

January 21, 2014

Marilyn Tavenner
Administrator
Centers for Medicare and Medicaid Services
Department of Health and Human Services
Attention: CMS-1600-FC
Mail Stop C4-26-05
7500 Security Boulevard
Baltimore, MD 21244-1850

Re: Medicare Program; Revisions to Payment Policies Under the Physician Fee Schedule for CY 2014 Final Rule With Comment Period; CMS-1600-FC

Dear Administrator Tavenner:

The American Association of Physicists in Medicine<sup>1</sup> (AAPM) is pleased to submit comments to the Centers for Medicare and Medicaid Services (CMS) in response to the December 10, 2013 *Federal Register* notice regarding the 2014 Medicare Physician Fee Schedule (MPFS) final rule.

The AAPM supports the 2.09 interim relative value units for CPT 77336 Continuing Medical Physics Consultation effective January 1, 2014. We have reviewed the 2014 direct practice expenses inputs for CPT 77336 and agree with the CMS revisions, additions and deletions related to the non-physician clinical labor, medical equipment and medical supplies for the weekly medical physics consultation procedure code. We appreciate the Agency's willingness to review CPT 77336 under the "potentially misvalued code initiative." Thank you for meeting with us in May to discuss our recommended revisions to the practice expense inputs.

Appropriate payment for medical physics services is necessary to ensure that Medicare beneficiaries will continue to have access to high quality cancer treatments in freestanding cancer centers as well as full access to imaging in the diagnosis of cancer.

Sincerely,

James Goodwin, M.S.

Chair, Professional Economics Committee

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<sup>&</sup>lt;sup>1</sup> The American Association of Physicists in Medicine (AAPM) is the premier organization in medical physics, a broadly-based scientific and professional discipline encompassing physics principles and applications in biology and medicine whose mission is to advance the science, education and professional practice of medical physics. AAPM represents over 7,000 medical physicists.