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November 7, 2007

The Honorable Max Baucus, Chairman
United States Senate
Committee on Finance
219 Dirksen Senate Office Building
Washington, DC 20510

Dear Senator Baucus,

On behalf of National Patient Advocate Foundation (NPAF), I am writing to express concerns about the Centers for Medicare & Medicaid Services (CMS) final rule published in the Federal Registrar November 2nd on the physician fee schedule and also to urge Congress to pass legislation to fix the cut in Medicare reimbursements that will be effective January 1, 2008.

As you know, NPAF is a non-profit organization dedicated to improving access to healthcare services through policy reform. The advocacy activities of NPAF are informed and influenced by the experience of patients who receive counseling and case management services from our companion organization, Patient Advocate Foundation (PAF). Last year, PAF received more than 6 million contacts from patients throughout the United States seeking assistance for access to care issues resulting from diagnoses of a chronic, debilitating or life-threatening disease. Of those, 39,780 became full patient cases involving communications made by PAF staff on behalf of a patient in order to reach positive resolution.

In 2006, almost one-third of patients contacting PAF were insured through Medicare. Because PAF serves such a high number of Medicare beneficiaries, the 10.1% cut in physician reimbursements is especially troubling since decreased reimbursement to physicians will ultimately lead to decreased access to necessary care for patients. If the 10.1% cut is implemented by CMS, physicians will have less incentive to treat Medicare beneficiaries and some will decide not to accept any Medicare beneficiaries. This is especially difficult for patients living in rural settings that may already have limited access to healthcare providers.

NPAF urges Congress to pass legislation to delay this scheduled reimbursement cut so that patient access is not hindered. Unless steps are taken now to eliminate the adverse effects of the flawed sustainable growth rate ("SGR") formula on physician reimbursement, we fear patient access to high-quality community based care will be seriously compromised. A 2007 American Medical Association ("AMA") survey suggest 60% of physicians will be forced to limit the number of Medicare patients they treat should the payment cuts go into effect. Additionally, between now and 2015, eight in ten physicians also expect to reduce or delay purchases of new and innovative

medical equipment and/or more sophisticated information technology. These changes are not good for patients and they are not good for the country's health care delivery system as a whole.

The magnitude of the Medicare reimbursement cuts physicians face under the existing SGR threatens to stymie progress that, in the long-term, promises improved patient care at lower costs with the adoption of electronic medical records and other new technologies.

Thank you for your efforts on behalf of patients. Again, we urge you not to allow these cuts to go into effect and we offer our assistance in whatever manner you deem appropriate to avoid these draconian cuts in physician reimbursement. If you have questions, or if we may provide you with additional information, please feel free to contact me, or Amy Boivin, at 202-347-8009.

Respectfully submitted, _____

A handwritten signature in cursive script, appearing to read "Nancy Davenport-Ennis".

Nancy Davenport-Ennis
President & CEO