands of medical procedures to determine proper reimbursements. Annual updates are based on recommendations from the American Medical Association’s Relative Value Scale Update Committee (RUC). These recommendations are taken into consideration and then all procedures are assigned a dollar value by CMS based on the time, resources, and degree of difficulty involved.

“We continue to interact with CMS to obtain clarification on the rationales and methodologies used to determine value of GI physician services in the final rule,” said John I. Allen, MD, MBA, AGAF, president of the American Gastroenterological Association Institute. “We want the opportunity to fairly and meaningfully participate in the rulemaking process before the rule is finalized.”

CMS releases a proposed rule each July outlining the annual policy changes in the Medicare physician fee schedule, and then the final rule in early November. In recent years, however, CMS has decided to include the physician reimbursement policy changes only in the November final rule. These interim final value numbers go into effect on January 1 of the following year. Therefore, no meaningful opportunity for public comment exists. By being more transparent and including physician fee schedule changes in the proposed rule in July, CMS can make additional changes before values are finalized in November. The current process leaves physicians and other interested stakeholders only 60 days to respond while also bearing the burden of implementation. This short time period does not allow for adequate time to challenge methodologies and assumptions, nor to prepare for the serious impact of such changes which could directly impact staffing and patients’ access to the practice.

“Taking care of patients is our first priority. Having less than 60 days to change our business operations because of significant reimbursement changes has a very real impact on our practices and our ability to best serve our current and new patients,” said Colleen M. Schmitt,

MD, MHS, FASGE, president of the American Society for Gastrointestinal Endoscopy. “Like any business, our practices have to re-evaluate our workflow.”

### **Congressional Supporters**

Today, Senator Kelly Ayotte invited Senate colleagues to sign onto a [letter to CMS](#) calling for transparency.

“We are aware that significant changes are being made to physician Medicare payments without the opportunity for stakeholders to express concerns regarding the methodology or assumptions being made by the Centers for Medicare and Medicaid Services (CMS) as part of the proposed rulemaking process,” wrote Members of Congress in a letter to CMS Administrator Marilyn Tavenner in March. “We believe that current processes are unfair and deeply impact small-business operations and patient care.”

The U.S. House [letter](#) to CMS was signed by:

Rep. Dan Benishek, MD	Rep. Tim Griffin	Rep. Patrick Meehan
Rep. Ami Bera, MD	Rep. Michelle Lujan Grisham	Rep. Tim Murphy
Rep. Gus Bilirakis	Rep. Brett Guthrie	Rep. Richard Neal
Rep. Diane Black	Rep. Andy Harris, MD	Rep. Alan Nunnelee
Rep. Marsha Blackburn	Rep. Joe Heck, DO	Rep. Pete Olson
Rep. Charles Boustany, MD	Rep. Bill Johnson	Rep. Tom Price, MD
Rep. Vern Buchanan	Rep. Adam Kinzinger	Rep. Phil Roe, MD
Rep. Larry Bucshon, MD	Rep. Doug LaMalfa	Rep. Raul Ruiz, MD
Rep. Mike Burgess, MD	Rep. Leonard Lance	Rep. Aaron Schock
Rep. Steve Chabot	Rep. Tom Latham	Rep. Jan Schakowsky
Rep. Bill Cassidy, MD	Rep. Stephen Lynch	Rep. Steve Stivers
Rep. Chris Collins	Rep. Dan Maffei	Rep. Mark Takano
Rep. John Fleming, MD	Rep. Kenny Marchant	Rep. Mike Thompson
Rep. Randy Forbes	Rep. Jim Matheson	Rep. Ed Whitfield
Rep. Phil Gingrey, MD	Rep. James McGovern	Rep. Joe Wilson
Rep. Paul Gosar	Rep. Patrick McHenry	

### **Medical Society Supporters**

The transparency initiative is organized by three societies representing gastroenterologists – the American College of Gastroenterology, American Gastroenterological Association and the American Society for Gastrointestinal Endoscopy.

A growing group of medical societies have joined the gastroenterology societies to unite on the issue of transparency, including:

- American Academy of Otolaryngology—Head and Neck Surgery
- American Academy of Neurology
- American Association of Neurological Surgeons
- American College of Cardiology
- American College of Radiology
- American College of Rheumatology
- American Society of Clinical Oncology
- American Society for Radiation Oncology
- American Society of Cataract and Refractive Surgery
- Congress of Neurological Surgeons
- Digestive Disease National Coalition

Together these organizations are engaging policymakers to push for increased transparency in the Medicare reimbursement rate-setting process and last week the presidents of the three gastroenterology societies had a constructive meeting with CMS Administrator Marilyn Tavenner to determine how to make the review process more open and fair.

Learn more about the need for increased transparency at [valueofcolonoscopy.org](http://valueofcolonoscopy.org).

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### **About The Value of Colonoscopy**

*The Value of Colonoscopy: Saving Lives Through Expert Care* is a partnership of the American College of Gastroenterology, American Gastroenterological Association and American Society for Gastrointestinal Endoscopy. The three gastroenterology societies have come together to highlight the value of colonoscopy in detecting and preventing colorectal cancer and the gastroenterologists who perform this life-saving procedure. The goal of the initiative is to ensure access to life-saving colorectal cancer screening procedures while working together to improve the quality and affordability of health care for all Americans.