



*Sound Policy. Quality Care.*

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May 26, 2011

The Honorable Thomas Price  
United States House of Representatives  
403 Cannon HOB  
Washington, DC 20515

Dear Representative Price:

As the Alliance of Specialty Medicine (Alliance), our mission is to advocate for sound federal health care policy that fosters patient access to the highest quality specialty care. As patient and physician advocates, the Alliance commends your legislation, H.R. 1700, the “Medicare Patient Empowerment Act,” which would permit Medicare beneficiaries and providers to privately contract for Medicare covered services without penalty.

Under current law, Medicare beneficiaries that choose to see physicians who do not accept Medicare are required to pay the physician's charge entirely out of personal funds; Medicare does not pay any part of the charge. In addition, physicians who choose to provide covered services to Medicare beneficiaries under private contracts must "opt out" of the Medicare program for two years during which time Medicare does not pay the physician for any covered services provided to Medicare beneficiaries. We maintain that these discriminating policies are inappropriate and are an impediment to Medicare beneficiaries' freedom of choice.

Over the past several years, traditional Medicare has been undermined by a number of issues, including the flawed Sustainable Growth Rate (SGR) formula. Beneficiaries and physicians alike have lost confidence in the program and grow more and more concerned about the programs sustainability. As a result, beneficiaries are losing access to high-quality physicians who can no longer afford to accept Medicare's unpredictable and declining payment rates or keep up with the constant unfunded regulatory mandates. This undermining of the program has, and will continue to, deteriorate the physician-patient relationship if Congress does not intervene. We are in agreement that your legislation will help restore confidence in the Medicare program by ensuring beneficiary access to any physician they choose to see, regardless of the physicians participation status.

Despite our strong support, the Alliance recognizes that not every Medicare beneficiary will choose to exercise their right to privately contract and in some cases, private contracting may be inappropriate. Therefore, we support the patient protections included as part of your legislation that would disallow low-income patients and dual-eligibles to enter into such contracts. We also agree that patients with emergency or urgent conditions or those patients who do not have a choice in physicians, should not be eligible to enter into private contracts. Your legislation strikes the appropriate balance between expanding beneficiary choice and protecting the Medicare program and beneficiaries.

Again, Medicare beneficiaries—tax-paying Americans who have paid into the program for their entire working lives—should not be prevented from using their Medicare benefits if they choose to see a

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American Academy of Facial Plastic and Reconstructive Surgery • American Association of Neurological Surgeons  
American Gastroenterological Association • American Society of Cataract & Refractive Surgery  
American Society of Plastic Surgeons • American Urological Association  
Coalition of State Rheumatology Organizations • Congress of Neurological Surgeons  
Heart Rhythm Society • National Association of Spine Specialists • Society for Cardiovascular Angiography and Interventions

physician that does not accept Medicare. In addition, Medicare participating providers should not face penalties or be forced to “opt-out” of the Medicare program in order to privately contract with beneficiaries.

For these reasons, the undersigned organizations of the Alliance extend our strong support of your legislation, H.R. 1700.

Sincerely,

American Academy of Facial Plastic & Reconstructive Surgery  
American Association of Neurological Surgeons  
American Gastroenterological Association  
American Society of Cataract and Refractive Surgery  
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