June 11, 2012

Marilyn Tavenner  
Acting Administrator  
Centers for Medicare & Medicaid Services  
Department of Health and Human Services  
Attention: CMS–2370–P  
Room 445-G, Hubert H. Humphrey Building  
200 Independence Avenue, S.W.  
Washington, D.C. 20201

RE: CMS–2370–P; Medicaid Program; Payments for Services Furnished by Certain Primary Care Physicians and Charges for Vaccine Administration Under the Vaccines for Children Program

Dear Ms. Tavenner:

The undersigned organizations, as advocates for child and adolescent health, appreciate the opportunity to comment on the above-referenced proposed rule promulgated by the Centers for Medicare and Medicaid Services and published in the Federal Register on May 11, 2012.

We applaud and strongly support this proposed rule implementing Section 1202 of the Affordable Care Act (ACA), which requires state Medicaid agencies to reimburse specified participating physicians at Medicare rates for primary care services for two years. On average, Medicaid reimburses pediatricians 30 percent below Medicare rates for comparable services. This low reimbursement has built significant barriers to physician participation in the Medicaid program and has raised concerns about the ability of children to access the medically necessary health care services they are entitled to under the program. The two year Medicaid primary care payment increase, as implemented by this proposed rule, is a critical step toward enhancing access to health care for the nation’s children who will be covered by Medicaid in 2013 and 2014.

In particular, we would like to express our support for the inclusion of pediatric subspecialists, in addition to primary care pediatricians, as physicians eligible for the payment increase. As stated in the preamble of the proposed rule, pediatric subspecialists play a vital role in the provision of primary care services for children. As a result, including these physicians in the payment increase is essential to ensure that this ACA provision has the greatest possible impact to improve access to care for children. We urge CMS to clarify in the final rule that any pediatric subspecialty, regardless of which board provides for its certification, should be deemed eligible for enhanced Medicaid payment for primary care services. Some pediatric subspecialties are technically board certified outside of the specialty designation of pediatrics, and improving child access to primary care services provided by them is no less important.

Additionally, we strongly support the requirement in the proposed rule that the Medicaid payment increase apply to all primary care services outlined in statute, including those not recognized for payment by Medicare. Primary care services utilized by children in Medicaid, as recognized by the proposed rule, are often not recognized for payment in the Medicare even when values for those services are published in the Medicare Physician Fee Schedule. Applying the payment increase to all
primary care services will help ensure that the payment increase equitably benefits the pediatric population.

Our organizations appreciate your work on this proposed rule and we thank you for addressing the unique health care needs of children through the implementation of this Medicaid primary care payment increase.

Sincerely,

AANS/CNS Section on Pediatric Neurosurgery
Academic Pediatric Association
American Academy of Ophthalmology
American Academy of Otolaryngology—Head and Neck Surgery
American Academy of Pediatrics
American Association for Pediatric Ophthalmology and Strabismus
American Association of Neurological Surgeons
American College of Rheumatology
American College of Surgeons
American Medical Association
American Pediatric Society
American Society for Pediatric Hematology Oncology (ASPHO)
American Society of Pediatric Nephrology
American Society of Pediatric Neurosurgeons
American Society of Plastic Surgeons
American Thoracic Society
Ascension Health
Association of Medical School Pediatric Department Chairs
Child Neurology Society
Children's Defense Fund
Children’s Health Fund
Children’s Hospital Association
Community Catalyst, New England Alliance for Children’s Health
Congress of Neurological Surgeons
Council of Pediatric Subspecialties
Doctors for America
First Focus
Jewish Federations of North America
National Alliance to Advance Adolescent Health
National Association of Social Workers
North American Society for Pediatric Gastroenterology, Hepatology and Nutrition
RESULTS
Society for Adolescent Health and Medicine
Society for Pediatric Research
Society for Social Work Leadership in Health
The Children’s Partnership
Voices for America’s Children