

Sept. 10, 2021: National Advocacy Update

Looming threats to Medicare could affect patient access to care

With Congress back in Washington, D.C., following a short summer recess, there is much work to be done to avert looming cuts in the Medicare physician payment system. If left unchecked these cuts could cause a serious disruption in patient access to care.

Thankfully, Reps. Ami Bera, MD (D-CA) and Larry Bucshon, MD (R-IN) are stepping up.

They recently circulated a "Dear Colleague" letter (PDF) highlighting the financial uncertainty within the Medicare payment system and the dangers these cuts could have on physicians' ability to provide quality care for patients if Congress fails to enact legislation to address these problems.

They are asking their colleagues in the House of Representatives to add their names to this letter, and you can too by contacting your representative and asking them to sign on now.

In what amounts to a "perfect storm" of payment reductions going into effect on Jan. 1, physician practices face Medicare cuts on multiple fronts that amount to a combined 9.75% cut on Jan. 1. This would directly impact Medicare patients' ability to access care moving forward. And all of this comes at a time when physician practices are still recovering from the emotional and financial impact of the COVID-19 public health emergency.

A strong collection of bipartisan cosigners will help demonstrate to House and Senate leadership that this confluence of payment cuts needs to be addressed via legislation before the end of 2021.

Please contact your representative today and urge them to show their support by signing on to Reps. Bera and Bucshon's "Dear Colleague" letter.

AMA, medical societies submit comments on first No Surprises Act rule

Earlier this week, the AMA submitted comments on the July 13, 2021, Interim Final Rule (IFR): Requirements Related to Surprise Billing—Part I, which implements certain provisions of the No

Surprises Act (NSA), signed into law as part of the Consolidated Appropriations Act of 2021.

The IFR, the first of likely several NSA regulations, addresses foundational aspects of the law including the calculation of the “qualifying payment amount (QPA)” used to determine patient cost-sharing in a surprise billing situation, notice and consent requirements for the provision of out-of-network care and the preemption of certain state surprise billing laws (i.e. “specified state laws”). In the comment letter, the AMA, as did many impacted medical specialties and state medical associations, argued that the QPA did not accurately represent true median contracted rates and therefore should not play a significant role in the Independent Dispute Resolution process that is available to resolve surprise billing disputes between providers and payers.

Additionally, the AMA’s comment letter calls for additional clarity and transparency for those physicians navigating out-of-network billing in states with existing surprise billing laws. Finally, with regard to the notice and consent provisions, the AMA calls for additional process improvements to ensure patients get the information they need to make informed decisions without placing unnecessary administrative burden on physician practices.

Find out more about the IFR comment letter, a summary of the IFR and other AMA comments letters on the NSA rulemaking.

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