

# ACP Applauds Proposals to Increase Medicare Payment for Cognitive Care, Simplify Documentation | October 18, 2019

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*ACP provides some recommendations to the schedule and offers a wider list of recommendations regarding the Quality Payment Program*

Oct. 18, 2019 (ACP) – The American College of Physicians is pleased overall with several new proposed changes to the Medicare Physician Fee Schedule for 2020, although it is making some further recommendations as the document goes through final revisions.

“Internists applaud the Centers for Medicare and Medicaid Services for proposing significant improvements in the Physician Fee Schedule that would support physicians in providing the highest-quality care to patients,” said Dr. Ryan Mire, chair of ACP’s Medical Practice and Quality Committee. “This includes recognizing the value of primary care services and addressing efforts to streamline and reduce documentation burdens as ACP’s Patients Before Paperwork initiative suggests.”

The initial proposed 2020 fee schedule was an 819-page document. ACP responded with a 60-page letter outlining its recommendations regarding the Physician Fee Schedule and Quality Payment Program (QPP).

According to Mire, beneficial changes in the new proposed fee schedule include:

- Improved value and reimbursement for office and outpatient visits for 2021 based on the Current Procedural Terminology Editorial Panel guidelines and recommended values submitted by the American Medical Association/Specialty Society Relative Value Scale Update Committee.
- Documentation changes for evaluation/management (E/M) guidelines in which coding is based on the choice of medical decision making or time. The time option no longer requires 50% time in counseling, but rather includes total time for the same day of the face-to-face visit.
- Elimination of the history and physical exam to determine the level of E/M code.
- New add-on code for complex patient care to account for the intense, cognitive nature of outpatient visits.

- Increased payments for care management codes (i.e., transitions of care, chronic care management, and a new principal management code).
- Authorization of clinicians in all settings – other than just academic institutions – to review and verify notes made in the medical record by students, residents or nurses.

“These are all positive wins for our members,” Mire said. “ACP has been working hard for years to see these positive changes made, especially in valuing the cognitive services of an office visit that are so essential to primary care and E/M guideline changes that help reduce administrative burden on physicians.”

ACP did make recommendations for some changes to the fee schedule. “Some of the proposals still lack clarity and require more information than what is outlined in the proposed rule,” Mire said. “Specifically, the new principal management code, the circumstances for applying the new add-on code for complex patients, and the specifics of medical decision making for determining E/M level require more details and clarity to assist the physicians before implementation.”

As for the QPP, ACP is seeking a wider list of improvements. Specifically, Mire said, ACP would like to see these revisions:

- Delay the implementation of the new Merit-based Incentive Payment System (MIPS) Value Pathway, an overhaul of the MIPS program. Allow flexibility for it to be optional in the transition period while the details are finalized, and allow for physician stakeholder input and further education about the program.
- Maintain the cost category at 15% and do not increase it by 5%, as proposed, due to the flawed inappropriate attribution that currently exists.
- Address the performance gap that exists for small practices due to the unique challenges they face. ACP recommends a separate, lower MIPS performance score and lower thresholds for qualified participants for Advanced Alternative Payment Models.

ACP submitted its feedback and comments regarding the proposed rule on September 27, 2019, and is now awaiting the final ruling, which is estimated to be released in November with plans to be effective January 1, 2020.



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