

May 15, 2016

For Urgent Consideration

This letter is from The National Physician's Council on Healthcare Policy. We are a national organization comprised of physicians from many different specialties from a majority of states. In 2009 the Council was established by members of the US Congress for the purpose of gathering practicing physician's input on issues relating to medicine and surgery.

The Council has read and critiqued the nine hundred and sixty two pages (962) of CMS Rules spawned from the MACRA Law. By unanimous opinion, even if the stated goals were laudable, the MACRA Rules as written are impossible to implement and will, like the ACA, waste billions of taxpayer dollars and practice man-hours if they are allowed to proceed forward.

MACRA/MIPS will destroy the practice of medicine, taking out the solo and small groups first as physicians buckle under MACRA's financial burden and become salaried employees or leave practice. Implementation will force physicians to betray the Hippocratic Oath by linking payment to the collection of intimate and private data on all patients. (made available *without restriction* to CMS and related government entities via the electronic medical record – per the regulations). In effect, it is restraint of trade and a means to redistribute dollars from the small group practice to the large group practice. Most importantly, it is not a legitimate means of providing the highest quality of care that our patients deserve and ironically it will not cut costs.

Further, mandatory reporting and participation in shifting government domains is to be used for bureaucrats to publically grade physicians on the pretense of quality. These misleading quality parameters will be used to qualify for financial reward or punishment. One such domain is forced participation in alternative payment models such as Accountable Care Organizations, which are revamped capitated national HMO's. Even the Medicare pilot projects saw more than half of the participants drop out or fail to save money. References from the Rules are available for the above statements.

In 1965, Medicare was passed with the distinct caveat that the law would in no way interfere with the practice of medicine and surgery. In contrast, **the MACRA law allows total government intrusion into every aspect of the practice of medicine**, including *unfettered* access to every person's personal health data. Theoretically the data gathered would be used to construct "population based healthcare" rubrics, and finally "Quality Adjusted Life Years (QALY)" to decide who is to receive what care. **This law actually extends CMS reporting requirements to non-government privately insured patients.** This will most certainly be challenged in court.

The frequent justification for government interference is that the current healthcare expenditures cannot be sustained. Under the auspices of enhancing quality, fixing a flawed payment system, and controlling costs Congress passed another healthcare law few had read. Ironically, **the MACRA solution adds billions of dollars in IT, administrative, and software costs to physicians and the taxpayers.** At the same time the law takes physicians away from the care of patients. The only winners are IT vendors, hospitals, and entities selling compliance courses and software. With strong opposition, we can stop MACRA during this CMS Rules Comment Period.

The WSJ on May 7, 2016 reported that Washington rules now impose \$1.9 trillion of annual costs to the US economy, or \$15,000 per household. Smaller business is the hardest hit. It is our opinion that every professional medical and surgical society has an obligation to its membership to protect the interests of its members and promote loyalty to professional ethics and moral sensibilities.

We urge you to voice opposition to this government takeover of our profession during the CMS MACRA comment period prior to June 27, 2016. We can and must do better. Our patients are counting on us.

The National Physician's Council on Healthcare Policy is asking CMS to exempt small physician practices of 15 or fewer physicians (CMS definition) from this legislation. If you agree, please include that in your comments.

Here is where you may make your comments.

<https://www.regulations.gov/#!submitComment;D=CMS-2016-0060-0068>

The NPCHP thanks you for all your help. Let's take back our profession NOW.

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