

April 1, 2014

The Honorable Harry Reid Majority Leader **United States Senate** Washington, DC 20510

The Honorable Mitch McConnell Minority Leader **United States Senate** Washington, DC 20510

The Honorable John Boehner Speaker U.S. House of Representatives Washington, DC 20515

The Honorable Nancy Pelosi Minority Leader U.S. House of Representatives Washington, DC 20510

Dear Leader Reid, Speaker Boehner, Minority Leader McConnell, and Minority Leader Pelosi:

Irrespective of any short-term actions Congress may take, the American Academy of Family Physicians and the 110.600 members we represent call on the House and Senate to intensify efforts to enact permanent SGR repeal legislation during the 113th Congress. Congress should not prolong the application of this failed policy. Earlier this year, Congress demonstrated strong bipartisan and bicameral support for repealing the SGR and clearly the time for final action is now.

For several years, Congressional leaders have implored physician organizations to develop a consensus reform plan that would repeal the current SGR formula and implement new payment approaches that moved away from volume-based payment incentives towards new payment formulas that spur innovations in care delivery, improve the quality of care provided, and encourage efficient use of Medicare resources. A bipartisan and bicameral group of Congressional legislators, working closely with physician organizations and other stakeholders, have produced such a policy – the SGR Repeal and Medicare Provider Payment Modernization Act (HR 4015/S 2000).

This legislation is supported by the Chairmen and Ranking Members of the three Congressional committees of jurisdiction and every national physician organization, including the American Academy of Family Physicians. In fact, on March 5, over 500 organizations representing physicians of all specialties, in all states, sent a letter calling for the enactment of this legislation into law. The unified support of organized medicine is unprecedented and demonstrates the commitment of physicians to creating a better health care system.

This overwhelming support should not be ignored. How to finance these important reforms can be challenging, but not impossible. We believe that the bipartisan, bicameral group of lawmakers who reached consensus on the underlying policy can do the same on how to finance the policy.

Reid B. Blackwelder, MD Robert L. Wergin, MD Kingsport, TN

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History suggests that after 11 years, 16 short-term fixes, and more than \$150 billion spent on temporary solutions, Congress will be tempted to accept a 17th, 18th, and 19th patch as successful solutions to this ineffective policy. We believe that the 113th Congress will choose to defy this historical precedent and take the necessary steps to ensure that the SGR is relegated to the ash heap of failed policies and the Medicare program is set on a new course that rewards innovation in care delivery and a higher standard of quality for beneficiaries.

Our members, but more importantly their patients, are counting on you. We need the real solutions included in HR 4015/S 2000 and we refuse to accept that the process of identifying acceptable financing options precludes action on this important legislation. The AAFP and our members stand ready to help in achieving this goal.

Sincerely,

Jeffrey J. Cain, MD, FAAFP

**Board Chair** 

C: Members, United States Senate Members, U.S. House of Representatives