

Congress of the United States
House of Representatives
Washington, D.C. 20515

October 25, 2006

The Honorable Leslie Norwalk
Acting Administrator
Centers for Medicare and Medicaid Services
Department of Health and Human Services
Room 443-G, Hubert H. Humphrey Building
200 Independence Avenue, S.W.
Washington, D.C. 20201

Dear Acting Administrator Norwalk:

The Centers for Medicare and Medicaid Services (CMS) publishes new values for the Medicare physician fee schedule every year in the *Federal Register*. These values are used not only for the purposes of Medicare reimbursement but also are often used for reimbursement by private insurance companies.

In the proposed rule published earlier this year, values for four Current Procedural Technology (CPT) codes (92551, 99173, 99339, and 99340) often used by pediatricians were missing even though they had been recommended by the AMA/Specialty Society Relative Value Scale Update Committee (the "RUC"). Typically, CMS adopts the recommendations of the RUC when it publishes the Medicare physician fee schedule rule. It is unclear whether the failure to list the values of these codes was a purposeful or inadvertent occurrence. We request that in the final rule on the Physician Fee Schedule to be issued on November 1, 2006, CMS publish these codes, and the values associated with each.

While these codes will rarely be used under Medicare by pediatricians, failure to publish the codes will negatively affect pediatricians serving children in other insurance programs. Unless CMS publishes these codes in the final version of the Fee Schedule, private payors that base their rates on Medicare's valuations will not properly account for the work these doctors perform in treating children. As a result, pediatricians may not be appropriately compensated for their work.

As you know, pediatricians typically receive lower reimbursement than other providers, particularly under the Medicaid program. Publishing the value for the codes in the Final Rule could help pediatricians pay for a Health Information Technology system or improve payment rates for pediatricians who care for children covered under Medicaid or the State Children's Health Insurance Program (SCHIP). It could also help these providers expand access to other children.

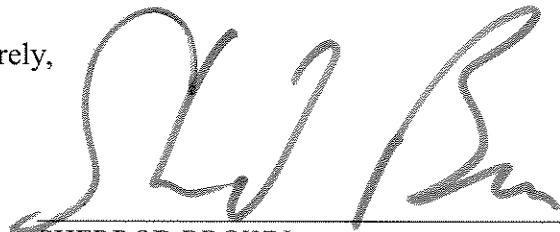
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Again, we request that these codes be published, along with the RVUs associated with each, in the November Final Rule. There is little to no effect on Medicare, but these codes will have a significant impact on the appropriateness of private payment for children's healthcare services. As final rules are due out November 1, 2006, this issue deserves your immediate attention.

Sincerely,



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