

# Cardiology Challenges

issues CAA practices face in providing care and access

Healthcare reform is one of the top items on the Obama administration's agenda. The Cardiology Advocacy Alliance (CAA) applauds the focus on this critical issue and is eager to work with Congress to ensure that the needs of cardiac patients are met and the role of private practice is understood and valued. CAA members face a number of potential hurdles, however:

**Restricting patient access to lifesaving diagnostic tools:** Medicare's proposed 2010 Physician Fee Schedule (PFS) calls for cuts of 11-15 percent or more for cardiologists. These reductions would be on top of the 21.5 percent mandated Sustainable Growth Rate cut slated for 2010. Such drastic reimbursement cuts would force cardiology practices to lay off staff, close outlying offices and reduce services, thus restricting patient access to vital technology - especially in rural locations.

**Raising the equipment utilization (EU) assumption rate:** CMS proposes to increase the EU assumption rate from its current 50 percent to 90 percent for imaging equipment valued at more than \$1 million. Congress proposes to raise the EU rate to 65 or 75 percent. Such a significant rate increase would slash imaging reimbursement, thus affecting physicians' ability to provide patient access to critical diagnostic tools. Data demonstrate that practices meet or are below the current 50 percent utilization rate.

**Hampering the physician-patient relationship by restricting the ability to provide the right imaging test at the right time:** CAA supports physician credentialing, lab accreditation and appropriateness criteria to improve the quality of patient care and ensure appropriate use of imaging technology. Investing in diagnostic technology enables practices to maintain the physician-patient relationship, control image and equipment quality, promote faster and easier access to results and ensure a more patient-friendly experience. It's critical that patients continue to have access to diagnostic procedures that are interpreted by cardiologists who are trained in cardiac imaging, familiar with patients' medical histories, and can treat their cardiac disease appropriately.

**Restricting the rights of physicians to own assets, including specialty facilities and imaging equipment:** CAA supports the fundamental right of physicians to own assets including hospitals, ambulatory surgery facilities and imaging equipment. There is an ongoing effort in Congress to limit physicians' right to own or use assets such as cardiac hospitals or in-office diagnostic tools, which would lead to longer waits and higher costs for both Medicare and patients. CAA supports physician credentialing, lab accreditation

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## Issues cardiologists face in the fight against heart disease

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and appropriateness criteria to ensure that patients get the right test at the right time. CAA supports disclosure of ownership and loan arrangements to promote transparency of physician ownership of equipment and specialty hospitals, and emergency care protocols to ensure patient safety in physician-owned facilities.

**A 21.5-percent cut to the Physician Fee Schedule in 2010:** Even though Congress passed the Medicare Improvement to Patients and Providers Act last year to mitigate a 10.6-percent cut in physician fees for 2008 and provide a 1.1-percent increase for 2009, in reality cardiologists have seen a 2-6 percent Medicare payment reduction this year due to other changes in the PFS. In order to fund the 2008-2009 “fix,” physician payments will be slashed by 21.5 percent in 2010. In the past, Congress has intervened on behalf of physicians to prevent similarly mandated cuts to physician payments, but these “kicking the can down the road” intercessions have resulted in a roller coaster ride of economic worries for physicians. CAA supports measures that stop implementation of the flawed SGR formula and works toward finding a permanent resolution to reimburse physicians fairly for the care they provide to Medicare patients.

Cardiovascular disease is the Number One killer in America—claiming more lives each year than cancer, accidents and diabetes combined. Americans with heart disease face a tough but increasingly winnable battle, thanks to advances in cardiology during the past 10 years that have reduced heart-related death and the severity of heart-related illness by 27 percent.

But those gains are at risk because of proposed Medicare reforms and certain provisions within Congressional healthcare legislation. These regulatory and legislative issues would cause lengthy delays in diagnosis and treatment by forcing practices to curtail services, thus limiting patient access to critically important diagnostic tools.

**Put patients first:  
Ensure that cardiologists have access  
to the tools they need to diagnose and treat heart disease,  
America’s Number One Killer.**



CAA provides national leadership on legislation, policies and reimbursement methodologies that affect cardiovascular patients’ quality of care, access to services and the stability of cardiovascular group practices. CAA represents the interests of more than 5,000 private practice physicians. For more information, please visit our website: [cardiologycaa.com](http://cardiologycaa.com)