



July 28, 2009

J. James Rohack, MD  
President  
American Medical Association  
515 N. State Street  
Chicago, IL 60654

Re: Elimination of Consultation Codes

Dear Dr. Rohack:

The American College of Rheumatology respects the leadership and strength of the American Medical Association and is glad to be a member of the Federation. The ACR was shocked to learn in the proposed 2010 Medicare Physician Fee Schedule that consultation codes would be eliminated. The ACR requests that the AMA to take a strong position against the elimination of consultation codes.

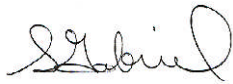
Rheumatologists often report evaluation and management codes with very few procedure codes. In this sense, rheumatologists would be closely linked to primary care physicians in reimbursement. Rheumatologists are set apart by their advanced fellowship training specifically in diagnosing conditions linked to musculoskeletal and joint diseases. Patients with these chronic painful conditions generally are referred by primary care physicians that do not have the time or experience to deal with diagnosing and treating these complex patients. Rheumatologists deserve appropriate reimbursement for providing these consultations. The elimination of consultation codes will have devastating effects on rheumatologists. This elimination will push many rheumatologists to stop seeing Medicare patients, force them into early retirement or to seek an alternative profession creating a severe access to care for patients with debilitating chronic conditions.

It is concerning that CMS is making this proposed change based on administrative issues. CMS believes that physician deserve this reimbursement and therefore have slated the monies to go into other E/M codes. CMS claims to be making these changes because of the errors in reporting these codes. As a physician, I am sure you understand the complex nature of reporting E/M codes. The Office of the Inspector General reviewed the inaccurate reporting of consultation codes and the most frequent reason was inappropriate level. It would be interesting to see if the OIG did a similar study on E/M codes overall. These codes are so complex that most auditors cannot on agree on the appropriate level. CMS seems to be eliminating a group of codes rather than dealing with appropriate education for physicians. This is unacceptable as it will hurt specialty physicians.

With the devastating effects this will have on our specialty and others, the ACR urges the AMA to speak out against the elimination of consult codes and ensure specialists can continue to treat the sick patients for who they were trained to care.

If you have any questions, please contact ACR Director of Government Affairs, Aiken Hackett, at 404-633-3777 or [ahackett@rheumatology.org](mailto:ahackett@rheumatology.org).

Sincerely,



Sherine Gabriel, MD, MSc.  
President  
American College of Rheumatology



Gary Bryant, MD  
AMA Delegate  
American College of Rheumatology

CC: Rebecca Patchin, MD, AMA Board Chair  
Michael Maves, MD, MBA, AMA Executive Vice President