



September 14, 2009

To our valued patients:

The staff and physicians at VCS have been asked by many of you about the current health care reform proposals and what they would mean to VCS and our patients. This is a very confusing topic, as it encompasses many different things--some very good others not so good. In addition to the proposed health care reform issues, there are regulatory rules that have also just been proposed by Medicare that will also negatively affect our practice and many other physicians if allowed to pass in its current form. So, there are really two issues, let's review the current Medicare proposal first, as that would have the unintended consequences of limiting access to critical outpatient services, which have reduced cardiac mortality and the need for open heart surgery, as well as unnecessary hospitalizations. The proposed cuts will eliminate VCS' ability to perform your testing in our offices.

Now, let's review health care reform. The Obama Administration and Congress are proposing reforms that will cost taxpayers more money instead of saving it, at the expense of patients like you. Whether you are a Medicare patient or have other insurance coverage, if these proposals pass:

- Our practice may have to limit some services. You might then have to wait for your tests to be done in hospitals. Your out-of-pocket costs will rise if you have to rely on hospital testing, and our accredited and board certified cardiologists may not be the doctors reading your tests.
- The influx of patients will increase patient wait time for appointments, tests and results. This means more frustration and anxiety for you.
- Our practice employs close to 200 people and pays annual taxes that support our communities. This revenue source for our schools and other crucial services will certainly decrease at a time when we face severe economic challenges.
- Some government proposals will prevent us from performing diagnostic testing in our office.

If patients choose to obtain their cardiology services from local hospitals, they will face higher out-of-pocket co-pays and even longer wait times for appointments, tests and results. In addition, services delivered in the hospital setting cost taxpayers much more than the same services provided in doctors' offices.

VCS was one of the first physician groups to seek and obtain accreditation for all office-based cardiac and vascular diagnostic testing. We sought this accreditation to put quality care and your safety first. All of our physicians are board certified in cardiology and some are board certified in 3 clinical areas. Our desire is to continue providing services at the same high quality level for years to come. The current legislation directly threatens our group's ability to stay together, independent from hospital ownership, and to put quality and your care first.

If you are as worried as we are about your continued access to cardiac care, we ask that you contact your senators and representatives to let them know of your concerns. We and other private practice cardiologists have set up a website to make it easy for our patients to email their elected officials. All you need is your ZIP code and an email address. If you have internet access, please use the link below.

<http://www.capwiz.com/cardiologycaa/issues/alert/?alertid=13746521&type=co>

When you click the link the letter attached will automatically be in the email to your representatives. Feel free to personalize it any way you choose. All you have to do then is fill in your personal

information and your letter will go to your representatives. This alert will deal only with the Medicare fee proposals -- not reform.

For those who wish to write or call your senators and representatives, we have included a list with the necessary information.

We want the very best for our patients, and we hope you will help us let Congress know that continued access to cardiology services is of critical importance to you.

With many thanks,

The Physicians of Virginia Cardiovascular Specialists

Dear Senator or Congressman,

I am writing to express my deep concern about the proposed physician fee schedule for Medicare that will, if passed, significantly cut physician reimbursement - especially in cardiology. This will reduce my access to critical cardiology services and may force my cardiologist to close outlying offices and eliminate other services.

Proposed schedule changes will severely cut reimbursement for imaging procedures that my cardiologist needs to diagnose and treat my heart disease.

I am worried that I will have to drive longer distances and spend additional time away from my work and family to obtain my cardiac care. I am concerned that I will have to wait longer to get appointments, tests, and test results. I am afraid that if I have to use the hospital for my cardiac care, I will have higher out-of-pocket co-pays. I know it costs Medicare more for me to receive services from the hospital than from my doctor. How does that save money for the federal government or me as a taxpayer?

I urge you to write a letter to Kathleen Sebelius and request that CMS place a moratorium on the use of the PPIS survey from the AMA for the 2010 fee schedule. I also urge you to vote against any healthcare reform measures that would cut imaging reimbursement, reduce my access to cardiac care, and increase my costs as both a patient and a taxpayer.

I cannot afford to find a new doctor, nor can I afford the higher co-payments or extra trips to the hospital for procedures like medical imaging.

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