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Do you know how good your doctor is?  
Establish Quality Performance Measures for Physicians  
Cosponsor H.R. 5866

Dear Colleague,

The Medicare Modernization Act of 2003 put financial incentives in place to encourage voluntary reporting by hospitals on basic healthcare measures and to provide consumers with a point of reference for comparing hospitals. Private physicians have no such quality reporting program in place. But wouldn't you like to know how good your doctor is?

The Medicare Physician Payment Reform and Quality Improvement Act of 2006, H.R. 5866, establishes a system of **Quality Performance Measures** so physicians can voluntarily report data to CMS. These measures would be developed in collaboration with physician specialty organizations for core medical services, so that patients can assess the level of quality their prospective doctors are achieving and decide which doctor they would prefer to see.

**Quality Improvement Organizations** (QIOs) will compete for contracts to provide quality assistance. These organizations will assist practitioners by providing education on quality improvement, instruction on collecting/interpreting data, and guidance on redesigning clinical processes, including the use of HIT. Additionally, the QIOs will establish a Medicare Quality Accountability Program that actively educates Medicare beneficiaries of their rights to voice quality concerns and bring them to review. These accountability programs will report investigation findings to complainants and publish annual quality reports in each state.

As **incentive to participate** in reporting for performance measures, participating physicians will be permitted to balance bill certain high income Medicare beneficiaries. Redirecting the stabilization fund from the Medicare Modernization Act will cover some of the cost for this important legislation. Eliminating double payment from Medicare for indirect costs of medical education is another source.

Over the next nine years, doctors participating in Medicare will face annual payment cuts of five percent each year. This impending crisis puts frail and elderly Medicare beneficiaries at risk of losing their doctor. It also provides an opportunity to begin the process of improving the Medicare program. H.R. 5866 seeks to accomplish three main goals: (1) ensure that physicians receive fair payment for services they provide; (2) create Quality Performance Measures and improve QIO performance to improve the quality of care available to Medicare patients; (3) identify reasonable off-sets to give Medicare physicians a more regular and predictable payment update year-to-year.

The current Medicare physician payment methodology is fundamentally flawed. It's time to address the issue and we need your help. Cosponsor H.R. 5866 today. For more information, contact Josh Martin at 5-7772 or [josh.martin@mail.house.gov](mailto:josh.martin@mail.house.gov).

Sincerely,

  
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