



Society of General Internal Medicine

July 15, 2009

Chairman George Miller  
Education & Labor Committee  
2181 Rayburn House Office Building  
Washington, DC 20515

Ranking Member Howard McKeon  
Education & Labor Committee  
2101 Rayburn House Office Building  
Washington, DC 20515

Chairman Charles Rangel  
Ways and Means Committee  
1102 Longworth House Office Building  
Washington, DC 20515

Ranking Member Dave Camp  
Ways and Means Committee  
1102 Longworth House Office Building  
Washington, DC 20515

Chairman Henry Waxman  
Energy & Commerce Committee  
2125 Rayburn House Office Building  
Washington, DC 20515

Ranking Member Joe Barton  
Energy & Commerce Committee  
2322A Rayburn House Office Building  
Washington, DC 20515

Dear Chairmen and Ranking Members:

We are writing to you to reiterate our strong support for the Comparative Effectiveness Research (CER) provisions included in the Tri-Committee bill that will soon be considered in the House.

As general internists who treat patients every day, often with multiple chronic conditions, we need scientifically valid information available that permits physicians and their patients to make informed decisions on the most appropriate form of treatment in individual cases. CER has the potential to enable primary care physicians to provide the right treatment to the patient, at the right time and delivered in the right way. Delivering appropriate care in complex cases improves patient outcomes, controls costs and relieves suffering.

As health care reform moves through the House and eventually into a Conference Committee with the Senate, we are concerned that amendments to undercut its effectiveness will be offered. Specifically, we urge you to oppose three potential amendments:

- Stakeholders in the health care system, including private corporate interests, have an important role to play in *advising* the government and sharing information. However, they should not be involved in the *governance* of CER. The inherent conflict of interest in private, for-profit entities participating in this process cannot be overcome by simply reporting the conflict. It should be prohibited.

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- Any provision to create a public comment period prior to the obligation of funds for an individual research project must be rejected. The peer-review process, long-established at scientific research agencies, is the appropriate place for study design and research results to be vetted. Public comment periods only serve to delay the availability of research results and potentially could sow confusion among the public.
- Finally, and perhaps most importantly, amendments to place artificial limits on the uses of CER must be resisted. Clearly, CER is intended to provide patients and physicians with information enabling the best possible care to be provided. It is unrelated to coverage decisions. Nevertheless, to prohibit agencies from considering whether or not a treatment works when making coverage decisions is untenable.

Thank you for considering our views. We look forward to continuing to work with you in the weeks and months ahead as you endeavor to provide the American people with a health system that provides effective, efficient and high quality care..

Sincerely,

A handwritten signature in cursive script that reads "Nancy Rigotti".

Nancy Rigotti, MD, FACP  
President  
Society of General Internal Medicine