



GE Healthcare

3000 N. Grandview Blvd.  
Waukesha, WI 53188

November 25, 2008

Kerry Weems  
Acting Administrator  
Centers for Medicare & Medicaid Services  
Department of Health and Human Services  
Attention: CMS-1403-FC  
Mail Stop C4-26-05  
7500 Security Boulevard  
Baltimore, MD 21244-1850  
ATTN: FILE CODE CMS-1403-FC

Re: Medicare Program; Revisions to Payment Policies Under the  
Physician Fee Schedule and Other Revisions to Part B for CY 2009;  
Final Rule with Comment Period

Dear Mr. Weems:

GE Healthcare (GEHC) appreciates this opportunity to comment on the final rule with comment period issued by the Centers for Medicare and Medicaid Services (CMS) concerning changes to the Medicare physician fee schedule for calendar year 2009 (Federal Register, Vol. 73, No. 224, November 19, 2008) (Final Rule).

GEHC, a \$17 billion unit of General Electric Company that is headquartered in the United Kingdom, has expertise in medical imaging and information technologies, medical diagnostics, patient monitoring systems, performance improvement, drug discovery, and biopharmaceuticals manufacturing technologies. GEHC's broad range of products and services enables healthcare providers to offer patients earlier and better diagnosis and treatment of cancer, heart disease, neurological diseases, and other conditions that threaten the quality and length of life. Worldwide, GEHC employs more than 46,000 people committed to serving healthcare professionals and their patients in more than 100 countries.

GEHC supports and appreciates CMS' decision not to adopt in this Final Rule provisions of the calendar 2009 Medicare physician fee schedule proposed rule (Proposed Rule) that would have applied certain Independent Diagnostic Testing Facility (IDTF) standards to physician and non-physician practitioner (NPP) organizations that furnish diagnostic testing services. In making this decision, CMS noted that section 135 of the Medicare Improvements for Patients and Providers Act of 2008 (MIPPA) requires the Secretary of Health and Human Services to establish an accreditation process for Medicare suppliers

that furnish certain advanced diagnostic testing services. MIPPA specifies aggressive timeframes for establishment of this process, and GEHC urges CMS to focus its limited resources on accomplishing effective implementation within these legally mandated timeframes. Indeed, as our comments on the Proposed Rule stated, GEHC believes that the new MIPPA-required accreditation requirements make the agency's proposed application of IDTF standards unnecessary.

As CMS moves forward to implement the MIPPA requirements, and to reach a final disposition on the proposed IDTF standards, we thought it would be helpful to provide a more complete context for one portion of our comments on the Proposed Rule. Specifically, GEHC noted in its comments that by refraining from applying IDTF standards, CMS could avoid imposing burdensome and unnecessary regulation on physicians, including physicians who provide diagnostic services – such as X-ray, ultrasound, and fluoroscopy – that Congress wisely withheld from MIPPA's scope. We wish to clarify that these kinds of tests are predominantly performed by qualified NPPs – a role that GEHC supports.

In sum, GEHC strongly supports the MIPPA-mandated accreditation process as a means for ensuring the technical qualifications of the physicians and NPPs that use imaging technologies to help patients.

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GEHC very much appreciates this opportunity to comment. We look forward to working with CMS to help convert the MIPPA accreditation provisions into an effective force for high-quality care.

Sincerely,

A handwritten signature in black ink that reads "Hugh Zettel". The signature is written in a cursive, flowing style.

Hugh Zettel  
GE Healthcare, Strategic Reimbursement Executive