



Date

The Honorable Nancy Pelosi
Speaker of the House
H-232 The Capitol
Washington, DC 20515

Dear Mdm. Speaker:

On behalf of the millions of Americans and caregivers affected by neurological conditions, the undersigned organizations request your support for legislation that will correct an error in the Patient Protection and Affordable Care Act. This oversight led to the omission of neurology from the list of specialties eligible to receive the Medicare payment incentives under HR 3590 and increased Medicaid rates in the Reconciliation bill, HR 4872.

We are concerned the omission of neurologists from these provisions will affect access to care for patients with neurologic diseases like ALS, Alzheimer's, epilepsy, headache, multiple sclerosis (MS), Parkinson's disease, peripheral neuropathy, traumatic brain injury (TBI), and stroke.

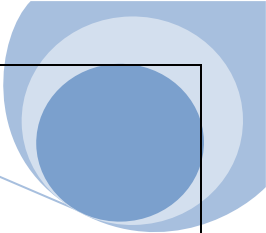
The Patient Protection and Affordable Care Act provides a bonus to physicians who: (i) specialize in family medicine, internal medicine, geriatric medicine,; and (ii) have allowed charges for evaluation and management services that account for at least 60 percent of the physician's or practitioner's total allowed charges. In both the Affordable Care Act and the reconciliation bill, neurology is the only group of physicians who are responsible for coordinating overall patient care that are left out of the incentive.

We applaud Congress' steps to bolster family and internal medicine, but hope that this oversight of neurology could be remedied for patients who expect health care reform to fully support primary care, which for our patients is provided by their neurologist.

Neurologists provide specialized, coordinated life-long care for some of the most costly diseases such as Alzheimer's disease and stroke. Many other prevalent neurological diseases such as ALS, epilepsy, headache, MS, peripheral neuropathy, Parkinson's disease, and TBI, especially in seniors and children, are best cared for by trained neurologists.

Neurology practices are heavily focused on patient evaluation, management and coordination of care. In fact, on average, neurologists bill 61-percent of their services as described in the second criteria leaving neurology as the only specialty that routinely coordinates care for patients that is not eligible for these incentives.

One intent of the health care reform effort is to improve access to primary care services. For Medicare and Medicaid patients like ours this would not be realized by excluding neurology. This is a critical issue to our members and stands to affect the future care of patients with complex neurological conditions. Singling out neurologists as ineligible could have long-lasting ramifications for people with neurologic



conditions, and leaves these patients in danger of losing care by a profession that is already facing reduced supply and increased demand.

Please ask your constituents with neurological disease who they consider their primary care physician to be for the management and care coordination of their neurological condition. We expect that you will hear overwhelmingly that the answer will be their neurologist. Please let us know what we can do to work with you to add neurology to the list of specialties eligible for these incentives before access to care for patients is compromised.

Sincerely

Alliance for Headache Disorders Advocacy
ALS Association
Alzheimer's Foundation
American Association of Neurorehabilitation
American Brain Coalition
American Headache Society
Benign Essential Blepharospasm Research Foundation
Brain Injury Association of America
Epilepsy Foundation
International Essential Tremor Foundation
Multiple Sclerosis Association of America
Muscular Dystrophy Association
National Ataxia Foundation
National Multiple Sclerosis Society
Neuropathy Association
Parkinson's Action Network
Spinal Muscular Atrophy Foundation
Sturge-Weber Foundation
Tremor Action Network
United Spinal Association