



March 24, 2015

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

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

Dear Chairman Ryan and Ranking Member Levin:

On behalf of the Ambulatory Surgery Center Association (ASCA), representing the interests of more than 5,400 Medicare-certified ambulatory surgery centers (ASCs), I appreciate the opportunity to provide comments on the proposed legislation to repeal the Sustainable Growth Rate (SGR). We commend the bipartisan efforts to develop a consensus proposal to finally repeal the fatally flawed SGR payment formula and look forward to working with the Committees to advance the legislation and move to a more efficient health care system.

ASCs and the SGR

Due to the fact that certain procedures performed in ASCs are reimbursed at the physician office rate, the SGR has a direct impact upon ASCs and the physicians who treat Medicare patients in these facilities. ASCA supports a long term solution to this flawed formula that will provide future stability for all Medicare providers. As Congress moves to rebase physician payment based on quality rather than quantity of care, ASCs are well positioned to be an important part of value-based payment models. Our industry looks forward to being part of the solution for Medicare's future.

SGR Repeal and Global Payments

We applaud the Committees for proposing a permanent repeal of the SGR, and for including a provision that would rescind the Centers for Medicare and Medicaid Services' (CMS) proposed policy to transition all 10-day and 90-day global codes to 0-day codes. Increasing the accuracy of physician payment and paying practitioners more accurately for the services they provide is an important goal, and ASCA believes that CMS should work with the physician community to better review, research and ensure accurate and fair reporting of the broad spectrum of care that is provided to surgical patients.

ASCs and Quality Care

Quality care is a hallmark of the ASC community. Beginning in 2006, the ASC community began urging the Centers for Medicare & Medicaid Services (CMS) to establish a uniform quality reporting system to allow all ASCs to publicly demonstrate their performance on quality measures. On October 1, 2012 CMS implemented the preliminary stages of a quality reporting system and has added additional measures each year since. To date, over 98% of Medicare-certified ASCs participate in the program. ASCA has called on Congress to make this quality data publically available to Medicare beneficiaries.

Another example of the community's commitment to quality care is the ASC Quality Collaboration, an independent initiative that was established voluntarily by the ASC community to promote quality and safety in ASCs. The ASC Quality Collaboration is committed to developing meaningful quality measures for the ASC setting, and six of those measures have already been endorsed by the National Quality Forum

(NQF).

Again, thank you for the opportunity to offer these comments. This is an historic achievement and we look forward to the passage of this legislation and the stability of physician payments that comes with it.

Sincerely,



William Prentice
Chief Executive Officer