

CMS Proposes a 3.4% Cut to Medicare Payments

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The proposed 2024 Medicare Physician Fee Schedule sets a 3.4% reduction to the conversion factor for Medicare payment rates, further increasing the gap between practice expenses and reimbursement. The proposed conversion rate would be \$32.7476.

- ⇒ Telehealth reimbursement for patients in their homes would be reimbursed at the normally higher non-facility rate.
- ⇒ Telehealth services listed on the Medicare Telehealth Services List would continue to be covered and reimbursed through 2024.
- ⇒ Continued allowance of direct supervision by a practitioner through real-time telecommunications through 2024.
- ⇒ Permitting split or shared E/M visits to be billed based on either history, exam, or medical decision-making, or alternatively, time, through the end of 2024.

In addition, there were several proposed changes to various practice model programs:

- ⇒ All three MIPS reporting options would see an increase in the performance threshold from 75 points to 82 points.
- ⇒ Five new MIPS Value Pathways would be added: women's health, prevention and treatment of infectious disease; quality care in mental health/substance use disorder; quality care for ear, nose, and throat; and rehabilitative support for musculoskeletal care.
- ⇒ The Medicare Shared Savings Program would see several changes, including the revision of the MSSP quality performance standard, modifying the program's benchmarking methodology, and determining beneficiary assignment under the program.
- ⇒ Elimination of the 3.5% APM incentive payment at the end of the 2023 performance year (2025 payment year,) and transitioning to a Qualifying APM conversion factor in the 2024 performance year (2026 payment year.)

Reference: CMS Website