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May 20, 1993

Secretary
U.S. Nuclear Regulatory Commission
Washington, D.C. 20555

Gentlemen:

Pursuant to your request for public comment regarding NRC fee policy, and following my completion of your survey instructions regarding the survey of NRC material licensees, I would like to comment directly regarding the issue of physicians in private practice using radioactive materials for a very limited purpose. As a private practitioner who uses I-123 (licensed by the State of New Jersey) for thyroid scanning, and I-131 (licensed by the NRC) for radioactive iodine treatment of hyperthyroidism and thyroid carcinoma, I must comment that the fees currently imposed represent a significant burden to a small private practitioner. The cost of equipment, personnel, and radioactive materials themselves are actually equal or greater to the amount of revenue which can be generated for scans and treatments. Reimbursement for medical practitioners is in many cases limited by Medicare, Medicaid and third party payers.

It is significant, however, that physicians, particularly endocrinologists, are most qualified by training and experience to diagnose and treat thyroid disorders. Because the financial burden may become so great, many practitioners, including myself, have considered withdrawing their licenses, thus depriving the patients the ability to be treated and managed by appropriate specialists. I believe that it is particularly noteworthy that the survey questions the annual gross receipts of one's medical practice; however, particularly in my case, as with other solo medical practitioners, this is extremely deceptive, as the receipts derive primarily from the practice of medicine rather than anything related to the use of radioisotopes. In reviewing for this survey I find that my annual expenditures for the use of isotopes are indeed equal to or greater than the revenue which I may have derived from them. Nonetheless, I continue to scan and treat patients because I believe that I have better control over the quality of the scans performed, as well as control over the dosage, follow-up instructions and consultative information given my patients when they are treated with radioactive iodine. Endocrinologists represent a rather small fraction of physicians in this country and as such we are probably not powerful enough for our voice to make any difference, and yet I believe that it is extremely important that our government be responsive to our needs, and particularly the needs of our patients who suffer from thyroid disorders. I would strongly suggest that physicians,

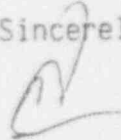
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particularly solo practitioners in private practice, be allowed to claim the \$400.00 lower tier, small entity fee in order to reduce the already significant burden which we face for continuing to offer our patients our services.

Thank you for your consideration.

Sincerely,

A handwritten signature in dark ink, appearing to be 'RH' with a stylized flourish extending to the right.

Rhoda H. Cobin, M.D.

RHC:gj