



October 1, 2014

Marilyn Tavenner, Administrator
Centers for Medicare & Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Dear Administrator Tavenner:

On behalf of the American College of Physicians, I am writing to express our support for Medicare reimbursement for advance care planning discussions between doctors, patients and their families. We respectfully urge you to include this provision in your final rule that is expected to be released later this fall.

The ACP is the largest medical specialty organization and the second-largest physician group in the United States. ACP members include 141,000 internal medicine physicians (internists), related subspecialists, and medical students committed to advancing the science and practice of medicine. Internal medicine physicians are specialists who apply scientific knowledge and clinical expertise to the diagnosis, treatment, and compassionate care of adults across the spectrum from health to complex illness.

ACP has been a longstanding supporter of Medicare coverage for voluntary conversations between doctors and patients to create an end of life care plan that advances the needs of the patient. ACP “encourages doctors to routinely raise advance planning with adult patients with decision-making capacity and encourages them to review their values and preferences with their surrogates and family members.” We believe that these conversations should take place in an outpatient setting before an acute crisis so that there is sufficient time for a patient to address their end of life care plans with a physician.

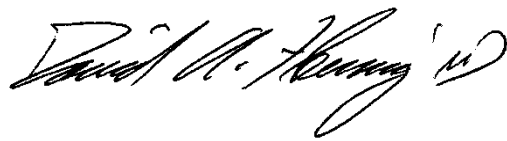
A significant body of evidence exists that shows that advance planning consultations will significantly improve care at the end of life for patients. According to a report recently issued by the Institute of Medicine, “a committee of experts finds that improving the quality and availability of medical and social services for patients and their families could not only enhance quality of life through the end of life, but may also contribute to a more sustainable care system.” The report emphasizes the importance of physician-patient communication and notes that although advance directive documents are useful, they cannot take the place of open, continuous conversations among doctors, patients, and families.

ACP also believes that Medicare should adequately reimburse physicians for these consultations due to the significant amount of time and documentation involved in developing an end of life plan. As you may know, in October of 2013, the CPT Editorial Panel created two new codes to describe the face-to-

face encounter and time that a physician and patient and their family discuss advance care planning. As the AMA/Specialty Society RVS Update Committee noted, “these discussions among physicians, patients, and their families will include multiple factors including: the patient’s current disease state, disease progression, available treatments, cardiopulmonary resuscitation; life sustaining measures, do not resuscitate orders, life expectancy considering the patient’s age and co-morbidities, and clinical recommendations of the treating physician; including reviews of patient past medical history and medical documentation/reports as well as response(s) to previous treatments.”

We appreciate your consideration of this issue.

Sincerely,

A handwritten signature in black ink that reads "David M. Fleming, MD". The signature is written in a cursive style with a large, sweeping initial "D".

David Fleming, MD, MS, FACP
President