



AMERICAN ACADEMY OF  
FAMILY PHYSICIANS  
STRONG MEDICINE FOR AMERICA

December 7, 2011

Marilyn Tavenner  
Acting Administrator  
Centers for Medicare & Medicaid Services  
Department of Health & Human Services  
Attention: CMS-9070-P  
P.O. Box 8012  
Baltimore, MD 21244-1850

Re: Regulatory Provisions to Promote Program Efficiency, Transparency, and Burden Reduction

Dear Ms. Tavenner:

On behalf of the American Academy of Family Physicians (AAFP), which represents more than 100,300 family physicians and medical students nationwide, I write in response to the Centers for Medicare & Medicaid Services' (CMS) [proposed rule](#) entitled *Medicare and Medicaid Program; Regulatory Provisions To Promote Program Efficiency, Transparency, and Burden Reduction* as published in the October 24, 2011 *Federal Register*.

This rule proposes several reforms in Medicare and Medicaid regulations that CMS has identified as unnecessary, obsolete, or excessively burdensome on health care providers and beneficiaries. We continue to applaud CMS and the Administration for taking these steps in response to Executive Order 13563. In a [letter](#) sent June 29 to Secretary Sebelius, the AAFP identified other onerous regulations and provided recommendations on how to improve them. As the agency takes further steps in response to Executive Order 13563, we strongly encourage you to consult this letter. The AAFP offers the following comments to sections of this proposed rule that directly impact family physicians.

*Revocation of Enrollment and Billing Privileges in the Medicare Program (§ 424.535)*

The AAFP supports the proposal to eliminate the re-enrollment bar in instances when physicians have not responded timely to requests for revalidation of enrollment or other requests for information initiated by CMS. We concur with CMS that the re-enrollment bar in such circumstances often results in unnecessarily harsh consequences for physicians and could cause beneficiary access issues in some cases. We appreciate that CMS recognized and is addressing this problem.

*Deactivation of Medicare Billing Privileges (§ 424.540)*

The AAFP also supports the proposal to eliminate the current Medicare requirement that automatically deactivates a physician who has not submitted a Medicare claim for 12 consecutive months. We concur that

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this will help some physicians from inadvertently being barred from re-enrolling in Medicare. Family physicians routinely practice medicine on a diverse patient population in a variety of settings. A family physician could enroll in Medicare, but then only treat children or other traditionally non-Medicare patients. Other instances exist where a family physician has two separately enumerated practice locations listed on the Form CMS-855I, yet typically only performs services at one of them. In both examples, the family physician conceivably would not submit a Medicare claim within 12 consecutive months. The AAFP supports the proposal for CMS to only temporarily deactivate rather than permanently revoke these physicians' billing privileges.

The AAFP believes the proposed eliminations of the current 12-month Medicare deactivation requirement and the re-enrollment bar are particularly valuable and timely given the upcoming re-enrollment or re-validation of all physicians who have not completed enrollment since March of 2011.

*E-Prescribing (§ 423.160)*

The AAFP appreciates that the agency continues to update e-prescribing technical requirements so that Medicare prescription drug plans and Medicare Advantage plans offering prescription drug plans meet the current HIPAA transaction standards. If CMS regulations continue to name specific standards including version information, CMS should also allow the use of subsequent versions as well.

We appreciate the opportunity to provide these comments and make ourselves available for any questions you might have or clarifications you might need. Please contact Robert Bennett, Federal Regulatory Manager, at 202-232-9033 or [rbennett@aafp.org](mailto:rbennett@aafp.org).

Sincerely,



Roland A. Goertz, MD, MBA, FFAFP  
Board Chair