

INCREASING PATIENT ACCESS TO CARE

NEAR-TERM: STRENGTHENING MEDICARE FOR PATIENTS AND PROVIDERS

THE ISSUE:

Between 2001 and 2023, the costs of running medical practices have increased by 47%, while Medicare physician payments have declined 26% when adjusted for inflation, making it especially difficult for practices to stay in business. Physicians, like

all Americans, have seen prices rise due to inflation. However, there is no built-in mechanism within Medicare to ensure reimbursement keeps pace with inflationary trends. This unsustainable system limits patients' access to necessary care, particularly impacting rural, senior and underserved populations.

The **Strengthening Medicare for Patients and Providers Act** (H.R. 2474) aims to address this by updating the Medicare Physician Fee Schedule (MPFS) conversion factor to be equal to the estimated percentage increase in the Medicare Economic Index (MEI) starting in 2024, thereby creating a more stable and sustainable Medicare payment system. The MEI is a measure of inflation that physicians face through changes in practice expenses and wages.

ACC'S POSITION:

Significant reductions in physician payment for Medicare services and lack of inflationary updates exacerbate financial uncertainty for medical practices and threaten patient access to care. ACC urges Congress to work with the College

and the broader medical community to create sustainable and long-term solutions to bring more stability to the system and ensure clinicians can focus on providing high-quality patient care. Providing annual updates tied to inflation is a crucial step in creating a more stable system for both clinicians and patients.



Co-sponsor and support the **Strengthening Medicare for Patients and Providers Act** (H.R. 2474), introduced by Reps. Larry Bucshon, MD (R-IN) and Raul Ruiz, MD (D-CA).

KEY TAKEAWAYS



Clinicians are slated to see a 3.36% cut next year as proposed in the 2024 Medicare Physician Fee Schedule that will harm patients and practices.



CMS projects the MEI will increase 4.5% next year, yet clinicians will have to absorb increasing costs while payments decrease.



The Strengthening Medicare for Patients and Providers Act (H.R. 2474) would adopt the MedPAC recommendation to tie 2024 Medicare physician payments to the MEI.

LONG-TERM: VISION FOR OPTIMAL CV CARE

As the stewards of cardiovascular patients, the ACC is committed to developing and advancing solutions that will optimize the delivery of cardiovascular care, increase access to care, and improve patient outcomes and health. However, the following significant reforms are necessary within the current Medicare system to achieve this vision:

ESTABLISH SUSTAINABLE PAYMENT PRACTICES:

Stagnant and declining payment for Medicare services exacerbates financial uncertainty for health systems and practices and furthers disparities in care delivery.

Long-Term Congressional Action: Focus on ways to reform reimbursement models, including addressing budget neutrality limitations, to promote value and reward high-quality and high-valued outcomes. The ACC and the broader medical community welcome opportunities to engage with Congress on these issues through hearings, roundtables and other means to build support for much needed reform.

ENSURE ALL PATIENTS HAVE ACCESS TO HIGH-QUALITY CV CARE:

Strengthening patient access to high-quality and continuous care is a critical factor in optimizing care delivery and outcomes.

Long-Term Congressional Action: Develop longstanding legislative solutions to alleviate access to care issues including delays related to prior authorization and limitations on telehealth flexibilities within Medicare.

INVOLVE PATIENTS IN CARE DECISIONS:

Appropriate and meaningful patient engagement in accountable care can have a positive impact on improving health outcomes.

Long-Term Congressional Action: Support shared decision-making between patients and their clinicians. Ultimately, prevention is key - reducing barriers to specialty referral, preventive screening and early treatment are necessary to improve health outcomes.

SUPPORT CLINICIANS IN PROVIDING VALUE-BASED CARE:

Addressing the key issues outlined above will improve the viability of valuebased care models and position clinicians to better take on the inherent financial risk associated with these models. As clinicians make the transition to value-based care, retaining quality will be of utmost importance.

Long-Term Congressional Action: Reevaluate the effectiveness of the **Medicare Access and CHIP Reauthorization Act** to ensure that value-based care models are supported.