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Physicians face painful decision on Medicare

By Andrew Villegas and Mary Agnes Carey
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While most people are focused on the midterm elections Tuesday, the American Medical Association is gearing up for the lame-duck congressional session scheduled to start Nov. 15. Unless Congress intervenes, payments to doctors for treating Medicare patients will be cut by 23 percent on Dec. 1 and another 6.5 percent on Jan. 1.

Cecil B. Wilson, an internist from Winter Park, Fla., who became AMA president in June, is pressing for a 13-month patch that would prevent the Medicare physician cuts. In April, the Congressional Budget Office said that blocking the cuts until January 2012 would cost about \$15 billion. A long-term formula fix, through 2020, would cost about \$276 billion, it said.

The AMA argues that a 13-month reprieve from the reductions would give it time to work with Congress to overhaul the Medicare payment formula. In recent years, the payment formula has called for cuts, but each time lawmakers have stepped in to block them before they took effect or shortly afterward. The AMA could use a win on the issue. The organization was sharply criticized by some physicians for endorsing the new health-care law without getting the formula straightened out in return.

If Congress doesn't block the looming payment cuts, "this will be a catastrophe," Wilson said, with more and more doctors leaving the program and seniors having a harder time getting in to see doctors.

Whatever happens in the lame-duck session, the new Congress is likely to have more doctors. There are 16 physicians in Congress, but dozens more are running for the House or Senate this year. That might provide more sympathy for the AMA on the issue, but the cost of fixing the formula may still be viewed as prohibitive.

Edited excerpts of the interview with Wilson follow.

Q: What's your strategy in the lame-duck session to get the Medicare physician payment cuts canceled?

A: Our strategy is to say to Congress, "What we want from you is to stabilize Medicare payments to physicians for the next 13 months to get us through 2011." And then that will give us an opportunity working with the new Congress to develop a means of getting rid of the formula, putting in a formula or a payment mechanism that recognizes increased costs of care.

Q: But isn't it highly unlikely that's going to happen? What if Congress goes for a shorter-term fix or doesn't address the payment reduction at all?

A: There is no disagreement in Congress this formula is not working. . . . What we're saying to them and what we want seniors to say to them is, "You're threatening our access to care. If physicians cannot keep their doors open

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because Medicare now only pays about half the direct cost of running a practice, then we're going to lose access to care." It will be gut-wrenching for physicians to say, "I can no longer continue to see new Medicare patients." . . . But that's where we are, and if you're talking about a 30 percent cut if Congress does nothing by Jan. 1, this will be a catastrophe.

Q: The AMA has an item on its Web site helping physicians think through this very issue - should you stay in Medicare or not? Do you think that if you don't get a 13-month fix, doctors will simply say, "I'm out of this program?"

A: As a matter of fact, I participated in a webinar [recently] in D.C. Four hundred physicians across the country were involved in the webinar, in which we talked to them about their options. The reality is between now and the end of December physicians have to make a decision about their status related to Medicare. So we are trying to provide information to [them] so they can make a wise decision. Our concern, of course, is that if Congress in the lame-duck session does not address this problem, or they address it in ways that are disruptive to physicians' practices, more physicians are going to say, "You know, I'm just out of here. I cannot keep my doors open and provide care for other patients."

Q: But your efforts so far haven't worked, and now we're in a very severe fiscal situation. Maybe the AMA doesn't have the clout it used to have in Congress?

A: Well, this is not about the AMA; this is about senior citizens who need care. I can just tell you from my own [experience in] Winter Park, Fla., the conversation in the grocery store lines [or] at the shopping mart is, "Do you know any physician who is still taking new Medicare patients?" And the answer is no.

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