September 17, 2012

Honorable John Boehner
Speaker
U.S. House of Representatives
Washington, DC  20515

Honorable Nancy Pelosi
Minority Leader
U.S. House of Representatives
Washington, DC  20515

Honorable Eric Cantor
Majority Leader
U.S. House of Representatives
Washington, DC  20515

Honorable Steny Hoyer
Minority Whip
U.S. House of Representatives
Washington, DC  20515

Honorable Harry Reid
Majority Leader
U.S. Senate
Washington, DC  20510

Honorable Mitch McConnell
Minority Leader
U.S. Senate
Washington, DC  20510

Dear Sirs and Madam:

On behalf of the American College of Physicians (ACP), an organization representing 133,000 internal medicine physicians and medical student members, I urge you to halt the across-the-board sequestration cuts in health programs that are scheduled for January 2, 2013 and instead enact alternative approaches that address the true underlying causes of rising health care costs, like reducing marginal and ineffective health care services and reforming our medical liability system. These cuts will have a devastating impact on public health, disease prevention, and medical research efforts, as well as essential programs to increase the number of primary care physicians. The ability of this nation’s safety-net and teaching hospitals to provide medical care to the poor and to train the next generation of physicians will also be put at risk.

By imposing a nearly 30 percent reduction in Medicare physician payments—when combined with the cut from the Sustainable Growth Rate formula set to go into effect on Jan. 1—sequestration will sharply reduce seniors’ access to physicians. It also will reduce access to care for the families of the marines, soldiers, airman, and sailors in this country because TRICARE (the federal program that provides coverage to military families) by law must pay physicians the same rates as Medicare. When Medicare is cut, TRICARE is also cut.

ACP recognizes and supports the critical need to reduce our nation’s deficit but arbitrary across-the-board cuts that do not take into account the importance or effectiveness of any particular program are the wrong way to go about it. In addition to reducing access to care for seniors and military families, the across-the-board sequestration cuts will do grave harm to health care for people in this country, by slashing:

- Scholarships and loan repayment to young physicians providing primary care to people in underserved rural and inner city communities through the National Health Service Corps;
$605 million from programs administered by the Health Resources and Services Administration (HRSA), which works to improve access to health care services for people who are uninsured, isolated, or medically vulnerable;

- Graduate Medical Education funding for our teaching hospitals, which are responsible for training physicians in the specialties facing critical workforce shortages—including internal medicine, family medicine, and geriatrics—while also providing care to the underserved;

- $490 million from the Center for Disease Control’s programs to prevent and control outbreaks of infectious diseases, like influenza, that can kill thousands and even millions—just as this year’s flu season is arriving;

- $2.5 billion from programs that support vital, medical research as administered by the National Institutes of Health. This would mean having to halt or curtail scientific research, including needed research into cancer and childhood diseases;

- $319 million from programs that ensure the safety of our food and drugs, as administered by the Food and Drug Administration; and

- $3.2 billion in funding for health care for uniformed service personnel administered by the Department of Defense.

In addition, the Office of Management and Budget (OMB) estimates that physicians, hospitals, and other providers will be subject to an estimated $11 billion cut under Medicare as a result of sequestration.

In the summer of 2011, and again earlier this year, ACP offered Congress concrete and specific ideas to reduce federal spending by hundreds of billions of dollars by improving the effectiveness of health care; making necessary and appropriate changes in Medicare and Medicaid, while ensuring they can continue to meet their core mission of making high-quality patient care available to seniors, people with disabilities, and the poor; improving payment and delivery systems; reducing the costs of defensive medicine; and supporting the proven value of primary care. Instead of allowing federal programs to be cut indiscriminately, Congress should embrace such alternative approaches that address the true underlying causes of rising health care costs. If requested, ACP would be pleased to provide you with more information on its proposals to reduce spending on health care in a fiscally and socially responsible way.

In conclusion, I urge you to (1) prevent the arbitrary, across-the-board sequestration and Medicare/TRICARE/SGR cuts that will do great harm to health care in this country and (2) ensure sufficient funding for the critically important health programs described above and other essential programs. ACP would welcome the opportunity to continue to work with Congress on alternatives to sequestration that prioritize spending based on the importance and demonstrated effectiveness of each program, along with reforms to bring more value to health care by focusing on the real cost-drivers.

Sincerely,

David L. Bronson, MD, FACP
President