American Society of Anesthesiologists

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December 22, 2009

The Honorable Harry Reid
Majority Leader
United States Senate
Washington, DC 20510

Dear Leader Reid:

On behalf of the 44,000 members of the American Society of Anesthesiologists (ASA), we share your goal of achieving access to affordable health insurance for all Americans. We also remain steadfast in our support of the many insurance reforms contained in the "Patient Protection and Affordable Care Act." Regrettably, however, we cannot support the Manager's Amendment to H.R. 3590, nor the underlying bill. On these we would urge "no" votes.

As we have stated in multiple recent letters, and our ASA members have expressed in thousands of telephone calls and other communications to you and your Senate colleagues, ASA, individually and along with our surgical organization colleagues, must oppose any bill that achieves needed reform through financing based on across-the-board cuts to and new fees on Medicare physician Part B services. We also remain gravely concerned about the lack of Medicare Sustainable Growth Rate (SGR) reform in the bill.

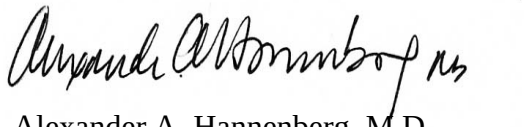
Along these lines, we are pleased that several of the egregious provisions in the earlier draft of H.R. 3590 have been removed, but we remain extremely troubled by the design of the proposed Independent Payment Advisory Board (IPAB) and the sweeping powers that it would have. As medical specialists whom the General Accountability Office (GAO) have confirmed get paid only 33 cents on the dollar under Medicare, as compared to private payers, we cannot countenance unfettered new independent authority that could further erode Medicare payments for all anesthesia services and thereby jeopardize patient treatments for America's seniors and the many baby boomers who will soon need full access to Medicare. In our view, access to quality health care, through needed insurance reform, must carry with it financing that reflects the legitimate cost of care and that does not hasten the bankruptcy of Medicare to achieve it.

Also extremely troubling is the so-called "non-discrimination" language in §2706 of the "Patient Protection and Affordable Care Act." This provision would prohibit health plans from distinguishing among widely varying health care providers acting within the scope of that provider's license. At a time when allied health professionals, such as advanced practice nurses, are converting their degrees from the master's level to doctorate, sometimes via "on-line" classes, this provision would exacerbate patient confusion over greatly differing levels of education, skills and training among health care professionals. Further, this language inappropriately interjects civil rights concepts into well-established state scope of practice laws.

It sets up a collision course between constitutional and state scope of practice laws. As physicians who are committed to providing the highest quality of care possible, ASA believes this provision could jeopardize patient safety and should therefore be removed in its entirety.

Mr. Leader, ASA is a leading force in health care delivery and our members provide the lifeline of modern medicine on a daily basis. We are committed to meaningful health insurance reform, and sincerely hope that we can continue working together to find the right solutions for all Americans in the ensuing conference process.

Sincerely,



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