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January 20, 2014

Marilyn Tavenner  
Administrator  
Centers for Medicare and Medicaid Services  
Department of Health and Human Services  
200 Independence Avenue, SW  
Washington, D.C. 20201

Dear Ms. Tavenner,

I write to further my inquiry into the Centers for Medicare and Medicaid's (CMS) decision-making process regarding the classification of specialty eye hospitals for Medicare hospital reimbursements. This is an issue of great importance to my constituents, especially low-income individuals and those with complex ophthalmological conditions.

As you will recall from my previous correspondence, the non-profit Wills Eye Hospital, located in Philadelphia, has been working with CMS for some time to regain the Medicare hospital designation it voluntarily relinquished in order to undergo a substantial renovation. This renovation resulted in an ultramodern ophthalmological facility which is now capable of providing some of the best care in the world, often to patients who are unable to get the necessary treatment elsewhere. Despite Wills Eye's global recognition for providing the highest quality care, and its ongoing commitment to treating patients in need regardless of ability to pay, CMS has consistently refused to properly recognize the facility as a hospital. This is denying Wills Eye the necessary Medicare reimbursements to continue providing care and threatens to severely limit access to care, not only for my constituents but patients across the country and around the world.

In recognition of this ongoing problem, Congress included specific language in the Consolidated and Further Continuing Appropriations Act, 2015 (P.L. 113-235) directing CMS to "review its current policy regarding awarding in-patient hospital status for the purpose of Medicare and Medicaid reimbursement for specialty eye hospitals[.]" This law further directs that this review be completed and reported to both the House and Senate Appropriations Committees before June 15, 2015. I hope that you will agree that the inclusion of this directive to CMS underscores the concern Congress has for CMS's ongoing refusal to recognize Wills Eye Hospital as the hospital

it is. Further, we hope that CMS will act promptly on this order and not wait until the June deadline, ensuring patients in need of care from Wills Eye do not have to worry about the hospital's future ability to provide that care.

I appreciate your continued efforts to ensure Medicare beneficiaries and those in need of high quality, complex and specialty ophthalmologic care are able to receive it promptly. I look forward to learning about CMS's policy review and any updates it might make to ensure specialty eye hospitals are properly recognized by Medicare.

Sincerely,

A handwritten signature in black ink, reading "Robert Menendez". The signature is fluid and cursive, with a large, stylized "R" and "M".

ROBERT MENENDEZ  
United States Senator