August 27, 2018

The Honorable Seema Verma Administrator Centers for Medicare & Medicaid Services U.S. Department of Health and Human Services Hubert H. Humphrey Building, Room 445–G 200 Independence Avenue, SW Washington, DC 20201

Re: Medicare Physician Fee Schedule for CY 2019 (CMS-1693-P)

Dear Administrator Verma:

The undersigned organizations representing physicians and other health professionals welcome and strongly support the Centers for Medicare & Medicaid Services' (CMS) "Patients Over Paperwork" initiative. We appreciate your outreach to our community and are solidly behind your goal of reducing administrative burdens for physicians and other health care professionals so that they can devote more time to patient care. The proposals included in the 2019 Medicare physician payment rule demonstrate that you listened to our members' concerns about the significant administrative burdens due to the documentation requirements associated with Evaluation and Management (E/M) services. We are grateful for your efforts to simplify these requirements and reduce their associated red tape.

Excessive E/M documentation requirements do not just take time away from patient care; they also make it more difficult to locate medical information in patients' records that is necessary to provide high quality care. Physicians and other health care professionals are extremely frustrated by "note bloat," with pages and pages of redundant information that makes it difficult to quickly find important information about the patient's present illness or most recent test results. Several of the documentation policy changes included in the proposed rule would go a long way toward alleviating this problem and the undersigned organizations urge immediate adoption:

- 1. Changing the required documentation of the patient's history to focus only on the interval history since the previous visit;
- 2. Eliminating 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; and
- 3. Removing the need to justify providing a home visit instead of an office visit.

Implementation of these policies will streamline documentation requirements, reduce note bloat, improve workflow, and contribute to a better environment for health care professionals and their Medicare patients.

Regarding the proposal to collapse payment rates for eight office visit services for new and established patients down to two each, the undersigned organizations believe there are a number of unanswered questions and potential unintended consequences that would result from the coding policies in the proposed rule. We oppose the implementation of this proposal because it could hurt physicians and other health care professionals in specialties that treat the sickest patients, as well as those who provide comprehensive primary care, ultimately jeopardizing patients' access to care. We also urge that the new multiple service payment reduction policy in the proposed rule not be adopted as the issue of multiple services on the same day of service was factored into prior valuations of the affected codes. The proposal

also has significant impact on certain services, such as chemotherapy administration, that may be an unintended consequence of altering the current practice expense methodology to accommodate the proposal.

The medical community wants to help CMS work through the complicated issues surrounding the appropriate coding, payment, and documentation requirements for different levels of E/M services. Toward that end, the undersigned organizations strongly support the American Medical Association's creation of a workgroup of physicians and other health professionals with deep expertise in defining and valuing codes, and who also use the office visit codes to describe and bill for services provided to Medicare patients. The charge to this workgroup is to analyze the E/M coding and payment issues in order to arrive at concrete solutions that can be provided to CMS in time for implementation in the 2020 Medicare Physician Fee Schedule. A number of CMS personnel monitored the initial conversations of the workgroup and we look forward to their active participation in this process going forward.

We encourage the administration to adopt in the final rule the documentation changes outlined above. These changes reflect significant progress in your Patients Over Paperwork Initiative. Such policy modifications will significantly reduce the documentation burden so health care professionals can spend more time with patients. We also urge the administration to set aside its office visit and multiple service proposals, fully embrace the assistance of the workgroup and work together with the medical community on a mutually agreeable policy that will achieve our shared goal of simplifying E/M documentation burdens while mitigating any unintended consequences.

Sincerely,

American Medical Association Academy of Physicians in Clinical Research Advocacy Council of ACAAI AMDA - The Society for Post-Acute and Long-Term Care Medicine American Academy of Allergy, Asthma & Immunology American Academy of Child and Adolescent Psychiatry American Academy of Dermatology Association American Academy of Facial Plastic and Reconstructive Surgery American Academy of Family Physicians American Academy of Home Care Medicine American Academy of Hospice and Palliative Medicine American Academy of Neurology American Academy of Ophthalmology American Academy of Otolaryngic Allergy American Academy of Otolaryngology-Head and Neck Surgery American Academy of Pain Medicine American Academy of PAs American Academy of Pediatrics American Academy of Physical Medicine and Rehabilitation American Academy of Sleep Medicine American Association for Thoracic Surgery American Association of Blood Banks American Association of Clinical Endocrinologists American Association of Hip and Knee Surgeons American Association of Neurological Surgeons

> American Association of Neuromuscular & Electrodiagnostic Medicine American Association of Oral and Maxillofacial Surgeons American Association of Orthopaedic Surgeons American Chiropractic Association American Clinical Neurophysiology Society American College of Allergy, Asthma and Immunology American College of Cardiology American College of Chest Physicians American College of Emergency Physicians American College of Gastroenterology American College of Hyperbaric Medicine American College of Medical Genetics and Genomics American College of Medical Toxicology American College of Obstetricians & Gynecologists American College of Occupational and Environmental Medicine American College of Osteopathic Internists American College of Osteopathic Surgeons American College of Phlebology American College of Physicians American College of Radiation Oncology American College of Radiology American College of Rheumatology American College of Surgeons American Epilepsy Society American Gastroenterological Association American Geriatrics Society American Institute of Ultrasound in Medicine American Medical Women's Association American Nurses Association American Optometric Association American Orthopaedic Foot & Ankle Society American Osteopathic Association American Pediatric Surgical Association American Physical Therapy Association American Podiatric Medical Association American Psychiatric Association American Rhinologic Society American Society for Blood and Marrow Transplantation American Society for Clinical Pathology American Society for Dermatologic Surgery Association American Society for Gastrointestinal Endoscopy American Society for Metabolic and Bariatric Surgery American Society for Radiation Oncology American Society for Surgery of the Hand American Society of Addiction Medicine American Society of Anesthesiologists American Society of Breast Surgeons American Society of Cataract & Refractive Surgery

> American Society of Clinical Oncology American Society of Colon and Rectal Surgeons American Society of Echocardiography American Society of General Surgeons American Society of Hematology American Society of Interventional Pain Physicians American Society of Neuroimaging American Society of Neuroradiology American Society of Nuclear Cardiology American Society of Plastic Surgeons American Society of Regional Anesthesia and Pain Medicine American Society of Retina Specialists American Society of Transplant Surgeons American Thoracic Society American Urogynecologic Society American Urological Association American Venous Forum Association of American Medical Colleges College of American Pathologists **Congress of Neurological Surgeons Endocrine Society** Heart Rhythm Society Infectious Diseases Society of America International Academy of Independent Medical Evaluators International Society for Advancement of Spine Surgery Medical Group Management Association National Association of Medical Examiners North American Neuromodulation Society North American Neuro-Ophthalmology Society **Obesity Medicine Association Renal Physician Association** Society for Cardiovascular Angiography and Interventions Society for Vascular Surgery Society of American Gastrointestinal and Endoscopic Surgeons Society of Cardiovascular Computed Tomography Society of Critical Care Medicine Society of Gynecologic Oncology Society of Hospital Medicine Society of Interventional Radiology Society of Nuclear Medicine and Molecular Imaging Spine Intervention Society The American College of Medical Genetics and Genomics The American College of Osteopathic Surgeons The American Society of Dermatopathology The Obesity Society The Society of Thoracic Surgeons Undersea and Hyperbaric Medicine

> Medical Association of the State of Alabama Arizona Medical Association Arkansas Medical Society California Medical Association Colorado Medical Society Connecticut State Medical Society Medical Society of Delaware Medical Society of the District of Columbia Florida Medical Association Inc Medical Association of Georgia Hawaii Medical Association Idaho Medical Association Illinois State Medical Society Indiana State Medical Association Iowa Medical Society Kansas Medical Society Kentucky Medical Association Louisiana State Medical Society Maine Medical Association MedChi, The Maryland State Medical Society Massachusetts Medical Society Michigan State Medical Society Minnesota Medical Association Mississippi State Medical Association Missouri State Medical Association Montana Medical Association Nebraska Medical Association Nevada State Medical Association New Hampshire Medical Society Medical Society of New Jersey New Mexico Medical Society Medical Society of the State of New York North Carolina Medical Society North Dakota Medical Association Ohio State Medical Association Oklahoma State Medical Association Oregon Medical Association Pennsylvania Medical Society Rhode Island Medical Society South Carolina Medical Association South Dakota State Medical Association Tennessee Medical Association Texas Medical Association

> Utah Medical Association Vermont Medical Society Medical Society of Virginia Washington State Medical Association West Virginia State Medical Association Wisconsin Medical Society Wyoming Medical Society