September 17, 2010

The Honorable Kathleen Sebelius  
U.S. Secretary of Health and Human Services  
Office of Consumer Information and Insurance Oversight  
Attention: OCIIO-9992-IFC  
P.O. Box 8016  
Baltimore, MD 21244-1850

**RE: Coverage of Preventive Services, OCIIO-9992-IFC**

Dear Secretary Sebelius,

The California Medical Association (CMA) appreciates the opportunity to comment on the Interim Final Rules for Group Health Plans and Health Insurance Insurers Relating to Coverage of Preventive Services. CMA supports the proposed standards as a means to provide more Americans with basic preventive services that are covered by their health insurance, but cautions that adequate provider reimbursement must be provided for these services to ensure access to care.

Requiring health plans to cover preventive services such as immunizations, obesity screening, and tobacco cessation counseling will reduce long-term health care costs and improve patient health. For example, if left untreated, obesity can lead to chronic diseases, escalating medical costs, increased workers’ compensation claims, lost productivity and diminished quality of life. Chronic diseases, such as those caused by obesity, account for 75 percent of our nation’s health care costs. These diseases are largely preventable provided that a patient receives early detection and treatment services. Removing cost barriers to preventive care allows a patient to receive more timely treatment and thus reduces the need for costly hospital visits or emergency services.

CMA strongly supports the requirements that all public and private payors cover preventive services, including as a minimum all those services recommended by the U.S. Preventive Services Task Force (USPSTF) and immunizations recommended by the Advisory Committee on Immunization Practices (ACIP). CMA has long supported the evidence-based recommendations of USPSTF and ACIP. By eliminating cost sharing for recommended preventive care, these new standards will increase utilization of services and keep patients healthier. However, we are concerned that there are not enough primary care physicians to meet the growing demand for preventive services. California has one of the lowest primary care to patient ratios in the nation. Therefore, it is imperative that physicians, especially primary care
physicians who are in short supply, are reimbursed at adequate levels to ensure that patients truly get access to these essential preventive services. We seek your help in monitoring access to these services.

Requiring coverage of preventive services with no cost sharing will save lives not only in California, but across the nation. California physicians believe that these new standards are vital to helping patients avert a number of diseases and their related co-morbidities. CMA appreciates the joint efforts of the Department of the Treasury, Department of Labor, and Department of Health and Human Services in promulgating regulations to improve public health through increased coverage of preventive care services and thanks you for your consideration of our comments.

Sincerely,

J. Brennan Cassidy
President