



AMERICAN COLLEGE OF PHYSICIANS  
INTERNAL MEDICINE | *Doctors for Adults*®

February 1, 2010

Dear Member of Congress:

On behalf of the 129,000 physician and medical student members of the American College of Physicians, I am writing to urge you to reach agreement on a legislative pathway to provide affordable care to all Americans and ensure that they have access to primary care physicians and other specialties facing shortages.

We firmly believe that Congress must complete the task of enacting comprehensive health reform legislation consistent with the priorities outlined below. The bills passed by the House and Senate advance many of the elements needed to achieve a sustainable, affordable and high quality health care system for all Americans. We also are aware that Congress now is considering a number of options to move health reform legislation forward in a way that would build upon, but improve, the existing bills. ACP specifically urges that the following be included in any final legislation:

1. **Create a pathway to providing affordable coverage to all Americans.** The bills passed by the House and Senate would provide coverage to 94-96 percent of all legal residents. ACP firmly believes that the final legislation must not back off on the commitment to create a pathway for all Americans to have access to health insurance coverage. We continue to support creating sliding-scale tax credits, expansion of Medicaid to cover the poor and near-poor, insurance market reforms, and providing individuals and small businesses a wide choice of affordable health plans through a health exchange.
2. **Include the strongest possible workforce and payments policies to ensure a sufficient supply of primary care physicians and other specialties facing shortages.** A final bill should include measures in both the House and Senate bills to increase Medicare payments for designated services by primary care physicians. We have provided the Medicare authorizing committees and leadership with specific suggestions on how to ensure that the primary care bonus is effective, combining the best elements of the House and Senate provisions. We also urge adoption of the House provision to increase Medicaid payments for visit services provided by primary care and other physician specialists. We urge adoption of the highest possible mandated funding levels for primary care training programs (including the National Health Service Corps and Title VII health professions funding) and the House's provision to create a new loan repayment program for "front line" health professionals facing shortages. We support the House provision to redistribute 90 percent of unused Graduate Medical Education (GME) positions to primary care. We support provisions in both bills to create a workforce commission to recommend policies to ensure a sufficient supply of primary care and other specialties facing shortages.

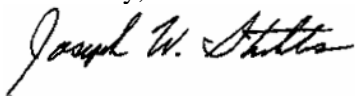
Without the above policies, the United States will experience a catastrophic shortage of primary care physicians, resulting in longer waits for appointments, delays in getting needed care, over-crowded emergency rooms and, overall, higher costs and poorer outcomes of care. Providing Americans with health insurance coverage, although essential, will not ensure that patients have access to care in the absence of policies to increase the numbers of primary care physicians and other specialties facing shortages.

3. **Accelerate pilot-testing and adoption of innovative models, including the Patient-Centered Medical Home, to improve payment and delivery systems to achieve better value.** We support provisions in both bills to establish a Center on Medicare Innovation, but we urge adoption of the House provision to fund two Medicare pilots of the Patient-Centered Medical Home. The Patient-Centered Medical Home has been shown to be one of the most promising models for improving the efficiency and outcome of care. It requires dedicated funding to allow for broader testing and adoption by Medicare and other payers.
4. **Support broad adoption of alternatives to the current medical liability tort system.** Last week, President Obama asked for ideas from either party “to bring down premiums, bring down the deficit, cover the uninsured, strengthen Medicare for seniors, and stop insurance company abuses.” According to the Congressional Budget Office, “tort reform would lower costs for health care both directly, by reducing medical malpractice costs—which consist of malpractice insurance premiums and settlements, awards, and legal and administrative costs not covered by insurance—and indirectly, by reducing the use of health care services through changes in the practice patterns of providers.” It estimated that such reforms “would reduce federal budget deficits by about \$54 billion during the 2010–2019 period.” Although the current bills have modest grant proposals to fund state liability reform initiatives, we urge you to seek bipartisan agreement on broader reforms, including dedicated funding to test health courts as an alternative to trial by jury.
5. **Enact a permanent end to the cycle of Medicare payment cuts caused by the Sustainable Growth Rate (SGR).** The constant threat of Medicare payment cuts inhibits access to care for millions of American’s seniors and military families insured by TRICARE. In addition, a foundation of stable, predictable and positive Medicare payments is a pre-requisite to adoption of innovative payment reforms to create better value and to support patient-centered primary care. The House has passed legislation to replace the SGR with a system to eliminate devastating payment cuts, provide higher updates to all physicians, and allow for increased payments for primary care and preventive services. The Senate must now do the same. We cannot support another temporary “patch” that kicks the can down the road and with it, the cost to taxpayers of enacting a permanent solution.

We recognize that there are strong philosophical and political differences between Democrats and Republicans on how best to improve the health care system. Yet, we continue to hold out hope that there can be bipartisan support for final legislation to create a pathway for all Americans to have access to affordable health insurance coverage, ensure a sufficient supply of primary care physicians and other specialties facing shortages, accelerate adoption of the Patient-Centered Medical Home, and put a permanent end to Medicare SGR cuts. Many of these policies have been included in the past in legislation that has had strong bipartisan support. Even on medical liability reform, we believe that the time is right for both political parties to come together to explore new ideas to reduce health care costs and premiums associated with the current tort system, such as health courts.

In conclusion, ACP reaffirms our commitment to helping Congress achieve a final agreement on comprehensive health reform legislation to provide all Americans with access to affordable coverage, ensure a sufficient supply of primary care physicians and other specialties facing shortages, pilot-test innovative payment and delivery models, reform the medical liability system, and put a permanent end to Medicare SGR cuts.

Yours truly,



Joseph W. Stubbs, MD, FACP  
President