

# Medicare Physician Fee Schedule Final Rule

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# Summary of Key Provisions

- Sets the 2022 PFS conversion factor at **\$34.6062** (cut from CY21 which was \$34.8931)
  - Updated spreadsheets on the CMS website: [RVU22A | CMS](#)
- Finalizes recent changes to Evaluation and Management (E/M) visit codes, such as policies for:
  - Split (or shared) E/M visits
  - **Critical care services**
  - Services furnished by teaching physicians
  - **Changes to the practice expense for many services associated with the update to clinical labor pricing**
- Finalizes considerations for vaccine administration services
- Revises telehealth services under the Consolidated Appropriations Act, 2021; **allows use of audio-only communications technology when furnishing mental health services** in certain circumstances

Summary of the CY22 MPFS FR  
[ACP Summary of 2022 Medicare Physician Fee  
Schedule \(MPFS\) & Quality Payment Program  
\(QPP\) Final Rule \(acponline.org\)](#)

Comments on the CY22 MPFS FR  
[ACP Comments on 2022 Final Physician Fee  
Schedule & Quality Payment Program Rule  
\(acponline.org\)](#)



# A Bit More Detail on Physician Payments

## Conversion factor:

- **Looming payment cuts...**
  - Medicare sequestration cuts (-2%)
  - PAYGO sequestration cuts (-4%)
  - Physician Fee Schedule and “Budget Neutrality” cuts (-3.75%)
- **Congress recently passed legislation! 😊**
  - Stops the 2% Medicare sequester cut until April ‘22; then a 1% cut through June; full cut thereafter
  - PAYGO cuts of 4% are also slated to resume at the start of 2023
  - Mitigates the 3.75% payment cut to the PFS payments by providing a 3% bump for CY22
- **What about the big picture?**
  - Continue to work with CMS and Congress to address long-term challenges associated with Medicare payment policy, especially the budget neutrality provision in the MPFS
  - Constant state of flux regarding payment and revenue makes it difficult for practices to invest in necessary resources to transform care away from traditional models
  - [Better is Possible: ACP's Vision for the U.S. Health Care System | Where We Stand | ACP \(acponline.org\)](https://www.acponline.org/better-is-possible)



# Overview of Additional Provisions

Clinical labor pricing update: beginning in 2022, CMS will begin a four-year transition period to update the clinical labor pricing component of the practice expense methodology

Critical care services: may be paid on the same day as other E/M visits by the same practitioner or another practitioner in the same group of the same specialty. There are additional documentation and modifier requirements

Office visits included in codes with a surgical global period: critical services may be paid separately in addition to a procedure with a global surgical period

**Questions?** Please email Dejaih at [djohnson@acponline.org](mailto:djohnson@acponline.org)

