

June 25, 2014

The Honorable Ron Wyden
Chairman
Senate Committee on Finance
219 Dirksen Senate Office Building
Washington, DC 20510

The Honorable Orrin Hatch
Ranking Member
Senate Committee on Finance
219 Dirksen Senate Office Building
Washington, DC 20510

The Honorable Dave Camp
Chairman
House Committee on Ways and Means
1102 Longworth House Office Building
Washington, DC 20515

The Honorable Sander M. Levin
Ranking Member
House Committee on Ways and Means
1106 Longworth House Office Building
Washington, DC 20515

The Honorable Fred Upton
Chairman
House Committee on Energy and Commerce
2125 Rayburn House Office Building
Washington, DC 20515

The Honorable Henry Waxman
Ranking Member
House Committee on Energy and Commerce
2322A Rayburn House Office Building
Washington, DC 20515

Dear Chairmen Wyden, Camp, and Upton, Senator Hatch, and Representatives Levin and Waxman:

On behalf of physicians and patients who participate in Medicaid, we write to request that you extend the Medicaid payment policy under Section 1902(a)(13)(C) of the Social Security Act for at least two years, and make physicians who practice psychiatry and neurology eligible for payments under this policy.

The Patient Protection and Affordable Care Act (P.L. 111-148) increased Medicaid payments for certain evaluation and management services to match Medicare rates for 2013 and 2014. Although this provision originally targeted primary care, the Centers for Medicare and Medicaid Services (CMS) expanded the definition of eligible specialties to include all subspecialists accredited by the American Board of Internal Medicine. Psychiatry and neurology, while fully accredited by the American Board of Psychiatry and Neurology, were excluded on a regulatory technicality. CMS stated that “although we recognize the role that other specialty physicians play in providing primary care services, the authority does not exist to extend the payment to other categories of physicians.”

Psychiatrists and neurologists provide medical services critical to ensuring continuity of care for Medicaid patients, and rely heavily on evaluation and management codes. Psychiatrists have a disproportionate number of patients enrolled in Medicaid, which is now the dominant source of funding for treatment and support services for both children and adults living with severe mental illness. A majority of neurologists see Medicaid patients on an ongoing basis, not for a one-time consultation or referral. Instead of improving Medicaid beneficiaries’ access to services across

the medical spectrum, CMS arbitrarily picks “winners” and “losers” based on Board accreditation. As a result:

- A child or adult with a mental illness, such as schizophrenia, may be treated by a family physician who receives Medicare rates, but a highly trained psychiatrist still receives Medicaid rates.
- A child with a neurological condition, such as autism or epilepsy, may be treated by a pediatrician who receives Medicare rates, but a pediatric neurologist – who received additional training to treat these conditions – still receives Medicaid rates.

We are pleased that Congress has already recognized this unjustified pay disparity. The bipartisan and bicameral Enhanced Access to Medicaid Services Act (S. 755/H.R. 1838) recognizes the importance both psychiatry and neurology play in offering evaluation and management services to Medicaid beneficiaries, and seeks the addition of both specialties to the enhanced Medicaid payment policy.

It is vitally important that the enhanced Medicaid payment policy enacted under the Affordable Care Act is extended with the inclusion of psychiatry and neurology to ensure healthcare access for millions of low-income Americans. We thank you for your attention to this important matter.

Sincerely,

ALS Association
American Academy of Addiction Psychiatry
American Academy of Child and Adolescent Psychiatry
American Academy of Neurology
American Association of Community Psychiatrists
American Brain Coalition
American College of Rheumatology
American Epilepsy Society
American Group Psychotherapy Association
American Headache Society
American Neurological Association
American Psychiatric Association
American Psychological Association
Benign Essential Blepharospasm Research Foundation
Brain Injury Association of America
Child Neurology Society
Cure PSP
Epilepsy Foundation
Intracranial Hypertension Research Foundation
International Bipolar Foundation
International Essential Tremor Foundation
M-CM Network
Mental Health America
Muscular Dystrophy Association

National Alliance on Mental Illness
National Association for Children's Behavioral Health
National Association of State Head Injury Administrators
National Ataxia Foundation
National Council for Behavioral Health
National Multiple Sclerosis Society
Parkinson's Action Network
Schizophrenia and Related Disorders Alliance of America
The Neuropathy Association
Tremor Action Network