

## **Broad Bipartisan Support Exists in Congress to Ensure Higher Payments for Physicians' Evaluation and Management Services are Fully Implemented by CMS on January 1, 2021**

There is significant bipartisan support in Congress for ensuring that improvements in Medicare physician payment policies for physicians' office-based visits (known as Evaluation and Management services) are implemented by CMS as scheduled on January 1, 2021. In the 2021 Medicare Physician Fee Schedule, CMS finalized several policies to increase payments for long-undervalued Evaluation and Management Services, including higher baseline payments for outpatient office visit codes, and a new GPC1X code for visit complexity, which reflects the inherent complexity and additional resource costs of furnishing primary and comprehensive care. CMS created and finalized the GPC1X add-on code with the express purpose of securing access to continuous care for Medicare beneficiaries by ensuring that physicians are appropriately paid for providing continuous and complex care that is personalized to the patient. These improvements are essential to addressing the ongoing impact of the COVID-19 pandemic, at a time when practices are under severe financial stress and at risk of closing due to lost revenue from COVID 19.

A broad coalition of primary and cognitive care physician organizations submitted a [letter](#) to Congressional leaders that asks them to ensure that these needed increases that have been scheduled for physicians' office-based visits go into effect on January 1 of next year as planned. The groups expressed the strong belief that the improvements should be made as scheduled – without delay, transition, or phase-in. These long overdue payment increases are essential to recognizing the value of primary and comprehensive care, have been many years in the making, were developed with the input and support of all physician specialties, and are imperative to support our members and their patients, especially during these difficult times.

During this national pandemic, we are supportive of efforts in Congress to provide relief for those services currently slated for cuts in the Medicare Physician Fee Schedule due to budget neutrality, which requires that any increases in Medicare payments be offset by corresponding decreases to other services. However, any legislation under consideration must be fair to all, should not result in budget neutrality cuts being applied only to the outpatient visit codes, GPC1x code, and other E/M services, while exempting most other services from those reductions, as some proposals do, and must support all doctors facing deep revenue losses because of COVID-19.

The following quotes below provide examples of the broad bipartisan support that Members of Congress have demonstrated for ensuring that the increases for Evaluation and Management Services are implemented, on schedule and without delay, on January 1, 2021.

- *“The Centers for Medicare & Medicaid Services will be issuing new payment policies in the Medicare Physician Fee Schedule for 2021. The changes have many positive attributes, including improvements for maternity care and much-needed payment increases for physicians delivering primary and complex office-based care to some of our nation’s most vulnerable patients.”*

**Letter from Representatives Ami Bera (D-CA) and Larry Bucshon (R-IN) to Speaker Pelosi and Minority Leader McCarthy signed by 231 Members of Congress.**

[https://www.aans.org//media/Files/AANS/letters/MPFS\\_CY2021\\_Letter\\_to\\_Leadership\\_updated.ashx?la=en&hash=40E93C20A845C1CC99FE3BF3AA952C5961D6B065](https://www.aans.org//media/Files/AANS/letters/MPFS_CY2021_Letter_to_Leadership_updated.ashx?la=en&hash=40E93C20A845C1CC99FE3BF3AA952C5961D6B065)

- *We, therefore, ask CMS and HHS to, where possible, engage with stakeholders in establishing fair and equitable payment solutions that address Medicare payment cuts at this time, while at the same time moving forward with policies to increase payments to primary care and other office-based specialties.”*

**Letter from Representatives Roger Marshall (R-KS), Bobby Rush (D-IL), Brad Wenstrup (R-OH) Terri Sewell (D-AL), David McKinley (R-WV), Tom O’Halloran (D-AZ), signed by 161 Members of Congress**

[https://marshall.house.gov/sites/marshall.house.gov/files/wysiwyg\\_uploaded/9.24.20%20HHS%20CMS%20MPFS%20Specialty%20Physician%20Cuts%20signed.pdf](https://marshall.house.gov/sites/marshall.house.gov/files/wysiwyg_uploaded/9.24.20%20HHS%20CMS%20MPFS%20Specialty%20Physician%20Cuts%20signed.pdf)

- *“The Committee applauds CMS for finalizing significant changes to outpatient evaluation and management (E/M) services in the Calendar Year 2020 Medicare Physician Fee Schedule (MPFS) scheduled to take effect January 1, 2021. This policy represents important first steps toward improving the documentation and valuation of these services and the Committee is eager to see if these changes begin to address workforce shortages in a number of cognitive physician specialties that affect Medicare beneficiaries’ access to care. Despite revisions to the outpatient E/M codes, the Committee is concerned that their valuation still does not accurately reflect the resources required to deliver them and will therefore be insufficient to sustain the workforce in many cognitive specialties.”*

**Fiscal Year 2021 Labor, Health and Human Services, Education, Appropriations Report as Passed in the House of Representatives Evaluation and Management Services. Page 162**

<https://appropriations.house.gov/sites/democrats.appropriations.house.gov/files/LHHS%20Report%20-%20GPO%20-%207.8.20.pdf>