

**PRACTICING PHYSICIANS ADVISORY COUNCIL  
RECOMMENDATIONS – August 28, 2006 MEETING  
To Be Reported During December 4, 2006 Meeting**

**CMS Requests**

<b><u>Recommendations</u></b>	<b><u>Respondent</u></b>	<b><u>CMS Response</u></b>
<p><b><u>Agenda Item C: PPAC Update</u></b> The Council members expressed concern about the CMS response to recommendation <b>56-O-1</b> regarding payment to academic anesthesia programs. <b>57-C-1:</b> Because 1) the number of academic anesthesia physician training programs has declined by approximately 30 since the inception of the anesthesia teaching rule (although anesthesia nurse training programs have increased) and 2) hospitals are subsidizing academic anesthesia training programs by as much as \$400,000 to \$1 million per program per year, PPAC recommends that CMS reevaluate its decision to equalize reimbursement for academic anesthesia physician training programs.</p> <p><b><u>Agenda Item D: PRIT Update:</u></b> <b>57-D-1:</b> PPAC recommends that CMS publish all of the RVUs forwarded by the RVU Update</p>	<p><b>Kenneth Simon, M.D., MBA Executive Director, Practicing Physicians Advisory Council</b></p>	
	<p><b>William Rogers, M.D.,</b></p>	





<b><u>Recommendations</u></b>	<b><u>Respondent</u></b>	<b><u>CMS Response</u></b>
<p>schedule for subsequent beneficiary access to physician services.</p> <p><b>57-G-4:</b> PPAC recommends that CMS use reliable, accurate, current, geographically-relevant information to establish the true cost of professional liability insurance.</p> <p><b>57-G-5:</b> PPAC recommends that CMS consider the appropriateness of including professional liability insurance as a component of the RVU system and whether professional liability insurance should be incorporated into indirect practice expense calculations.</p> <p><b><u>Agenda Item H — Outpatient Prospective Payment System (OPPS)/Ambulatory Surgery Center (ASC) Update</u></b></p> <p><b>57-H-1:</b> PPAC recommends that CMS abandon the proposed methodology for determining the median cost of brachytherapy sources and reexamine the claims data on which the proposed system is based.</p>	<p><b>Joan Sanow, Deputy Director of the Division of Outpatient Services, Center for Medicare Management</b></p> <p><b>Edith Hambrick, M.D., J.D.,</b></p>	

