



April 9, 2026

Greg Murphy, MD
U.S. House of Representatives
Washington, D.C. 20515

John Joyce, MD
U.S. House of Representatives
Washington, D.C. 20515

Brad Schneider
U.S. House of Representatives
Washington, D.C. 20515

Mariannette Miller-Meeks, MD
U.S. House of Representatives
Washington, D.C. 20515

Robin Kelly
U.S. House of Representatives
Washington, D.C. 20515

Tom Suozzi
U.S. House of Representatives
Washington, D.C. 20515

Bob Onder, MD
U.S. House of Representatives
Washington, D.C. 20515

Jimmy Panetta
U.S. House of Representatives
Washington, D.C. 20515

Kim Schrier, MD
U.S. House of Representatives
Washington, D.C. 20515

Dear Representatives Murphy, Suozzi, Joyce, Onder, Schneider, Panetta, Miller-Meeks, Schrier, and Kelly:

On behalf of the American College of Physicians (ACP), I am writing to express our appreciation and strong support for the Provider Reimbursement Stability Act of 2026, [H.R. 8163](#). This critical legislation would enhance access to care for Medicare beneficiaries and enable independent physician practices to remain financially viable. This is especially important for rural and underserved communities, where the number of independent physician practices has declined significantly over the last several decades. The decline of independent physician practices across the country has led to patients forgoing care, traveling for hours to seek care, and waiting months to see their physicians.

ACP is the largest medical specialty organization and the second-largest physician group in the United States. College members include 163,000 internal medicine physicians, related subspecialists, and medical students. Internal medicine physicians are specialists who apply scientific knowledge and clinical expertise to the diagnosis, treatment, and compassionate care of adults across the spectrum from health to complex illness. Additionally, internal medicine is the specialty with the largest number of active physicians specializing in primary care, with 120,342 internal medicine physicians being identified as specializing in primary care in 2021.

The lack of structural, long-term changes to the Medicare Physician Fee Schedule (PFS) has resulted in the closure of independent physician practices across the country, followed by a significant uptick in market consolidation. Emerging research [shows](#) that health care consolidation leads to worse health outcomes for patients and burnout for physicians. Physicians need Congress to pass legislation that would provide physicians with the resources they need to keep up with rising expenses and the cost of caring for patients.

While ACP appreciates Congress providing additional funds for the PFS for 2026, it is important to recognize the longstanding problem that the PFS has not been updated to account for inflation. As a result, payment rates for physicians have actually decreased by a [staggering 33 percent](#) over the past two decades, when adjusted for inflation. The lack of inflationary updates, coupled with the PFS statutory budget neutrality (BN) requirement, have led to increased financial instability for physicians, especially for those in independent practices. The BN requirement triggers physician payments to be withheld from the PFS when CMS overestimates utilization of new or modified codes in the fee schedule. CMS is not required to return the withheld funds to the fee schedule, resulting in physicians getting additional unnecessary payment cuts.

The Association of American Medical Colleges (AAMC) [estimates](#) that there will be a shortage of 20,200 to 40,400 primary care physicians by 2036. A [report](#) by the National Academy of Sciences, Engineering and Medicine calls on policymakers to increase our investment in primary care as evidence shows that it is critical for achieving health care's quadruple aim (enhancing patient experience, improving population, reducing costs, and improving the health care team experience). That report also stated that the evidence shows that increasing the proportion of primary care physicians in the total physician workforce has numerous benefits, including increasing quality and access to care.

ACP strongly supports the Provider Reimbursement Stability Act of 2026. H.R. 8163 would raise the budget neutrality threshold from \$20 million to \$54.3 million and would use cumulative increases in the Medicare Economic Index (MEI) to update the threshold every five years afterwards. Considering that the \$20 million BN threshold was established in 1992, this approach would be more reflective of the actual costs associated with providing care for patients today and would help to account for inflation. The College appreciates the provisions in Section 3 of the bill that would require CMS to prospectively revise spending estimates and budget neutrality adjustments for newly unbundled codes based on actual utilization rates. This requirement is only triggered when the newly unbundled code exceeds 0.1% of the total estimated expenditures. We support this approach as it would allow for a more accurate calculation of the Medicare conversion factor based on actual utilization of data and claims. ACP also supports the provisions in the bill that would require CMS to update the direct costs associated with clinical labor, the prices of equipment, and the prices of medical supplies simultaneously at least once every five years. Section 5 of the bill would put a limit on the year-to-year conversion factor variance to no greater than 2.5 percent (cut or increase) each year. Payment increases established by legislation would be exempt from this cap on the conversion factor, including any potential legislation that would increase inflationary updates tied to the MEI.

We thank you for your bipartisanship and leadership in introducing this important legislation to provide payment relief to physicians so that we can continue to care for our patients. We stand ready to provide our advocacy efforts to ensure that this bill moves forward in Congress. Should you have any questions, please contact Vy Oxman, Senior Associate of Legislative Affairs, at voxman@acponline.org.

Sincerely,

A handwritten signature in cursive script that reads "Jason M. Goldman". The signature is written in a dark ink and is positioned below the word "Sincerely,".

Jason M. Goldman, MD, FACP

President, American College of Physicians