

May 2, 2011

The Honorable Jackie Speier  
211 Cannon House Office Building  
Washington, DC 20515

**RE: Opposition to H.R. 1476, “The Integrity in Medicare Advanced Diagnostic Imaging Act of 2011.”**

Dear Representative Speier:

The undersigned members of the Coalition for Patient-Centered Imaging (CPCI), a coalition of national physician and other health care provider organizations dedicated to high quality imaging, are writing to express strong concerns with and opposition to your legislation, H.R. 1476, “the Integrity in Medicare Advanced Diagnostic Imaging Act of 2011.” Unfortunately, this legislation would undermine health care quality, efficiency, and the continuity of care for our patients, and we must therefore strongly oppose its enactment.

The Physician Self-Referral Law, also known as the “Stark Law,” provides an exception for in-office ancillary services which include the use of advanced diagnostic imaging services. This exception protects services ancillary to the referring physician’s professional services which meet certain billing, supervision, and location requirements, including services performed by a physician in the same group practice. It recognizes that referral within a group practice promotes quality, efficiency, and advances the continuity of care offering substantial benefit to our patients.

As drafted, H.R. 1476 would eliminate this exception that many physicians use to provide access to imaging services that our patients rely upon everyday for the prevention, early detection, diagnosis and treatment of diseases. As a result, enactment of the legislation will make health care less accessible, increase inefficiencies and present significant barriers to appropriate screenings and treatments. It would result in delays in treatment and a severing of the attending physician from the actual interpretation of the test. In addition, elimination of this exception would drive patients to more expensive facilities, such as hospitals, to receive these needed services. Not only would this reduce access, but it will also increase costs as hospitals are paid significantly higher fees for these services than the same performed in a physician’s office.

Please know that professional medical societies are taking significant steps to ensure that only medically necessary imaging procedures are performed and, as a result, growth rates are declining. We are developing training guidance, appropriate use criteria, guidelines and other clinical documents to guide our members into delivering the most appropriate care. These additional safeguards strike an appropriate balance and ensure higher quality care.

In conclusion, we believe H.R. 1476 would endanger access to care and deny patients timely diagnosis and initiation of treatment of life-threatening illness and disease. Therefore, for these reasons, we must strongly oppose its passage. If you would like to discuss our concerns further, please contact Amy Nordeng (Medical Group Management Association – MGMA) at 202/293-3450 or Patrick Hope (American College of Cardiology - ACC) at 202/375-6631.

Sincerely,

American Academy of Neurology  
American Association of Clinical Urologists  
American Association of Neurological Surgeons  
American Association of Orthopedic Surgeons  
American College of Cardiology  
American College of Rheumatology  
American College of Surgeons  
American Gastroenterological Association  
American Society of Nuclear Cardiology  
American Society of Echocardiography  
American Society of Neuroimaging  
American Urological Association  
Association of Black Cardiologists  
Cardiology Advocacy Alliance  
Congress of Neurological Surgeons  
Medical Group Management Association  
Society for Cardiovascular Angiography and Interventions