

**Submitter :**

**Date: 06/29/2006**

**Organization :**

**Category : Physician**

**Issue Areas/Comments**

**GENERAL**

**GENERAL**

**Dear Sir/Madam:**

On behalf of myself and the patients I serve, I urge CMS to implement the proposed E/M work RVUs into the 2007 Medicare Physician Fee Schedule.

As you know, these changes were initially proposed by an AMA-sponsored workgroup of primary care, surgical, and other specialty physicians. It is impressive that a workgroup with such disparate membership has this emerged with the consensus that the current RVU rates for these services is grossly inadequate and therefore discourages physicians from providing the type of follow-up care that represents the best practice of medicine. By accepting the proposed changes, CMS would be encouraging physicians to provide the best care possible.

I urge CMS to accept the proposed changes and incorporate them into the 2007 Medicare Physician Fee Schedule.

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**Submitter :** Dr. Daniel Small  
**Organization :** Sarasota Arthritis Center  
**Category :** Physician

**Date:** 06/29/2006

**Issue Areas/Comments**

**Discussion of Comments-  
Evaluation and Management  
Services**

Discussion of Comments- Evaluation and Management Services

Please approve the increased payments for the Evaluation and Management services for internists and internal medicine subspecialists. Our costs of providing services have dramatically increased in recent years. The additional work required per patient due to regulatory and insurance issues has escalated as well. We cannot see more patients to make up for the extra expenses.

**Submitter :**

**Date: 06/29/2006**

**Organization :**

**Category : Physician**

**Issue Areas/Comments**

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**Submitter :** Dr. Erin Marcus  
**Organization :** University of Miami Miller School of Medicine  
**Category :** Physician

**Date:** 06/29/2006

**Issue Areas/Comments**

**GENERAL**

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Dear Sir/Madam:

On behalf of myself and the patients I serve, I urge CMS to implement the proposed E/M work RVUs into the 2007 Medicare Physician Fee Schedule.

I am a primary care MD and medical educator. Over the past decade, I have watched reimbursement for the difficult, labor-intensive, unglamorous work internists perform dwindle significantly. Medical students are deciding to stay away from primary care in droves because of the drop in income. The current reimbursement system, which rewards quick procedures at the expense of difficult and complex E and M services, is expensive, extremely inequitable, and does not foster good patient care. If it isn't overhauled, no one will be there to provide primary care for all of us when we hit retirement age.

By accepting the proposed changes, CMS would be encouraging physicians to provide better care.

I urge CMS to accept the proposed changes and incorporate them into the 2007 Medicare Physician Fee Schedule.

**Submitter :** Dr. Robert Cassell  
**Organization :** Lakeland Regional Cancer Center  
**Category :** Physician

**Date:** 06/29/2006

**Issue Areas/Comments**

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**Category : Physician**

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**Submitter :** Dr. Keels Jorn  
**Organization :** Dr. Keels Jorn  
**Category :** Physician

**Date:** 06/29/2006

**Issue Areas/Comments**

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**Submitter :** Dr. David Lindberg  
**Organization :** Internal Medicine  
**Category :** Physician

**Date:** 06/29/2006

**Issue Areas/Comments**

**GENERAL**

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Dear Sir/Madam:

Thank you for reviewing this opinion.

On behalf of myself and the patients I serve, I urge CMS to implement the proposed E/M work RVUs into the 2007 Medicare Physician Fee Schedule.

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**Submitter :** Dr. Gloria Coronel-couto  
**Organization :** University of Miami  
**Category :** Physician

**Date:** 06/29/2006

**Issue Areas/Comments**

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**Submitter :** Dr. Julian Berman  
**Organization :** Broward Heart Group  
**Category :** Physician

**Date:** 06/29/2006

**Issue Areas/Comments**

**GENERAL**

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To whom it may concern:

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Although I am a cardiologist, and we as a group of physicians are noted for procedures and testing, my own practice is heavily E/M and the overhead as a percentage of charges is huge. This change will make it easier for me to justify the effort it takes to take care of my complex patients as I enter my 60's.

I urge CMS to accept the proposed changes and incorporate them into the 2007 Medicare Physician Fee Schedule.

**Submitter :** Dr. Christopher Bacani  
**Organization :** ACP  
**Category :** Physician

**Date:** 06/29/2006

**Issue Areas/Comments**

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**Submitter :** Dr. June Leland  
**Organization :** Dr. June Leland  
**Category :** Physician

**Date:** 06/29/2006

**Issue Areas/Comments**

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**Submitter :** Dr. Crawford Cleveland  
**Organization :** Dr. Crawford Cleveland  
**Category :** Physician

**Date:** 06/29/2006

**Issue Areas/Comments**

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**Submitter :** Dr. Glenn Slomin  
**Organization :** Osler Medical  
**Category :** Physician

**Date:** 06/29/2006

**Issue Areas/Comments**

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**Submitter :** Dr. Jesse Haven

**Date:** 06/29/2006

**Organization :** Dr. Jesse Haven

**Category :** Physician

**Issue Areas/Comments**

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**Submitter :** Dr. Hermes Koop  
**Organization :** Anchor Health Centers  
**Category :** Physician Assistant

**Date:** 06/29/2006

**Issue Areas/Comments**

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**Submitter :** Dr. Mary Ann LoMonaco  
**Organization :** Anchor Health Centers  
**Category :** Physician

**Date:** 06/29/2006

**Issue Areas/Comments**

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**Submitter :** Dr. Frederick Turton  
**Organization :** American College of Physicians  
**Category :** Physician

**Date:** 06/29/2006

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**Submitter :** Dr.  
**Organization :** cancer center  
**Category :** Physician

**Date:** 06/29/2006

**Issue Areas/Comments**

**GENERAL**

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Please allow the long awaited increase in internists reimbursement. We have been left far behind. Please let us make a living. We can barely survive in the current environment.  
Thank you

**Submitter :** Dr. Antonio Gordon  
**Organization :** ACP  
**Category :** Physician

**Date:** 06/29/2006

**Issue Areas/Comments**

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**Submitter :** Dr. Paul Kirschenfeld  
**Organization :** Dr. Paul Kirschenfeld  
**Category :** Physician

**Date:** 06/29/2006

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**Submitter :** Dr. Gladys Martinez  
**Organization :** Royal Palm Internists, P.A.  
**Category :** Physician

**Date:** 06/29/2006

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**Organization :**

**Category : Physician**

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**Submitter :** Dr. Clinton J McGrew, Jr.  
**Organization :** Dr. Clinton J McGrew, Jr.  
**Category :** Physician

**Date:** 06/29/2006

**Issue Areas/Comments**

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**Category : Physician**

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**Submitter :** Dr. Owen LINDER

**Date:** 06/29/2006

**Organization :** ACP

**Category :** Physician

**Issue Areas/Comments**

**Discussion of Comments-  
Evaluation and Management  
Services**

Discussion of Comments- Evaluation and Management Services

We are performing service worth the increase and a lot more.

**Submitter :** Dr. Hermes Koop  
**Organization :** Anchor Health Centers  
**Category :** Physician

**Date:** 06/29/2006

**Issue Areas/Comments**

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**Submitter :** Dr. Dennis Dowling  
**Organization :** Dr. Dennis Dowling  
**Category :** Physician

**Date:** 06/29/2006

**Issue Areas/Comments**

**Discussion of Comments-  
Evaluation and Management  
Services**

Discussion of Comments- Evaluation and Management Services

Regarding the somatic dysfunction codes (739.0-739.9) and sprain/strain codes (i.e. 847.0):

If CMS is going to recommend or mandate ICD changes to incorporate a fifth digit, then I would prefer adding mild (1), moderate (2), severe (3) to the somatic dysfunction and possibly the sprain/strain codes as well for the respective regions. Single or multiple mild or inconsequential cervical somatic dysfunctions would be 739.11, moderate lumbosacral sprain/strain would be 846.02, and a severe sacral somatic dysfunction would be 739.43. This would add a weight to the diagnosis.

**Submitter :** Dr. mario madruga  
**Organization :** acp  
**Category :** Health Care Provider/Association

**Date:** 06/29/2006

**Issue Areas/Comments**

**Discussion of Comments-  
Evaluation and Management  
Services**

Discussion of Comments- Evaluation and Management Services

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**Submitter :** Dr. Kenneth Stark  
**Organization :** Dr. Kenneth Stark  
**Category :** Physician

**Date:** 06/29/2006

**Issue Areas/Comments**

**Practice Expense**

Practice Expense

Dear Sir/Madam:

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**Submitter :** Dr. Steven Pabalan  
**Organization :** Dr. Steven Pabalan  
**Category :** Physician

**Date:** 06/29/2006

**Issue Areas/Comments**

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**Submitter :** Dr. Glenn Singer  
**Organization :** Dr. Glenn Singer  
**Category :** Physician

**Date:** 06/29/2006

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**Discussion of Comments-  
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Discussion of Comments- Evaluation and Management Services

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**Submitter :** Dr. Charles Wilson  
**Organization :** Dr. Charles Wilson  
**Category :** Physician

**Date:** 06/29/2006

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Charles Wilson MD

**Submitter :** Dr. CARLOS BARRERA  
**Organization :** Dr. CARLOS BARRERA  
**Category :** Physician

**Date:** 06/29/2006

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**Submitter :** Dr. Robert Windom

**Date:** 06/29/2006

**Organization :** American College of Physicians

**Category :** Physician

**Issue Areas/Comments**

**Other Issues**

**Other Issues**

On behalf of myself and the patients I serve, I urge CMS to implement the proposed E/M work RVUs into the 2007 Medicare Physician Fee Schedule. Over 20 years ago I have urged there be more payment equality of primary care physicians and other disciplines. Please do not let this opportunity fail.

As you know, these changes were initially proposed by an AMA-sponsored workgroup of primary care, surgical, and other specialty physicians. It is impressive that a workgroup with such disparate membership has this emerged with the consensus that the current RVU rates for these services is grossly inadequate and therefore discourages physicians from providing the type of follow-up care that represents the best practice of medicine. By accepting the proposed changes, CMS would be encouraging physicians to provide the best care possible.

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**Submitter :** Dr. Gary Goldstein  
**Organization :** Palm Harbor Internal Medicine and Pediatrics  
**Category :** Physician

**Date:** 06/29/2006

**Issue Areas/Comments**

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Dear Sir/Madam:

On behalf of myself and the patients that I serve, I urge CMS to implement the proposed E/M work RVUs into the 2007 Medicare Physician Fee Schedule.

As you know, these changes were initially proposed by an AMA-sponsored workgroup of primary care, surgical, and other specialty physicians. It is impressive that a workgroup with such disparate membership has emerged with the consensus that the current RVU rates for these services is grossly inadequate and therefore discourages physicians from providing the type of follow-up care that represents the best practice of medicine. By accepting the proposed changes, CMS would be encouraging physicians to provide the best care possible.

The number of medical students and residents planning to enter into primary care is diminishing dramatically. The retirement rate of general internists exceeds the number of new general internists entering private practice. Only 13% of first year internal medicine residents in 2005 planned to proceed onto primary care practice. This is a huge drop and this has been developing for several years. The gross disparity in reimbursements to primary care providers compared to specialists has fueled this crisis. There will not be adequate numbers of primary care providers to care for the aging baby boomers in the not too distant future. This is a much needed first step in an attempt to deal with this crisis.

I urge CMS to accept the proposed changes and incorporate them into the 2007 Medicare Physician Fee Schedule.

**Submitter :** Dr. Radames Oliver  
**Organization :** JEC  
**Category :** Physician

**Date:** 06/30/2006

**Issue Areas/Comments**

**GENERAL**

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Dear Sir/Madam:

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**Submitter :** Dr. Joshua Lenchus  
**Organization :** Dr. Joshua Lenchus  
**Category :** Physician

**Date:** 06/30/2006

**Issue Areas/Comments**

**GENERAL**

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**Submitter :** Dr.  
**Organization :** Baptist Medical Center  
**Category :** Physician

**Date:** 06/30/2006

**Issue Areas/Comments**

**GENERAL**

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**Submitter :** Dr. Alan Kutner  
**Organization :** Dr. Alan Kutner  
**Category :** Physician

**Date:** 06/30/2006

**Issue Areas/Comments**

**Discussion of Comments-  
Evaluation and Management  
Services**

Discussion of Comments- Evaluation and Management Services

Dear Sir/Madam:

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Alan Kutner, M.D.

**Submitter :** Dr. Jose Diaz  
**Organization :** Dr. Jose Diaz  
**Category :** Physician

**Date:** 06/30/2006

**Issue Areas/Comments**

**GENERAL**

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**Submitter :** Dr. Lawrence Klima  
**Organization :** Dr. Lawrence Klima  
**Category :** Physician

**Date:** 06/30/2006

**Issue Areas/Comments**

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**Submitter :** Dr. Jensen Go  
**Organization :** Dr. Jensen Go  
**Category :** Physician

**Date:** 06/30/2006

**Issue Areas/Comments**

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**Submitter :** Dr. Robert Sullivan  
**Organization :** University of Florida  
**Category :** Physician

**Date:** 06/30/2006

**Issue Areas/Comments**

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**Submitter :** Dr. Linda Prieto  
**Organization :** ACP  
**Category :** Health Care Provider/Association

**Date:** 06/30/2006

**Issue Areas/Comments**

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**Submitter :** Dr. David Speizman  
**Organization :** MSPB  
**Category :** Physician

**Date:** 06/30/2006

**Issue Areas/Comments**

**Discussion of Comments-  
Evaluation and Management  
Services**

Discussion of Comments- Evaluation and Management Services

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Thank you,

David Speizman

**Submitter :** Dr. suhas neerukonda

**Date:** 06/30/2006

**Organization :** Dr. suhas neerukonda

**Category :** Physician

**Issue Areas/Comments**

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**Submitter :** Dr. Naresh Pathak  
**Organization :** Care Health Center II  
**Category :** Physician

**Date:** 06/30/2006

**Issue Areas/Comments**

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**Submitter :** Henry Cusnir  
**Organization :** Henry Cusnir  
**Category :** Physician

**Date:** 06/30/2006

**Issue Areas/Comments**

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