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December 15, 2011

Attention: Document Identifier CMS—10417
Division of Regulations Development
Office of Strategic Operations and Regulatory Affairs
Centers for Medicare & Medicaid Services
Room C4-26-05
7500 Security Boulevard
Baltimore, MD 21244-1850

To whom it may concern:

The American College of Cardiology is transforming cardiovascular care and improving heart health through continuous quality improvement, patient-centered care, payment innovation and professionalism. The College is a 40,000 member nonprofit medical society comprised of physicians, nurses, nurse practitioners, physician assistants, pharmacists and practice managers, and bestows credentials upon cardiovascular specialists who meet its stringent qualifications. The College is a leader in the formulation of health policy, standards and guidelines, and is a staunch supporter of cardiovascular research. The ACC provides professional education and operates national registries for the measurement and improvement of quality care. More information about the association is available online at <http://www.cardiosource.org/ACC>.

The ACC is concerned about several aspects of this request for emergency clearance to collect data. None of the information CMS wishes to collect is necessary to comply with section 1862(a)(1)(a) of the Social Security Act or to prevent public harm. Instead, this request is another rash step in a well-intentioned but hastily conceived prepayment review demonstration project.

Since announcement of this program on November 15th, only minimal information provided in a single, short fact sheet has been provided to the public. The affected public in this instance will likely include physicians and hospitals who will be responding to the 2.7 million requests for medical records. We say likely, because even these details have not yet been solidified and shared with the public. Most importantly, patients will be affected if physicians avoid performing reasonable and necessary procedures in an effort to avoid scrutiny.

Physicians and hospitals that provide a significant amount of cardiac, vascular, spine and orthopedic care may experience severe cash flow

The mission of the American College of Cardiology is to advocate for quality cardiovascular care — through education, research promotion, development and application of standards and guidelines — and to influence health care policy

problems when payment is delayed. Little information has been provided regarding how much additional time prepayment review will add to reimbursement. If the time is significant, the impact on finances is worse. This is especially true at the first of the year, when patients are paying deductibles and many hospitals and physician offices are dealing with lags in cash flow. It is imperative that payments be made in a timely fashion that complies with states' prompt payment rules.

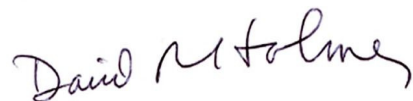
We are also concerned that this data collection will be conducted by multiple contractors with different roles. In addition to the demonstration program that will be conducted by Recovery Audit Contractors (RACs) at CMS' direction, at least one local Medicare Administrative Contractor (MAC) is conducting a similar, yet entirely separate prepayment review program. Hospitals and physicians in MAC Jurisdiction 9 (Florida, Puerto Rico, and the Virgin Islands) are facing 100% prepayment review of 15 inpatient diagnosis related groups (DRGs). This program begins January 1, 2012, yet was also only announced on November 15th.

Finally, it seems the burden estimates are inconsistent. The narrative suggests 2.7 million responses at 30 minutes each for a total of [sic] 1.36 million hours. However, the table indicates 2.7 million responses at 2 hours each for a total of 5.4 million hours.

The ACC respectfully suggests that CMS delay implementation of the aforementioned demonstration project and any MAC prepayment review programs. Taking the time to follow HHS' Guidance for Completing an Information Collection Request with multiple comment periods will give CMS adequate time to develop and share the details of the demonstration project with affected individuals over the coming months on a more reasonable timeline.

Thank you for your consideration of these comments. Please contact James Vavricek, Senior Specialist in Regulatory Affairs, at jvavricek@acc.org or 202-375-6421 with any questions or information requests.

Sincerely,

A handwritten signature in dark ink, appearing to read "David R. Holmes". The signature is fluid and cursive, with the first name "David" being more prominent.

David R. Holmes, Jr., MD, FACC
President