



AMERICAN ACADEMY OF
FAMILY PHYSICIANS
STRONG MEDICINE FOR AMERICA

March 30, 2011

Donald Berwick, M.D.
Administrator
Centers for Medicare & Medicaid Services
Department of Health & Human Services
P.O. Box 8010
Baltimore, MD 21244-8010

Attention: CMS-3225-P

Dear Dr. Berwick:

On behalf of the American Academy of Family Physicians (AAFP), which represents more than 97,600 family physicians and medical students nationwide, I am writing in response to the "Patient Notification of Right to Access State Survey Agencies and Medicare Beneficiary Notification of the Right to Access Quality Improvement Organizations" proposed rule published in the February 2, 2011 Federal Register.

This proposed rule requires Medicare certified providers and suppliers to provide Medicare beneficiaries with information about their right to file a written complaint with the state Quality Improvement Organizations (QIOs). It also proposes to expand the requirement that certain Medicare providers and suppliers inform all patients about state agency contact information.

These new requirements apply to ambulatory surgical centers, hospices, hospitals, long term care facilities, home health agencies, comprehensive outpatient rehabilitation facilities, critical access hospitals, clinics and rehabilitation agencies, portable x-ray services, rural health clinics and federally qualified health centers. The requirement does not pertain to physician offices, but the AAFP offers the following comments since many family physicians practice medicine in rural health clinics and federally qualified health centers.

Though the AAFP supports the flexibility given to healthcare facilities in how they design their beneficiary notices, the AAFP also is concerned that facilities could inadvertently provide inaccurate or outdated QIO and state agency contact information. We, therefore, urge CMS to include precise QIO and state agency contact information (mailing address, electronic mail address, and telephone number) in the final rule and on the CMS website to prevent this avoidable possibility. Furthermore, we request that CMS provide an example of an appropriate notice in the final rule to reduce the estimated 2-hour burden it will take each of the 3,758 Medicare approved rural health clinics and the 4,384 federally qualified health centers to create their own notices.

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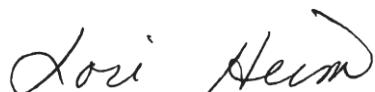
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Finally, the AAFP urges CMS to precisely define who is eligible to be the beneficiary's representative or surrogate so that these notices are consistently provided to the appropriate parties and healthcare facilities are not held liable for noncompliance.

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

Sincerely,

A handwritten signature in black ink that reads "Lori Heim". The signature is written in a cursive, flowing style.

Lori J. Heim, MD, FAAFP
Board Chair