



The Honorable Chiquita Brooks-LaSure, Administrator  
Centers for Medicare & Medicaid Services  
Department of Human Health and Services  
Attn: CMS-1770-P  
PO Box 8016  
Balimore, MD 21244

RE: Medicare and Medicaid Programs; CY 2023 Payment Policies Under the Physician Fee Schedule

Administrator Brooks-LaSure:

On behalf of the Washington state-based coalition "[Our Stories Rx](#)", which brings together clinical and patient voices impacted by policymaking decisions that affect access to care in all parts of Washington state, I'm writing with concern about the proposed physician fee schedule adjustments under the "CY 2023 Medicare Physician Fee Schedule, CMS-1770-P, Proposed Rule".

I served as the Practice Administrator for Arthritis NW, the largest Rheumatology practice in the Pacific Northwest, for nearly 20 years, and am alarmed at how proposed decreases in physician fee schedules for specialty care clinics could impact providers' ability to keep their doors open, while hampering Medicare patients' ability to access care in their communities.

The costs of providing specialty clinical care to patients have risen significantly since the onset of the pandemic, and show no signs of slowing down as inflationary pressures compound on sequestration cuts to make it more difficult for community clinicians to provide services to patients. The bottom line is, should CMS' proposed fee schedule be implemented, fewer clinicians will be providing care to Medicare patients, and existing gaps in rural care networks will get wider and more difficult to manage for already vulnerable patient populations.

When community care sites shut down, patients are pushed into larger, more consolidated health systems or emergency settings where costs are higher for Medicare and out-of-pocket burden for patients is increased. The proposed rule doesn't account for the tremendous backlog of patients who have already gone without routine care during the pandemic. Patients who access specialty medication are typically immunocompromised and continue to delay routine health visits to avoid exposure to COVID-19.

Instead, CMS should consider a payment schedule that at minimum keeps pace with inflation and anticipates the need for a more robust network of community care sites to address a looming influx of delayed care needs resulting from the pandemic. Please consider the broad network of community clinicians who would be impacted by the proposed fee schedule reductions, and the patients who rely on them to maintain their health and wellness!

A handwritten signature in black ink that reads "Karen M. Ferguson". The signature is fluid and cursive, with the first name "Karen" being the most prominent.

Karen Ferguson  
Founder  
Our Stories Rx