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Proposed Medicare Physician Fee Schedule Rule Jeopardizes Patient Care, Argues the Surgical Care Coalition

WASHINGTON, August 4, 2020 – The Medicare Physician Fee Schedule proposed rule released by the Centers for Medicare & Medicaid Services (CMS) for calendar year 2021 (CY2021) jeopardizes patient care, specifically surgical care. While the proposed rule takes steps to increase access to care through telehealth, it also has the potential to drastically reduce patients’ access to surgical care, just as many patients have delayed care due to COVID-19.

In the fee schedule announced by CMS, surgeons will see their Medicare payments cut by 9% for cardiac surgery, 8% for thoracic surgery, 7% for vascular surgery, 7% for general surgery, 7% for neurosurgery and 6% for ophthalmology for CY2021.

“We support steps to expand access to care, but this rule takes one step forward and several steps back by disregarding patients’ needs and the surgeons who care for them. The middle of a pandemic is no time for cuts to any form of health care, yet this proposed rule moves ahead as if nothing has changed. The health care system cannot absorb cuts of this magnitude,” said David B. Hoyt, MD, FACS, American College of Surgeons Executive Director. “The Surgical Care Coalition believes no physician should see payment cuts that will reduce patients’ access to care. This proposed rule would move forward with significant payment cuts that will only make the situation worse and harm patients.”

The proposed rule affirms, and for some surgical specialties increases, the cuts CMS announced last year, which are set to take effect January 1, 2021. These cuts will reduce payments to nearly all surgical specialties, including by as much as 9 percent for some surgeons. The policy was ill-informed and dangerous to patients even before the pandemic started but could be even more detrimental as our health care system continues to weaken under COVID-19.

To stop these cuts and preserve care for patients, Congress must act now. The Surgical Care Coalition is urging Congress to enact legislation to waive Medicare’s budget neutrality requirements for these E/M adjustments and to require CMS to apply the increased E/M adjustment to all 10- and 90-day global code values.

In a survey earlier this year, one-in-three private surgical practices stated that they are already at risk of closing permanently due to the financial strain of the COVID-19 crisis. In the same survey, it was found that nearly half of surgeons face more difficult financial decisions, and are responding by either cutting their own pay or paying employees in the face of declining revenues. This rule will likely force surgeons to take fewer Medicare patients leading to longer wait times and reduced access to care for older Americans.

About the Surgical Care Coalition
The Surgical Care Coalition advocates for access to quality surgical care for all Americans. The Surgical Care Coalition is comprised of 12 surgical professional associations that proudly represent more than 150,000 surgeons working across the country with a common goal of improving the quality of care, and quality of life, for all patients. The founding members have worked together for nearly three decades to promote sound policy solutions to the U.S. Congress and federal regulatory agencies to solve the biggest challenges in health care.