

## PROVIDERS EYE DIFFERENT SOLUTIONS TO AVOID 2021 MEDICARE PAYMENT CUTS

Rep. Ami Bera's (D-CA) office hopes to get a two-year policy holding providers harmless from 2021 Medicare cuts that are linked to evaluation and management (E/M) services payment wrapped into a year-end package. While his bipartisan bill is backed by the American Medical Association, primary care providers say it wouldn't help with the underlying problem of inequitable pay. They would rather see Congress give CMS the ability to avoid budget neutrality requirements in the Medicare Physician Fee Schedule (MPFS) for one year.

Some specialties could see payment increases as high as 17% next year under the proposed MPFS for 2021, while others could see payment cuts as large as 11%. The redistribution of payment is a result of the budget neutrality requirements linked to the increase in payment for the E/M visits code set to start on January 1st.

CMS said in its proposed rule that it would implement the final version 30 days after the rule is released, so stakeholders expect the final rule to be out soon, as it needs to go into effect on January 1, 2021. Most stakeholders expect the proposed cuts to be included in the MPFS final rule.

Lawmakers and providers have been pushing to avert the cuts, though lobbyists haven't expected Congress to act until after the final cuts are released.

Two bills have been introduced to handle the situation: Reps. Michael Burgess (R-TX) and Bobby Rush (D-IL) introduced H.R. 8505, which would provide a one-year waiver of budget neutrality adjustments in the physician fee schedule, while Reps. Bera and Larry Bucshon (R-IN) introduced H.R. 8702, which would hold providers harmless for cuts by giving them an additional payment that would bring their overall reimbursement up to the 2020 MPFS levels for two years.

"All providers are eligible and likely would receive these payments — even providers who primarily bill E/M services and also bill other services that are seeing cuts," an explanation of the legislation from Bera and Bucshon's offices says.

The Bera-Bucshon bill has been endorsed by more than 100 national medical societies, including the American Medical Association, and many state societies, as well.

A group of around 20 provider specialty societies and 40 state specialty societies sent a letter November 16th pushing for the Burgess and Rush bill.

The American Academy of Family Physicians (AAFP) Senior Vice President for Advocacy, Practice Advancement and Policy, Stephanie Quinn said other approaches are more equitable, and it would be better to simply allow CMS to waive the budget neutrality requirements of the fee schedule for a year — though such a move would likely be more expensive.

"Since all services in the MPFS are negatively impacted by the budget neutrality adjustment, a flat increase in payment rates across services would ensure that all physicians receive equal relief," said a November 20th letter to House committee leaders from 11 medical societies, including AAFP. That letter also says the payment increases in the proposed MPFS need to go into effect without delay on January 1, 2021.

Quinn said there are concerns that setting up the extra payments could distort the relative payment for different physician groups, which the changes to the fee schedule were supposed to balance. And all providers have been hurt by the pandemic, so all providers should have access to relief and that money shouldn't be tied to the fee schedule in any way or it could cause a situation akin to the yearly fix to the Sustainable Growth Rate if providers don't want to let it sunset.