Whereas, Medicare has rules that exclude Medicare payments for items and services that, Medicare deems, would be furnished gratuitously because of the relationship of the beneficiary to the person imposing the charge; and

Whereas, Chapter 16 of Medicare guidelines (130 - Charges Imposed by Immediate Relatives of the Patient or Members of the Patient’s Household (Rev. 1, 10-01-03) A3-3161, HO-260.12, B3-2332) defines rules, these guidelines have not been revised since 2014; and

Whereas, The following degrees of relationship are included in definition of an immediate relative including husband and wife, natural or adoptive parents, child and sibling, stepparent, stepchild, stepbrother, stepsister, in-laws, grandparents, grandchildren and spouses of such grandparents and grandchildren; and

Whereas, Exclusion applies whether the provider is a sole proprietor who has an excluded relationship to the patient or a partnership in which even one of the partners is related to the patient; and

Whereas, Medicare makes the false assumption that a cardiologist seeing the father-in-law of an internist in his group would be compelled to provide cardiology services for free. This places the physician providing services in a difficult position where they provide services at a loss or must refuse to see the patient. This also puts the physicians, whose family member requires care, in an awkward predicament. They must either ask colleague to see their family member at a loss or tell the family member that it is not possible to be seen in their practice. Thus, this regulation strains physician-patient relationships and restricts access to trusted care; therefore be it

RESOLVED, That our American Medical Association support changes in the Medicare guidelines to allow a physician, who is a partner in the practice, to care for and receive appropriate reimbursement for immediate relatives of one of the other partners in their practice.

(Directive to Take Action)

Fiscal Note: Not yet determined

Received: 04/25/19