

January 12, 2015

Marilyn Tavenner Administrator Centers for Medicare & Medicaid Services 200 Independence Ave., SW Washington, DC 20201

RE: Draft 2016 Letter to Issuers in the Federally-facilitated Marketplaces

## Dear Administrator Tavenner:

On behalf of the American Academy of Family Physicians (AAFP), which represents 115,900 family physicians and medical students across the country, I write in response to the draft 2016 letter to issuers in the federally-facilitated marketplaces as issued by the Centers for Medicare & Medicaid Services (CMS) on December 19, 2014.

In Chapter 2, Section 3 of the letter CMS discusses information on network adequacy evaluation and network provider directory requirements for qualified health plans and stand-alone dental plans. The AAFP appreciates CMS continued attention to this since we continue to have increasing concerns with current practices being deployed by health insurance companies whereby they arbitrarily eliminate physicians from their network forcing patients to identify and secure the services of a new physician. This so-called "network optimization" is disruptive to patients and their physicians and, in our opinion, a violation of the core tenants of quality primary care.

We recognize that insurers have a responsibility to align networks of physicians and hospitals to maintain affordable premiums while ensuring quality and efficiency. However, we feel that disruptions to the patient primary care physician relationship are contrary to both of these goals. Primary care is relatively inexpensive as compared to specialty or hospital care. It also benefits from continuity and trusting relationships.

The draft letter states that CMS will reuse similar certification process in 2016 that were used in 2015 to assess provider networks and that the agency will use a "reasonable access" standard in order to identify networks that fail to provide access without unreasonable delay. While the AAFP encourages CMS to assess network adequacies, the AAFP believes more should be done to verify that plans operating in the federally-facilitated marketplaces ensure timely access to primary care.

In Chapter 2, Section 10 of this letter the agency discusses efforts to ensure that all marketplace consumers, regardless of medical condition, have appropriate access to prescription drugs. The AAFP concurs with this effort since it is the AAFP's prescribing policy to oppose any actions that limit patients' access to physician-prescribed pharmaceuticals.

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Finally, the AAFP recognizes that CMS must move quickly and prepare policies for the 2016 federally-facilitated marketplaces; however the extremely short comment period provided by CMS limits the ability for meaningful public comment on the draft letter. We therefore urge CMS to use rulemaking and seek public comment on future letters to issuers in the federally-facilitated marketplaces.

We appreciate the opportunity to provide these comments and make ourselves available for any questions you might have. Please contact Robert Bennett, Federal Regulatory Manager, at 202-232-9033 or <a href="mailto:rebennett@aafp.org">rebennett@aafp.org</a>.

Sincerely,

Reid B. Blackwelder, MD, FAAFP

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**Board Chair**