

September 28, 2015

Andy Slavitt, **Acting Administrator** Centers for Medicare & Medicaid Services 200 Independence Ave., SW Washington, DC 20201

Dear Acting Administrator Slavitt:

I am writing on behalf of the American Academy of Family Physicians (AAFP) and our 120,900 members to share our views and recommendations on CMS's current work to establish requirements governing the collection and dissemination of information regarding physician participation in insurance networks offered through Medicare Advantage and the health insurance marketplaces. CMS has suggested that insurers participating in these programs be required to update their respective physician network directories every 30 days. We are concerned that the frequency of reporting recommended by CMS will have significant unintended consequences and may actually hinder the collection of accurate information.

The AAFP is a strong supporter of your efforts to ensure that patients have accurate information on the participation of physicians in all insurance networks and we applaud CMS's efforts to ensure that patients have timely access to this information. Over the past year we have been working closely with other physician organizations and America's Health Insurance Plans (AHIP) to identify solutions that meet consumer expectations and CMS's objective. We believe that such a solution exists and can be implemented in a manner that limits the administrative impact on physicians and their practices.

Family physicians are extremely vocal about their frustrations with the increasing level of administrative burden being placed on their practices which do not lead to better patient care. We are concerned that the current proposal would require physicians and/or their practices to respond to inquiries from insurance companies at a high frequency, thus contributing to their frustrations with administrative burdens. The AAFP knows that over 60 percent of family physicians have contractual relationships with 7 or more insurance companies. If each of these insurers requested information on network participation and the physician's status on accepting new patients on a 30 day interval, a family physician would receive more than 90 such requests in a year.

Our concern is that this level of administrative reporting may result in practices simply not responding to requests for information, therefore making our shared desire to provide accurate and timely information to patients less achievable. Based on these concerns, we would strongly encourage CMS to consider a reporting interval of 90 days versus 30 days. We feel that collecting and reporting this important information on a 90 day interval will not jeopardize accuracy of network participation.

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The AAFP appreciates the commitment you have towards finalizing these recommendations and we fully support the goal of providing consumers with timely access to accurate network directories. We just encourage a process that balances the administrative burden on physicians and their practices with these worthwhile goals. Please contact Shawn Martin, Senior Vice President of Advocacy, Practice Advancement, and Policy at smartin@aafp.org or (202) 232.9033 for additional information.

Sincerely,

Reid B. Blackwelder, MD, FAAFP

Board Chair

CC:

Sean Cavanaugh, Deputy Administrator & Director

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