



Georgia
CHAPTER

**Georgia Chapter of the
American College of Cardiology**
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[Urgent Message from your President, Dr. Joe Wilson](#)

Dear Members,

I am writing you as a member of the Georgia ACC to tell you something that you probably already concluded. Never before while you have been practicing cardiology has there been such a threat to your abilities to care for your patients in the ways that you have been trained. So much of the media now is focused on the HR 3200 bill going through the House of Representatives, sometimes referred to as the Obama Healthcare Plan. It is discussed frequently in the media, but while the intellectual and political pros and cons are debated, CMS (senders for Medicare and Medicaid services) has released the proposed rule changes for 2010. It is these changes, if implemented that will significantly affect your ability to care for your patients. We as cardiologists cannot sit back and hope the right thing is being done in Washington.

Your national ACC has diverted all of its advocacy efforts to the goal of putting enough political pressure on CMS to put a hold on these 2010 fee schedule changes and demand an evaluation of the data used in their assumption. Examples of proposed cuts include a 42% reduction in transthoracic echocardiograms with color-flow Doppler (93306). 24% in left heart catheterizations. 21% cut in electrocardiograms. Overall, the estimate for CMS cuts across the board for cardiology would average between 14 and 25%. The proposal includes eliminating increased payment for consultations and billing all patients at a return visit level.

This issue at the ACC level is not about politics. It is not about partisan, democrat or republican ideas on changing healthcare reform. **THIS IS ABOUT PATIENTS, YOUR PATIENTS.** You need to be involved for their sake and for the sake of your office. Impact of these changes, if they were to be implemented, would significantly reduce access for patients. Practices could not afford to provide certain services to patients, particularly in a timely fashion. Your overhead would have to be reduced, which includes laying off important staff members. The changes that would be necessary for your practice simply to stay in practice would significantly reduce the quality of care to the patients. The patients themselves would be significantly affected. If outpatient imaging was less available, they would be forced into a hospital based imaging system with much higher out of pocket expenses for your patients. Availability and access would also be limited if outpatient imaging was curtailed.

Your ACC on a national level is focused exclusively from an advocacy standpoint on these CMS cuts. The window of opportunity to make a difference closes at 5:00 p.m. on Monday, August 31, 2009. That is when the period open for comments closes. It is important that each member become involved by emailing a letter to your representative, and any other representatives you have a relationship with in the State of Georgia. Enclosed with this email is a sample letter along with talking points. It is important that these letters be very personal and I encourage you to use the sample letter as an outline and add personal notes.

The patients will be the ones that are affected by this. This is about patients, patient care and getting them involved is important. The chance in your office to encourage your patients to have their voices heard will make a difference.

Lastly, the effort for this is coming through your ACC, but also the political action committee (P.A.C.) of your ACC. Your P.A.C. is committed to the well-being of your patients and your ability to take care of your patients. If you have not done so, I encourage you to contribute to the P.A.C. You can do this by visiting accpacweb.org.

If you have read this far, you are serious about this and I hope you are. On Friday, August 21st, in the Orlando area, all cardiology practices have closed their outpatient activities. More than 150 cardiologists will be traveling to downtown Orlando along with most of their staff on buses to speak loudly as a group that these cuts cannot be implemented and maintain the quality of care that is necessary. I encourage you as a physician in Georgia to make your voice known as well.

Let me know if there is anything I can do personally or the Georgia Chapter of the ACC can do to help with your efforts to make sure that your patients get the care they need.

Don't give up,

Joe Wilson, Jr., F.A.C.C.

For your convenience and time sake, please go to the Georgia Chapter website to download your sample letter and talking points. www.accga.org