

January 18, 2023

The Honorable Charles Schumer Majority Leader United States Senate Washington, DC 20510

The Honorable Kevin McCarthy Speaker U.S. House of Representatives Washington, DC 20515 The Honorable Mitch McConnell Minority Leader United States Senate Washington, DC 20510

The Honorable Hakeem Jeffries Minority Leader U.S. House of Representatives Washington, DC 20515

Dear Majority Leader Schumer, Minority Leader McConnell, Speaker McCarthy, and Minority Leader Jeffries:

On behalf of the American College of Physicians (ACP), I am writing to ask for your partnership in the 118<sup>th</sup> Congress in advancing legislation that supports physicians' ability to provide high-quality care to our patients. We hope that you will work with us to build consensus on important and necessary policy changes to repair our broken physician payment system, reduce administrative burdens that take physicians' time away from patient care, and increase patient access to behavioral health care.

ACP is the largest medical specialty organization and the second largest physician society in the United States. ACP members include 160,000 internal medicine physicians, related subspecialists, and medical students. Internal medicine physicians are specialists who apply scientific knowledge, clinical expertise, and compassion to the preventive, diagnostic, and therapeutic care of adults across the spectrum from health to complex illness. Internal medicine specialists treat many of the patients at greatest risk from COVID-19, including the elderly and patients with pre-existing conditions such as diabetes, heart disease and asthma.

While the FY23 Consolidated Appropriations Act included health care provisions that will benefit the health and wellbeing of Americans, significant issues impacting physicians' ability to care for their patients remain. We ask for your leadership in advancing policy solutions that have bipartisan support and are essential to improving health care delivery.

## **Physician Payment Reform**

As you likely know, physicians have been struggling with an annual cycle of Medicare payment cuts and no inflationary updates that puts seniors' access to care at risk. We urge Congress to act this year to reform our broken Medicare physician payment system and provide the

financial stability needed for physicians to keep up with practice expenses and rising inflation. According to an <u>analysis</u> by the American Medical Association (AMA) of Medicare Trustees data, Medicare physician payment has decreased by 20 percent from 2001–2021 when adjusted for inflation. Unless Congress acts, a continuing statutory freeze in annual Medicare physician payments is scheduled to last until 2026, when updates would resume at a rate of 0.25 percent per year, well below inflation rates. Physicians and their practices have been faced with decades of flat payments, in addition to being under inordinate strain during the past three years while our country has been dealing with the public health emergency caused by the COVID-19 pandemic. Other health care institutions, such as hospitals, have received inflationary updates.

As soon as they are organized, the House Ways and Means Committee, the House Energy and Commerce Committee, and the Senate Finance Committee need to hold hearings to gain the input needed to ensure we have a Medicare Physician Payment system that delivers high-quality care for our seniors and provides financial stability for our physicians.

## **Improve Prior Authorization**

The current process for prior authorization approval where health plans determine if a prescribed procedure, service, or medication is covered by a plan is especially burdensome as payers, whether public or private, often have their own approaches, rules, and requirements for coverage. This process is also costly for physician practices and can take time away from patient care.

We are pleased that the Centers for Medicare and Medicaid Services (CMS) recently published a proposed rule that would require a number of categories of health insurers to implement specific processes intended to improve the electronic exchange of health care data and streamline processes related to prior authorization. This proposed rule addresses these problems by requiring covered insurers to implement electronic prior authorization standards and better utilize and share patient data to streamline prior authorization processes.

We urge Congress to codify many of these proposed improvements to the prior authorization process by reintroducing and passing the <u>Improving Seniors' Timely Access to Care Act.</u> This legislation was passed by the House in the last Congress and would reduce burdens associated with prior authorization in Medicare Advantage (MA) by:

- Protecting beneficiaries from any disruptions in care due to prior authorization requirements as they transition between MA plans.
- Requiring all MA plans adopt electronic prior authorization capabilities to streamline the process for prior authorization approval.
- Standardizing the process and procedures for reporting electronic prior authorization criteria to MA plans.

## **Behavioral Health Reform**

Lastly, we <u>urge</u> Congress to act as soon as possible to pass a comprehensive mental health reform bill that would expand access to behavioral health care for patients who need these services. We look forward to working with you to improve the provision of behavioral health care through policies that would: expand access to tele-mental health services; increase the mental health clinician workforce; advance the integration of behavioral health in physician practices; and improve mental health parity to ensure coverage of behavioral health.

We are experiencing a public health crisis in behavioral health care, as recent data from the Substance Abuse and Mental Health Services Administration <u>indicate</u> that 22 percent of adults had any mental illness in 2021. The COVID-19 pandemic has also added a tremendous level of strain on medical professionals, many of whom are experiencing personal hardships as they care for distressed patients and manage their own families and their own health. America's physicians are at a critical breaking point, and we urge you to expand programs to improve physician well-being in behavioral health reform legislation as well.

## Conclusion

We hope this letter provides a blueprint of health care priorities for you to consider as you begin work this year and look forward to working with you to advance these bipartisan policies in the 118<sup>th</sup> Congress. Please call on ACP as a resource when considering these and other health care proposals. We stand ready to work with you to support evidence-based solutions for improving health care delivery for all Americans

Sincerely,

Ryan D. Mire, MD, MACP

President