



October 30, 2020

The Honorable Ami Bera, MD
United States House of Representatives
Washington, DC 20515

The Honorable Larry Bucshon, MD
United States House of Representatives
Washington, DC 20515

Dear Representatives Bera and Bucshon:

The American College of Cardiology (ACC) commends you for your commitment to improving patient access to care as our health care system and clinicians on the front lines of the COVID-19 public health emergency face innumerable challenges. We are grateful for your tireless work to ensure essential health care services are available to vulnerable patients and to achieve payment stability for physician practices.

As you are aware, the Centers for Medicare & Medicaid Services' (CMS) final Medicare Physician Fee Schedule (MPFS) rule for CY 2020 included broad changes to reduce administrative burden, improve payment rates, and reflect current clinical practice, especially as it relates to E/M services. While we are supportive of the increase to E&M services, we are concerned that adhering to existing budget neutrality requirements for implementing the new policy will generate sizable cuts for various sections of the clinician community. At a time of great strain to our health care infrastructure, these cuts would restrict access to the many essential health care services our members provide to Medicare beneficiaries.

Given the ongoing COVID-19 pandemic, it is more important than ever to halt the implementation of any payment reductions that will further exacerbate the financial instability of health care provider practices. We thank you for bringing this issue to the forefront of discussions by sending a joint letter to House Leadership, along with 227 of your House colleagues, urging them to identify bipartisan solutions and quickly pass legislation to address these steep cuts. We are encouraged by your work toward identifying and developing bipartisan policy solutions to include in upcoming legislation moving through the House of Representatives. We look forward to working closely with you to advance these legislative proposals to safeguard cardiovascular care for patients across the country.

ACC envisions a world where innovation and knowledge optimize cardiovascular care and outcomes. As the professional home for the entire cardiovascular team, the mission of the College and its more than 52,000 members is to transform cardiovascular care and improve heart health. The ACC bestows credentials upon cardiovascular professionals who meet stringent qualifications and leads in the formation of health policy, standards and guidelines. The College also provides professional medical education, disseminates cardiovascular research through its world-renowned JACC Journals, operates national registries to measure and improve care, and offers cardiovascular accreditation to hospitals and institutions.

Cardiovascular disease touches the lives of millions of Americans and accounts for the highest costs to Medicare and private payors. The College is committed to exploring and providing solutions to optimize management of cardiovascular disease while the medical community adjusts to unprecedented disruptions.

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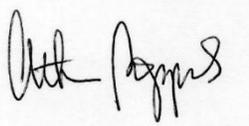
Cathleen C. Gates

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The COVID-19 pandemic has placed enormous stress on the health care system, forcing many practices to temporarily close or operate with reduced patient volume. Now more than ever, it is essential to ensure patients have access to cardiovascular care during and after the public health emergency by promoting the financial stability of practices and other health care institutions. If the proposed cuts contained in the Medicare Physician Fee Schedule were to go into effect, necessary payment increases for certain services would be offset by decreases in other services, and patient access to care would be drastically diminished at a particularly difficult time.

On behalf of our patients and member clinicians, I offer ACC's profound gratitude for addressing this important issue. Thank you for the work you are doing to support clinicians and the patients for whom they care. We remain committed to working with you and your colleagues to find a solution to this important issue and to preserve patient access to cardiovascular care.

Sincerely,



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