The American Society of Anesthesiologists supports the efforts of the Centers for Medicare and Medicaid Services (CMS) to ensure the appropriate and timely payment for services deemed reasonable and necessary for the care of beneficiaries.

The Society also positively affirms the requirement that payment errors be eliminated in order to maintain the long-term viability of the Medicare and Medicaid programs.

However, absent a bona fide coding error, nothing within the regulatory framework for the CMS supports limiting payment when services deemed reasonable and necessary have been provided legitimately and competently to an appropriate beneficiary.

As a self-regulating profession, individual physician behaviors and practice patterns are currently and appropriately the sole purview of each state board of medicine that issues a license to practice, and the medical staff structure and credentialing requirements of each licensed healthcare facility in which a physician has been granted privileges.